

# Announced Premises Inspection Report 27 October 2016



## Grove Wellbeing Day Centre

**Type of Service: Day Care Setting**  
**Address: 120 York Road, Belfast, BT15 3HF**  
**Tel No: 028 9504 5866**  
**Inspector: Gavin Doherty**

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced premises inspection of Grove Wellbeing Day Centre took place on 27 October 2016 from 10:30 to 12:00.

The inspection sought to assess progress with any issues raised during and since the last premises inspection and to determine if the day care setting was delivering safe, effective and compassionate care and if the service was well led.

### Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However two issues were identified for attention by the registered provider. Refer to section 4.3

### Is care effective?

On the day of the inspection the premises supported the delivery of effective care.

### Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care. However one issue was identified for attention by the registered provider. Refer to section 4.5

### Is the service well led?

On the day of the inspection the management of the premises was considered to be well led.

This inspection was underpinned by The Day Care Setting Regulations (Northern Ireland) 2007 and The Day Care Settings Minimum Standards (DHSSPS, 2012).

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	2

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mrs Roberta Milligan, Registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

## 1.2 Actions/enforcement taken following the most recent premises inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the most recent premises inspection.

## 2.0 Service Details

<b>Registered organisation/registered provider:</b> Belfast HSC Trust/Mr Martin Joseph Dillon	<b>Registered manager:</b> Mrs Roberta Milligan
<b>Person in charge of the establishment at the time of inspection:</b> Mrs Roberta Milligan	<b>Date manager registered:</b> 06 February 2012
<b>Categories of care:</b> DCS-LD(E), DCS-MP(E), DCS-PH(E), DCS-I, DCS-PH, DCS-DE, DCS-A, DCS-SI, DCS-LD, DCS-MP	<b>Number of registered places:</b> 30

## 3.0 Methods/processes

Prior to inspection the following records were analysed: Previous premises inspection report, statutory notifications over the past 12 months, duty call log.

During the inspection the inspector met with Ms Irene Maguire, Registered Manager, Mr Danny McCartney, Mr Drew Denvir and Mr Brian Marley from Belfast HSC Trust Estates Department.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, and fire risk assessment.

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 22/07/16

The most recent inspection of the day care setting was an unannounced care inspection. The completed QIP was returned on 14 September 2016. This QIP will be validated by the specialist inspector at their next inspection

#### 4.2 Review of requirements and recommendations from the last premises inspection dated 20/06/13

Last care inspection statutory requirements		Validation of compliance
<b>Requirement 1</b> <b>Ref:</b> Regulation 27 (4) <b>Stated:</b> First time	Assurances must be sought from the Landlord, that the current procedures for the weekly test of the fire alarm and detection system, are fully implemented and maintained by all tenants of the centre.  <b>Action taken as confirmed during the inspection:</b> Inspector confirmed that suitable procedures are in place and being maintained at the time of inspection.	<b>Met</b>
<b>Requirement 2</b> <b>Ref:</b> Regulation 27 (2) <b>Stated:</b> First time	Install a hold open device, suitably linked to the fire alarm and detection system to the entrance door of the main activity space.  <b>Action taken as confirmed during the inspection:</b> Inspector confirmed this work had been undertaken at the time of inspection.	

#### 4.3 Is care safe?

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this premises inspection.

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape.

The standard used by the registered person to determine the overall level of fire safety within the premises takes account of the interaction between the physical fire precautions, the fire hazards, the number of service users, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment.

This supports the delivery of safe care.

Two issues were however identified for attention during this premises inspection. These are detailed in the 'areas for improvement' section below.

## Areas for improvement

1. A risk assessment with regards to the Control of Legionella bacteria in the premises hot and cold water systems was undertaken on 27 June 2016 and suitable control measures have been implemented and are being maintained. There are however a number of outstanding issues which are still to be completed. Mr Danny McCartney confirmed that these outstanding items are programmed to be completed within the current financial year. (Refer to item 1 in the Quality Improvement Plan.)
2. An inspection of the Day Centre's fixed electrical installation was completed on 14 June 2016 as part of an overall inspection of the premises, authorised by Belfast City Council. Mr Danny McCartney confirmed following the inspection, on 31 October 2016 that all outstanding requirements flowing from this inspection have been fully implemented.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>1</b>
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### 4.4 Is care effective?

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance. Service users are involved where appropriate in decisions around the upkeep of the premises.

This supports the delivery of effective care.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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### 4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit. Service users are consulted about decisions around décor where appropriate.

This supports the delivery of compassionate care.

One issue was however identified for attention during this inspection. This is detailed in the 'areas for improvement' section below.

## Areas for improvement

1. The level of decoration throughout the premises was discussed at the time of the inspection. Mr Danny McCartney agreed that corner guards and chair guard rails would be fitted as required throughout the premises. The centre's corridor and main activity spaces would also be redecorated before the close of the current financial year. (Refer to item 2 in the Quality Improvement Plan.)

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>1</b>
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#### 4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

Arrangements are in place for managing premises related incidents/notifiable events and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person. There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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#### 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with **Mrs Roberta Milligan, Registered Manager**, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises, RQIA would apply standards current at the time of that application.

#### 5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/manager meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Setting Regulations (Northern Ireland) 2007

#### 5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Day Care Settings Minimum Standards (DHSSPS, 2012). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

### 5.3 Actions taken by the Registered Provider

The QIP should be completed and detail the actions taken to meet the legislative requirements stated. The registered provider should confirm that these actions have been completed and return completed QIP to **the web portal** for review by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

## Quality Improvement Plan

### Recommendations

#### Recommendation 1

**Ref:** Standard 25.7

**Stated:** First time

**To be completed by:**  
31 March 2017

The registered provider should ensure that any outstanding issues in relation to the control of legionella bacteria in the premises hot and cold water systems are completed in a timely manner. Confirmation should be provided to RQIA upon completion.

**Response by registered provider detailing the actions taken:**  
Grove Wellbeing Day Centre has Belfast City Council as Land lord. Belfast City Council has provided registered manager with details of the last Legionella report dated 23.09.16. This report has been forwarded on to RQIA.

#### Recommendation 2

**Ref:** Standard 25.1

**Stated:** First time

**To be completed by:**  
31 March 2017

The registered provider should ensure that the areas of redecoration agreed at the time of the inspection are completed in a timely manner. It was agreed that corner guards and chair guard rails would be fitted as required throughout the premises. The centre's corridor and main activity spaces would also be redecorated. Confirmation should be provided to RQIA upon completion.

**Response by registered provider detailing the actions taken:**  
BHSCT maintenance department have arranged for works to be carried out at Grove Wellbeing Day Centre. Chair guard rails and corner guards will be fitted before 25.12.16 and redecoration will commence in January 2017.

*\*Please ensure this document is completed in full and returned via the portal\**





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