

# **Announced Variation Application Premises Inspection Report 25 June 2018**



## **Camphill Community Glencraig**

### **Variation Reference VA010647**

**Type of service: Residential Care (RC)**  
**Address: 4 Seahill Road, Craigavad, Holywood, BT18 0DB**  
**Tel No: 028 9042 3396**  
**Inspector: Gavin Doherty**

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 provider 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 registered residential care service which is registered to provide care for up to 48 persons.

### 3.0 Service details

<b>Registered Provider:</b> Camphill Community – Glencraig  <b>Responsible Individual:</b> Vincent Reynolds	<b>Registered Manager:</b> Tyrone Best
<b>Person in charge at the time of inspection:</b> Tyrone Best	<b>Number of registered places:</b> 48

### 4.0 Inspection summary

An announced inspection took place on 25 June 2018 from 10:00 to 12:30.

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 inspect the proposed premises at Craigowen House, in connection with the Variation Application reference VA010647.

From evaluation of the inspection findings, the premises meet the relevant standards for registration as a residential care home from an estates perspective.

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>	1	2

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Tyrone Best, Registered Manager, Gordon Goodfellow and Sam Clarke, Perdix Consulting, 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.

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

## 6.0 The inspection

The inspector was taken on a tour of Craigowen House. It was good to note that the construction work had been completed to a high standard.

The four bedrooms to be registered had been refurbished as required and redecorated. New en-suite accommodation has been provided to two bedrooms. These en-suites contain a level deck shower, toilet and wash hand basin. The remaining two bedrooms are located in apartment type accommodation, which have personal bathrooms along with additional personal communal space. These bathrooms contain a bath, shower, toilet and wash hand basin. All hot water in these areas is suitably controlled, preventing the risk of scalding, and high quality slip resistant floor finishes have been installed throughout.

Once the bedrooms are occupied and the en-suites are in use then the home must assess each individual service user and ensure that any additional accessibility aids that they may require in their private accommodation are installed.

All bedrooms and en-suite accommodation comfortably exceed the floor area required in the current care standards for residential care homes.

The communal spaces were again found to be bright, airy and presented to a high standard. These areas also comfortably exceed the floor area required in the current care standards for residential care homes.

### Areas for Improvement

A suitable Controlled Drugs Cabinet should be provided in the medicine store. This cabinet should conform to, and be installed in accordance with the manufacturers' requirements and current best practice guidance.

The surface of wooden floor in the lounge/dining area was in poor condition and should be refinished to provide a suitably sealed surface.

It was good to note that a comprehensive resident/staff call system has been sourced and an order placed. It is important that this system is installed in all rooms used by residents and linked to a system that alerts staff a call is being made or assistance is required.

It was also good to note that robust window restrictors have been installed throughout the premises. However, current best practice guidance requires that tamper proof fixings are used to fit these restrictors.

The en-suite accommodation had been completed to a high standard. However, it was noted from an infection control perspective that the joint between the toilet base and the floor should be sealed.

Lighting levels in several areas of the premises was poor and it was agreed that these levels would be increased.

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	2

## **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 Tyrone Best, Registered Manager, Gordon Goodfellow and Sam Clarke, Perdix Consulting, 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.

## Quality Improvement Plan

### Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005

#### Area for improvement 1

**Ref:** Regulation 27(2)

**Stated:** First time

**To be completed by:**  
30 July 2018

The registered person shall ensure that the following outstanding issues are addressed:

- surface of wooden floor in the lounge/dining area to be refinished to provide a suitably sealed surface
- window restrictor fixings should be replaced with a tamper proof fixing
- seal the joint between the base of the toilet and floor
- ensure that the lighting levels in all areas are suitable and sufficient in all areas of the home

Ref: 6.0

#### Response by registered person detailing the actions taken:

(i) Surface of wooden floor in the lounge / dining area has not yet been refinished, but Facilities Manager in Glencraig is to attend to this w/c 17/09/18.

(ii) Window restrictor fixings have been replaced (in July 2018)

(iii) Joint between base of toilet and floor has been sealed (Sep 2018)

(iv) Sensors and timers have been placed on some lights to ensure suitable and sufficient lighting in all areas of the home (July 2018).

### Action required to ensure compliance with Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)

#### Area for improvement 2

**Ref:** Standard 32.1

**Stated:** First time

**To be completed by:**  
30 July 2018

The registered person shall ensure that a suitable Controlled Drugs Cabinet is provided in the medicine store. This cabinet should conform to, and be installed in accordance with the manufacturers' requirements and current best practice guidance.

Ref: 6.0

#### Response by registered person detailing the actions taken:

Actioned - Controlled Drugs Cabinet has been placed in the medicine store (July 2018).

<b>Area for improvement 3</b>  <b>Ref:</b> Standard N10  <b>Stated:</b> First time  <b>To be completed by:</b> 30 July 2018	The registered person shall ensure that a suitable resident/staff call system is in place. It is important that this system is installed in all rooms used by residents and linked to a system that alerts staff a call is being made or assistance is required.  Ref: 6.0
	<b>Response by registered person detailing the actions taken:</b> Actioned - suitable resident / staff call system has been installed in all rooms and is being used (July 2018).

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



The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
 [@RQIANews](https://twitter.com/RQIANews)