



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	IN021906
Establishment ID No:	1559
Name of Establishment:	Crozier House Residential Care Home, Banbridge
Date of Inspection:	24 March 2015
Inspector's Name:	K. Monaghan

1.0 GENERAL INFORMATION

Name of Home:	Crozier House Residential Care Home
Address:	Meeting House Road Banbridge BT32 3ER
Telephone Number:	028 406 62 734
Registered Responsible Person:	Southern Health and Social Care (HSC) Trust (Ms. Mairead McAlinden, Chief Executive)
Registered Manager:	Mrs. Iris Cromie
Person in Charge of the Home at the time of Inspection:	Mrs. Iris Cromie, Registered Manager
Other person(s) present during inspection:	Mrs. Tiarna Armstrong, Head of Service, Southern HSC Trust
Type of establishment:	Residential Care Home
Categories of Care:	RC-I
Conditions of Registration:	The home is approved to provide care on a day basis only to 4 persons
Number of Residents:	35
Date and time of inspection:	24 March 2015 (10:00am. – 11:35am.)
Date of previous Estates inspection:	07 October 2014
Names of Inspectors:	Bronagh Duggan, Care Inspector Kieran Monaghan, Estates Inspector

2.0 INTRODUCTION

The Regulation and Quality Improvement Authority (RQIA) is empowered under the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect residential care homes.

This is a report of an announced inspection to assess the quality of the premises and grounds in which the service is being provided including the upkeep of the building and engineering services and equipment. The report details the extent to which the standards measured during inspection were met.

3.0 PURPOSE OF THE INSPECTION

The purpose of this inspection was to consider whether the premises and grounds were safe, well maintained and remain suitable for their stated purpose in compliance with legislative requirements and current minimum standards. This was achieved through a process of evaluation of available evidence.

The Regulation and Quality Improvement Authority aims to use inspection to support providers in improving the quality of services rather than only seeking compliance with regulations and standards.

The aims of the inspection were to examine the estates related policies, practices and monitoring arrangements for the provision of residential care homes, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Residential Care Homes Regulations (Northern Ireland) 2005
- Residential Care Homes Minimum Standards (DHSSPS, 2011)

Other published standards which guide best practice may also be referenced during the Inspection process.

4.0 METHODS/PROCESS

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

- Discussions with Mrs. Iris Cromie, Registered Manager and Mrs. Tierna Armstrong
- A review of the internal areas of the premises
- Evaluation and feedback

Any other information received by RQIA about this regulated establishment has also been considered by the inspector in preparing this inspection report.

5.0 CONSULTATION PROCESS

During the course of the inspection the inspectors spoke to Mrs. Iris Cromie, Registered Manager and Mrs. Tierna Armstrong.

6.0 INSPECTION FOCUS

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Residential Care Homes Minimum Standards:

Standards inspected:

- Standard 27 - Premises and grounds
- Standard 28 - Safe and healthy working practices
- Standard 29 - Fire Safety

This Estates inspection focused on the current position in relation to an application by the registered persons for a variation to the conditions of registration. This variation application related to a change in the categories of care to include dementia care for up to five residents and an overall reduction in the number of residents accommodated in the home from 35 to 27.

In addition to the variation application the issues included in the Quality Improvement Plan in connection with the previous Estates inspection to the home that was completed on 07 October 2014 were also reviewed.

7.0 PROFILE OF SERVICE

Crozier House Statutory Residential Home is a purpose built statutory home within close walking distance to the town centre of Banbridge.

The organisation in control is the Southern Health and Social Care Trust and Mrs. Iris Cromie is the Registered Manager with responsibility for the day to day management of the home. The home is registered to accommodate a maximum of thirty five residents requiring residential care in Category I - Old and Infirm.

Car parking spaces are available to the front of the building.

8.0 SUMMARY

Following this Estates inspection of Crozier House Residential Care Home in Banbridge on 24 March 2015, improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

- Standard 27 - Premises and grounds
- Standard 28 - Safe and healthy working practices
- Standard 29 - Fire Safety

This resulted in six requirements. These are outlined in the Quality Improvement Plan appended to this report.

The Estates inspector would acknowledge the assistance Mrs. Iris Cromie, Registered Manager and Mrs. Tierna Armstrong, throughout the inspection.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from the previous Estates inspection on 07 October 2014:

The previous Estates inspection to this home was carried out on 07 October 2014. The following issues should be noted with regard to the issues included in the Quality Improvement Plan for the previous Estates inspection that was carried out on 07 October 2014:

Standard 27 – Premises and grounds				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.1	Regulations 27(2)(b) 27(2)(d)	Previous QIP Item 1 (07 October 2014) Confirmation in relation to completion of the remedial works to resolve the water ingress issue and making good the decor in the center toilet opposite the hairdressing room should be provided to RQIA.	The remedial works to the centre toilet opposite the hairdressing room had not been completed. Mrs. Cromie confirmed that there was an issue to be resolved in relation to water ingress from the roof before these remedial works could be carried out.	The current position in relation to the remedial works to the roof and the toilet should be confirmed to RQIA. Reference should be made to item 1 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from the previous Estates inspection on 07 October 2014 continued:

Standard 28 - Safe and healthy working practices				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.2	Regulations 27(2)(b) 27(2)(c) 27(2)(d)	Previous QIP Item 2 (07 October 2014) The extract fan in the center toilet opposite the hairdressing room should be checked and repaired or replaced as required. The ceiling in the corridor at the light well at bedroom 13 should also be repaired.	The ceiling in the corridor at the light well at bedroom 13 had been repaired. The extract fan had not been replaced as this was to be completed as part of the remedial works to the centre toilet. Refer also to item 9.1.1 above. Reference should be made to item 1 in the attached Quality Improvement Plan.	The current position in relation to the remedial works to the roof and the toilet should be confirmed to RQIA. Reference should be made to item 1 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from the previous Estates inspection on 07 October 2014 continued:

Standard 28 - Safe and healthy working practices				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.3	Regulations 14(2)(a) 14(2)(c) 27(2)(c) 27(2)(q)	Previous QIP Item 3 (07 October 2014) The current position in relation to the twice weekly flushing of the sanitary facilities which are accessed via the smoking room, the monthly cold water temperature checks at the sentinel outlets and the issues that had previously been identified for attention in relation to the water tanks should be confirmed to RQIA.	Mrs. Cromie confirmed that the twice weekly flushing of the water outlets was being carried out by the domestic staff. Information in relation to the monthly cold water temperature checks at the sentinel outlets and the issues that had previously been identified for attention in relation to the water tanks was not presented for review during this Estates inspection.	The current position in relation to the monthly cold water temperature checks at the sentinel outlets and the issues that had previously been identified for attention in relation to the water tanks should be confirmed to RQIA. Reference should be made to item 3 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from the previous Estates inspection on 07 October 2014 continued

Standard 28 - Safe and healthy working practices				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.4	Regulations 14(2)(a) 14(2)(c) 27(2)(c) 27(2)(q)	Previous QIP Item 4 (07 October 2014) The information in relation to the current safety inspections to the gas equipment and gas installation should be forwarded to RQIA.	The information in relation to the current safety inspections to the gas equipment and gas installation was not presented for review during this Estates inspection. This information is held by the Trust's Estates department.	A copy of the report for the current safety inspections to the gas equipment and gas installation should be forwarded to RQIA. Reference should be made to item 4 in the attached Quality Improvement Plan.
9.1.5	Regulations 14(2)(a) 14(2)(c) 27(2)(c) 27(2)(q)	Previous QIP Item 5 (07 October 2014) The information in relation to the control measures in place for the prevention or control of legionella bacteria in the water system should be forwarded to RQIA.	The information in relation to the control measures in place for the prevention or control of legionella bacteria in the water system was not presented for review during this Estates inspection. This information is held by the Trust's Estates department.	Details of the control measures in place for the prevention or control of legionella bacteria in the water system should be forwarded to RQIA. Reference should be made to item 5 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from the previous Estates inspection on 07 October 2014 continued:

Standard 30 – Fire safety				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.6	Regulation 27(4)(b)	Previous QIP Item 6 (07 October 2014) The appropriate notices should be fitted at each break glass unit.	Appropriate notices had been fitted at the fire alarm break glass units.	N/A
9.1.7	Regulation 27(4)(b)	Previous QIP Item 7 (07 October 2014) The residents' call system should be extended to cover the smoking room.	The residents' smoking room was not reviewed during this Estates inspection as there was flooring works ongoing. Mrs. Cromie however confirmed that the residents' call system had been extended to the smoking rooms.	It was noted that at present none of the residents smoke.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from the previous Estates inspection on 07 October 2014 continued:

Standard 30 – Fire safety				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.8	Regulations 27(4)(a) 27(4)(b) 27(4)(c)	Previous QIP Item 8 (07 October 2014) The action plan for the previous fire risk assessment should be signed off. The registered persons should put in place a prioritised plan of action to address the remaining issues from the fire risk assessment that was completed on 17 April 2014. This should be based on firm timescales. A copy of this programme of work should be forwarded to RQIA.	Work was ongoing in relation to the installation of the free swing self-closing devices on the bedroom doors. The position in relation to the details for the other remaining works that are to be completed in relation to the fire risk assessment was not clear.	The fire risk assessment is due for review on 17 April 2015. A copy of the report for this review should be forwarded to RQIA. Reference should be made to item 6 in the attached Quality Improvement Plan.
9.1.9	Regulations 27(4)(b) 27(4)(d)(i)	Previous QIP Item 9 (07 October 2014) Fire stopping should be carried out to the ceiling in the boiler room where the cable for the gas detection system passes through.	This issue was not reviewed during this Estates inspection. Mrs. Cromie however confirmed that this fire stopping work had been completed.	N/A

9.0 INSPECTION FINDINGS CONTINUED

9.2 **Standard 27 - Premises and grounds** - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

- 9.2.1 The following issues were identified for attention in relation to this standard during this Estates inspection:
- 9.2.2 The current position in relation to the application by the registered persons for a variation to the conditions of registration was discussed during this inspection. This variation application relates to a change in the categories of care to include dementia care for up to five residents and an overall reduction in the number of residents accommodated in the home from 35 to 27. The five places for dementia care include three permanent residents and two respite residents. On the basis of the discussions in relation to this change to the categories of care and the issues referred to in section 9.2.3 below, RQIA will review the variation application. The outcome of this review will be confirmed to the Trust in due course.
- 9.2.3 The overall operation of the home was discussed in relation to the use of the home to accommodate a mix of permanent and respite residents. The Trust is currently considering dividing the home into two separate self-contained areas. One area would be used to accommodate the permanent residents, with the other area being used to accommodate the respite residents. In addition to this, consideration was being given to other proposed changes to the use of some of the individual rooms in the home to improve the facilities for both residents and staff. These changes would include converting the existing smoking room into staff facilities and creating a smaller smoking room. RQIA would encourage the Trust to move forward with these proposals. The benefits of providing an assisted shower room in the vicinity of the existing smoking room should also be considered as part of these proposed improvements. The registered persons should contact the RQIA Registration Team to clarify the position in relation to the need to submit a variation application in respect of these proposals. Reference should be made to item 2 in the attached Quality Improvement Plan.
- 9.2.4 The above issues are detailed as appropriate in the section of the Quality Improvement Plan entitled 'Standard 27 – Premises and Grounds.'

9.3 **Standard 28 – Safe and healthy working practices** – *The home is maintained in a safe manner*

- 9.3.1 No additional issues were identified for attention in relation to this standard during this Estates inspection.

Quality Improvement Plan

Announced Estates Inspection IN021906

Crozier House Residential Care Home, Banbridge RQIA ID 1559

24 March 2015

QIP Position Based on Comments from Registered Persons			QIP Closed		Estates Officer	Date
			Yes	No		
A.	All items confirmed as addressed.					
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.					
C.	Clarification or follow up required on some items.	x		x	K Monaghan	08 June 2015

NOTES:

The details of the Quality Improvement Plan were discussed with Mrs. Iris Cromie, Registered Manager and Mrs. Tierna Armstrong, as part of the inspection process.

The timescales commence from the date of inspection. Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the residential home to improve the quality of life experienced by residents.

The registered provider is required to record comments on the Quality Improvement Plan.

The quality improvement plan is to be signed below by the registered provider and registered manager and returned to:

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

NAME OF REGISTERED MANAGER COMPLETING QIP	Agreed with Mrs Iris Cromie Registered Manager and completed by Mrs Tierna Armstrong Head of Residential & Day Care Services
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Mrs Angela McVeigh Director Older People and Primary Care

Standard 27 – Premises and grounds

The following requirements should be noted for action in relation to Standard 27 – Premises and Grounds

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1.	Regulations 27(2)(b) 27(2)(c) 27(2)(d)	Confirmation in relation to completion of the remedial works to resolve the water ingress issue and making good the décor and extract fan in the center toilet opposite the hairdressing room should be provided to RQIA. Reference should be made to sections 9.1.1 and 9.1.2 in the report.	Three months	Request submitted to Trust Estates Dept for immediate action.
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2.	Regulations 32(1)(h)	The registered persons should contact the RQIA Registration Team to clarify the position in relation to the need to submit a variation application in respect of the proposed changes to the premises. Reference should be made to section 9.2.3 in the report.	Ongoing	Reference to the proposed changes and redesignation of rooms as discussed with RQIA Estates Inspector during the inspection on the 24 th March 2015 are currently under review. The registered manager is seeking an opinion on bset use of rooms with the Trust Estates Dept. When this progresses a variation application will be submitted and this will reference 9.2.3. as required.

Standard 28 - Safe and healthy working practices

The following requirements should be noted for action in relation to Standard 28 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	The current position in relation to the monthly cold water temperature checks at the sentinel outlets and the issues that had previously been identified for attention in relation to the water tanks should be confirmed to RQIA. Reference should be made to paragraph 9.1.3 in the report.	Two months	Restated requirement has been reissued to Trust Estates Department to resolve as a matter of urgency.
4.	Regulations 14(2)(a) 14(2)(c) 27(2)(c) 27(2)(q)	The information in relation to the current safety inspections to the gas equipment and gas installation should be forwarded to RQIA. Reference should be made to paragraph 9.1.4 in the report.	Three months	Restated requirement has been forwarded to Trust Estate Department information has been requested to be forwarded to RQIA as a matter of urgency

Standard 28 - Safe and healthy working practices

The following requirements should be noted for action in relation to Standard 28 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
5.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	The information in relation to the control measures in place for the prevention or control of legionella bacteria in the water system should be forwarded to RQIA. Reference should be made to paragraph 9.1.5 in the report.	Three months	Restated requirement has been forwarded to Trust Estate Department information has been requested to be forwarded to RQIA as a matter of urgency

Standard 29 – Fire safety

The following requirement s should be noted for action in relation to Standard 29 – Fire Safety:

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
6.	Regulations 27(4)(a) 27(4)(b)	The fire risk assessment should be reviewed. A copy of the report for this review should be forwarded to RQIA. Reference should be made to paragraph 9.1.8 in the report.	Three months	Fire Risk Assessment to be completed within required timeframe and will be forwarded to RQIA - reference will be made regarding requirement of 9.1.8