

# Unannounced Variation Application Premises Inspection Report 19 July 2018



**Mantlin Cottage  
RQIA ID: 1139**

**Variation Reference  
VA010273**

**Type of service: Residential Care Home  
Address: Mantlin Rd, Kesh BT93 1TU  
Tel No: 028 68631248  
Inspector: Raymond Sayers**

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 service from their responsibility for maintaining compliance with legislation, standards and best practice.

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home providing care for nine service users with a learning disability care category.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Praxis care Group/Challenge/Andrew James Mayhew	<b>Registered Manager:</b> Derek Maxwell
<b>Person in charge at the time of inspection:</b> Lisa Boylan (Administrator)	<b>Number of registered places:</b> 9

### 4.0 Inspection summary

An unannounced inspection took place on 18 July 2018 from 13:10 to 15:15

This inspection was underpinned by:

- The Residential Care Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)

The purpose of the inspection was to verify that issues related to variation application ref VA010273 had been implemented.

The following areas were examined during the inspection:

- Accommodation associated with the variation application
- A sample of bedroom & communal areas accommodation
- Bath/shower room accommodation
- Kitchen, laundry, boiler room accommodation
- Fire risk assessment
- Fire safety user control monitoring of fire alarm and emergency lighting systems
- Building services maintenance certificates
- Legionella risk assessment
- Legionella prevention user controls monitoring & maintenance certificates
- BS7671 Fixed Electrical Installation, periodic inspection certificate

The findings of this report will provide the provider with the necessary information to assist them to fulfil their responsibilities.

### 5.0 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	3

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Lisa Boylan, Administrator, as part of the inspection process. The timescales for completion commence from the date of inspection.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

## 6.0 The inspection

### Fire Safety

1. The fire risk assessment was completed by an accredited fire risk assessor on 31 July 2017 and the risk evaluation recorded was "Trivial". A number of action plan recommendations were listed for implementation by the registered manager; these were not validated as completed on the risk assessment report action plan.

### Health & safety

2. The legionella risk assessment action plan recommendations were not validated as implemented, by a responsible person/manager. The monitoring of hot and cold water temperatures in the distribution systems is completed and a shower head sterilisation regime is recorded by site personnel. Water storage tanks and distribution systems were sterilised 18 April 2018.
3. The periodic inspection report for the electrical installation IPN4/0044302 completed on 10 March 2016 was evaluated as satisfactory, with three items listed as requiring improvement. The review date listed on the report was 10 March 2017, the inspection engineer had indicated that a retest/inspection was due again after a twelve months period

### Areas for improvement

- Fire risk assessment action plan recommendations must be validated as complete by the registered person/manager.
- Legionella risk assessment action plan recommendations must be validated as complete by the registered person/manager.
- The BS7671 periodic inspection report for the electrical installation must be currently valid, and compliant with the Electricity at Work Regulations.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	3

## 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Lisa Boylan, Administrator, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 residential care home. 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.

## 7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with:

- The Residential Care Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)

## 7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 29.1  <b>Stated:</b> First time  <b>To be completed by:</b> 12 September 2018	The registered person shall validate completion of items on the fire risk assessment works action plan.  Ref: 6.1  <b>Response by registered person detailing the actions taken:</b> All works have been emailed to Sharon Massey, Radius Housing, Landlord to complete and is aware that works are to be carried out by the 12 <sup>th</sup> Spetember 2018. Follow up email sent on 23.08.18
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 27.9  <b>Stated:</b> First time  <b>To be completed by:</b> 12 September 2018	The registered person shall validate completion of items on the legionella risk assessment works action plan.  Ref: 6.2  <b>Response by registered person detailing the actions taken:</b> All works have been emailed to Sharon Massey, Radius Housing, Landlord to complete and is aware that works are to be carried out by the 12th Spetember 2018. Follow up email sent on 23.08.18

<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 27.10</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 12 September 2018</p>	<p>The registered person shall ensure that the BS7671 periodic inspection report for the electrical installation is currently valid, and assessed as compliant with the Electricity at Work Regulations.</p> <p>Ref: 6.3</p>
	<p><b>Response by registered person detailing the actions taken:</b> All works have been emailed to Sharon Massey, Radius Housing, Landlord to complete and is aware that works are to be carried out by the 12th Spetember 2018. Follow up email sent on 23.08.18</p>

*\*Please ensure this document is completed in full and returned via Web Portal\**



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