



The Regulation and
Quality Improvement
Authority

Inspector: Kieran Monaghan
Inspection ID: IN021652

Carlisle Day Centre
RQIA ID: 11180
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Announced Estates Inspection
of
Carlisle Day Centre, Belfast
on
08 October 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 08 October 2015 from 10:20am. to 12:00pm. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the;

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Day Care Settings Regulations (Northern Ireland) 2007
- The Day Care Settings Minimum Standards (DHSSPS, 2012)

1.1 Actions/Enforcement Taken Following the Last Inspection

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

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	8	0

The details of the QIP within this report were discussed with Mr. Danny McCartney, Estates Operations Manager, Mr. Drew Denvir, Estates Officer and Mr. Brian Marley, Fire Safety Officer, Belfast Health and Social Care Trust, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Belfast Health and Social Care Trust / Mr. Martin Joseph Dillon.	Registered Manager: Mr. Colin Morgan.
Person in Charge of the Premises at the Time of Inspection: Mr. Paul Wils, Day Care Worker.	Date Manager Registered: 27 February 2015
Categories of Care: DCS-DE, DCS-I	Number of Registered Places: 30
Number of Service Users Accommodated on Day of Inspection: 20	Weekly Tariff at Time of Inspection: Not applicable

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards and themes have been met:

Standard 25: Premises and Grounds

Standard 27: Safe and Healthy Working Practices

Standard 28: Fire safety

4. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed: The previous estates inspection report and the statutory notifications over the past 12 months.

Discussions with Mr. Danny McCartney, Estates Operations Manager, Mr. Drew Denvir, Estates Officer and Mr. Brian Marley, Fire Safety Officer, Belfast Health and Social Care Trust.

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, fire risk assessment, etc.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of this service was an unannounced primary care inspection on 04 August 2015. The completed QIP for this inspection was returned to RQIA on 28 September 2015 and approved by the care inspector on 07 October 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection 15 February 2013

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 26(2)(a)	The improvements that have been carried out to make the premises more dementia friendly should be followed up with an audit against the current standards of good practice for dementia friendly environments.	Partially Met
	Action taken as confirmed during the inspection: The report for the dementia audit was not presented for review during this estates inspection. A copy of this report should be forwarded to RQIA. Reference should be made to requirement 1 in the attached QIP.	
Requirement 2 Ref: Regulation 26(2)(b)	The outside paved surfaces should be cleaned.	Partially Met
	Action taken as confirmed during the inspection: The outside surfaces had been cleaned following the last estates inspection. These surfaces however required to be cleaned again. Reference should be made to requirement 2 in the attached QIP.	
Requirement 3 Ref: Regulations 14(1)(a) 14(1)(c) 26(2)(a)	The improvement works to the front entrance steps and ramp should be completed.	Met
	Action taken as confirmed during the inspection: It is good to report that an extensive scheme of improvement works had been carried out to the front of the premises. This work included a new ramped access and new steps. This very valuable improvement is to be commended.	

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 4 Ref: Regulations 13(7) 14(1)(a) 14(1)(c) 26(2)(l)	The 'dead legs' in the plumbing pipework in the staff toilets should be removed.	Met
	Action taken as confirmed during the inspection: These dead legs had been removed.	
Requirement 5 Ref: Regulations 13(7) 14(1)(a) 14(1)(c) 26(2)(l)	The issues identified for attention in the report for the water risk assessment that was carried out on 30 October 2012 should be addressed. The shower should be descaled, cleaned and disinfected on a quarterly basis and records should be available for the ongoing monthly temperature checks to the hot (unblended and blended) and cold water.	Not Met
	Action taken as confirmed during the inspection: The report for the water risk assessment that was carried out on 30 October 2012 was not presented for review during this estates inspection. Significant changes had however recently been made to the plumbing and heating systems in the premises. The water risk assessment should be reviewed, updated and actioned as required to take account of these changes. A copy of the report for this review should be forwarded to RQIA. The shower was cleaned and disinfected on 08 January 2015 on the basis of a risk assessment. The showers should be cleaned and disinfected on a quarterly basis. Records for the monthly checks to the unblended hot water and cold water temperatures were not presented for review during this estates inspection. Reference should be made to requirement 3 in the attached QIP.	

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 6 Ref: Regulations 14(1)(a) 14(1)(c) 26(2)(l)	The current position in relation to the issues identified for attention in the report for the periodic inspection and test to the fixed wiring that was carried out on 9 April 2008 should be clarified.	Not Met
	Action taken as confirmed during the inspection: Documentation in relation to this issue was not presented for review during this estates inspection. Reference should be made to requirement 4 in the attached QIP.	
Requirement 7 Ref: Regulations 26(4)(d)(ii) 26(4)(d)(iv)	The issue in relation to the different alarm sounders noted in the report for the recent inspection and test to the fire detection and alarm system should be addressed. Monthly function checks should be carried out to the emergency lights.	Met
	Action taken as confirmed during the inspection: This issue had been addressed.	
Requirement 8 Ref: Regulations 26(4)(b) 26(4)(c) 26(4)(d)(iv)	The remaining issue identified for attention in the report for the fire risk assessment that was carried out on 1 October 2012 should be addressed (remedial works to fire doors). The recommendation sections of the fire risk assessment that was carried out in July 2009 should be reviewed to ensure that all of the issues identified for attention have been addressed and signed off. The level of fire door protection to the means of escape should also be reviewed and enhanced as required.	Partially Met
	Action taken as confirmed during the inspection: The reports for the previous fire risk assessments (July 2009 and October 2012) were not presented for review during this estates inspection. Mr. Marley however agreed to check the position in relation to the recommendations for these previous fire risk assessments and confirm same to RQIA. Reference should be made to requirement 5 in the attached QIP.	

5.3 Standard 25: Premises and grounds - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

Is Care Safe? (Quality of Life)

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this Estates inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. This supports the delivery of safe care.

No issues were identified for attention during this Estates inspection.

Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services is provided in the premises. This supports the delivery of effective care.

No issues were identified for attention during this Estates inspection.

Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. It is good to report that a significant amount of improvement work had been completed to the premises since the previous Estates inspection. This work included the environmental improvement scheme at the front, new fascias to the roof, new flooring and redecoration in some areas. This supports the delivery of compassionate care.

No issues were identified for attention during this Estates inspection.

Areas for Improvement

Not applicable.

Number of Requirements	0	Number Recommendations:	0
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5.4 Standard 27: Safe and healthy working practices - *The Centre is maintained in a safe manner, and safe and healthy working practices are promoted in all aspects of its work.*

Is Care Safe? (Quality of Life)

A range of documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this Estates inspection. This supports the delivery of safe care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

The nature and needs of the residents are considered as part of the risk assessment processes and this is reflected in the management of the premises. This supports the delivery of effective care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Compassionate? (Quality of Care)

There are health and safety procedures and control measures in place which support the delivery of compassionate care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Areas for Improvement

1. The commissioning documentation for the gas new heating boilers should be followed up. The incoming gas pipework to the premises should also be earth bonded. Reference should be made to requirement 7 in the attached QIP.
2. The current position in relation to the replacement of the actuator for the hoist as noted in the report for the thorough examination that was completed on 16 April 2015 should be confirmed to RQIA. Reference should be made to requirement 7 in the attached QIP.
3. The fans in the bathroom and in the hairdressing room were out of commission. These fans should be made good. Reference should be made to requirement 7 in the attached QIP.

Number of Requirements	1	Number Recommendations:	0
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5.5 Standard 28: Fire safety - *Fire safety precautions are in place that reduce the risk of fire and protect service users, staff and visitors in the event of fire.*

Is Care Safe? (Quality of Life)

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. This supports the delivery of safe care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

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 residents, 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 effective care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Compassionate? (Quality of Care)

The standard used by the registered persons to determine the extent of fire safety protection measures that are appropriate for the premises recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Areas for Improvement

1. The most recent fire risk assessment for the premises was carried out on 28 January 2015. The current position in relation to addressing the issues that were identified for attention in the report for this fire risk assessment should be confirmed to RQIA. Reference should be made to requirement 7 in the attached QIP.
2. At present two of the service users smoke. Confirmation that risk assessments are in place in relation to these two service users should be provided to RQIA. In addition the need for a fire blanket in an easily accessible location in close proximity to the area used for smoking should be reviewed. The fire risk assessor should be consulted as part of this review. Reference should be made to requirement 7 in the attached QIP.
3. The issue noted on the report for the inspection and service of the fire detection and alarm system should be clarified. The next routine duration inspection and test to the emergency lights should be completed. Reference should be made to requirement 8 in the attached QIP.
4. The switch room should be cleared out and the Co2 fire extinguisher in this switch room and the dry powder fire extinguisher in the boiler room should be serviced. Reference should be made to requirement 8 in the attached QIP.

Number of Requirements	2	Number Recommendations:	0
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5.6 Additional Areas Examined

No additional areas were examined during this estates inspection.

6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr. Danny McCartney, Estates Operations Manager, Mr. Drew Denvir, Estates Officer and Mr. Brian Marley, Fire Safety Officer, Belfast Health and Social Care Trust, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/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 person/manager 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

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

6.2 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.

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to estates.mailbox@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered persons from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered persons with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory Requirements

<p>Requirement 1</p> <p>Ref: Regulation 26(2)(a)</p> <p>Stated: Second time</p> <p>To be Completed by: 07 January 2016</p>	<p>A copy of the report for the dementia audit should be forwarded to RQIA.</p>
	<p>Response by Registered Manager Detailing the Actions Taken: A copy of the dementia audit carried out the 5/5/2013 has been sent to the RQIA on the 13/11/15. All recommendations have been actioned.</p>
<p>Requirement 2</p> <p>Ref: Regulation 26(2)(b)</p> <p>Stated: Second time</p> <p>To be Completed by: 04 December 2015</p>	<p>The outside surfaces should be cleaned again.</p>
	<p>Response by Registered Manager Detailing the Actions Taken: A job requisition has been processed for the cleaning of the outside surfaces C590704</p>
<p>Requirement 3</p> <p>Ref: Regulations 13(7) 14(1)(a) 14(1)(c) 26(2)(l)</p> <p>Stated: Second time</p> <p>To be Completed by: 04 December 2015 and ongoing</p>	<p>The water risk assessment should be reviewed, updated and actioned as required to take account of the changes to the plumbing and heating installations. A copy of the report for this review should be forwarded to RQIA. The showers should be cleaned and disinfected on a quarterly basis. Records for the monthly checks to the unblended hot water and cold water temperatures should be available for review during inspections.</p>
	<p>Response by Registered Manager Detailing the Actions Taken: This is being addressed by the estates department and has been sent to their risk assessment department. Once completed the risk assessment will be forwarded to the RQIA. This was confirmed on the 13/11/15 by the estates manager Maraid McCartan. The records for the monthly checks to the unblended hot water and cold water temperatures were available on the day of the inspection and can be sent to RQIA if requested.</p>

Quality Improvement Plan

Statutory Requirements

<p>Requirement 4</p> <p>Ref: Regulations 14(1)(a) 14(1)(c) 26(2)(l)</p> <p>Stated: Second time</p> <p>To be Completed by: 04 December 2015</p>	<p>Documentation in relation to the inspection and test to the fixed wiring installation should be forwarded to RQIA.</p> <hr/> <p>Response by Registered Manager Detailing the Actions Taken: Drew Denvir Manager -estates departement confirmed on the 12/11/15 that he has forwarded certification to the RQIA</p>
<p>Requirement 5</p> <p>Ref: Regulations 26(4)(b) 26(4)(c) 26(4)(d)(iv)</p> <p>Stated: Second time</p> <p>To be Completed by: 04 December 2015</p>	<p>The recommendations for the previous fire risk assessments (July 2009 and October 2012) should be reviewed and the outcome of this review should be confirmed to RQIA.</p> <hr/> <p>Response by Registered Manager Detailing the Actions Taken: The previous fire risk assessment in July 2009 and October 2012 have been reviewed by the fire officer and all action has been taken. The fire officer reviewed this and the outcome has been sent to RQIA. This was confirmed by the fire officer on 12/11/15. there is only one job outstanding that is the smoke detector in the communication room needs to be moved and a job requisition has been processed the number is C590435</p>
<p>Requirement 6</p> <p>Ref: Regulations 13(7) 14(1)(a) 14(1)(c) 26(2)(c) 26(2)(l)</p> <p>Stated: First time</p> <p>To be Completed by: 04 December 2015</p>	<p>The commissioning documentation for the new gas heating boilers should be followed up. The incoming gas pipework to the premises should also be earth bonded. The current position in relation to the replacement of the actuator for the hoist as noted in the report for the thorough examination that was completed on 16 April 2015 should be confirmed to RQIA. The fans in the bathroom and in the hairdressing room should be made good.</p> <hr/> <p>Response by Registered Manager Detailing the Actions Taken: The commissioning documentation for the new gas heating boilers are being followed up. The incoming gas pipework to the premises are being worked on by contractors and the documentation has not been made available yet. This will be forwarded to RQIA when completed. This was confirmed by the estates manager, Drew Denvir on 12/11/15. The fans in the bathroom and hairdressing rooms have been processed C527479 and require new motors, estates are aware and will follow this up.</p>

Quality Improvement Plan

Statutory Requirements

Requirement 7

Ref: Regulations

26(4)(a)

26(4)(b)

Stated: First time

To be Completed by:
04 December 2015

The current position in relation to addressing the issues that were identified for attention in the report for the fire risk assessment that was carried out on 28 January 2015 should be confirmed to RQIA. Confirmation that risk assessments are in place in relation to the two service users who smoke should be provided to RQIA. In addition the need for a fire blanket in an easily accessible location in close proximity to the area used for smoking should be reviewed. The fire risk assessor should be consulted as part of this review.

Response by Registered Manager Detailing the Actions Taken:

Fire blanket has been installed the garden area where the service users smoke. the fire risk assessments for two smokers have been forwarded to RQIA on the 13/11/15. The three daycare workers and the manager are fire warden trained, Therefore, there is always a fire warden on duty. Individual risk assessments for smokers are on file. Daily/ weekly/ monthly checks are carried out and recorded. Fire safety records are in place and are audited on a monthly basis by the manager. Locks removed from dining room door to leave a handle only as easy open device on 29.10.15. The electric fire in the sitting room was disconnected following last inspection. An easy open device was fitted to hair dressing room. The fire officer has requested that the estates manager address the following that the high and low level vents in dry goods store have not been confirmed as fire rated and should be changed to FD300 doors or the vents should be sealed with suitable 1/2 HRFR material. Job Requisition for smoke detector in communication room is C590435. the issue of car parking by local residents has been escalated up to Danny McCartney and Maraid McCartan for further advice.

Requirement 8

Ref: Regulations

26(4)(b)

26(4)(d)(i)

26(4)(d)(iv)

Stated: First time

To be Completed by:
04 December 2015
and ongoing

The issue noted on the report for the inspection and service of the fire detection and alarm system should be clarified. The next routine duration inspection and test to the emergency lights should be completed. The switch room should be cleared out and the Co2 fire extinguisher in this switch room and the dry powder fire extinguisher in the boiler room should be serviced.

Response by Registered Manager Detailing the Actions Taken:

The fire alarm system is serviced quarterly by outside contractors and was last serviced on 01/09/15. The emergency lights were checked on the 2.11.15. This is carried out monthly, the fire extinguishers and the switch room have been carried out. The fire detection and alarm system have been verified by the fire officer. this was confirmed to me in writing on the 12/11/15. An emergency light check by external contractor has been requested by the manager.

Registered Manager Completing QIP	Fionnuala Breslin	Date Completed	13/11/2015
Registered Person Approving QIP	Martin Dillon	Date Approved	18/11/2015
RQIA Inspector Assessing Response	K. Monaghan	Date Approved	*19/11/15

* Clarification or follow up required on some items.

****Please ensure the QIP is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address****