



The Regulation and  
Quality Improvement  
Authority

Inspector: Colin Muldoon  
Inspection ID: IN021462

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RQIA ID: 1379  
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**Announced Estates Inspection  
of  
Castlehill**

**19 May 2015**

The Regulation and Quality Improvement Authority  
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
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## 1. Summary of Inspection

An announced estates inspection took place on 19 May 2015 from 10.30 to 14.30. 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 Care Standards for Nursing Homes 2015.

### 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
<b>Total number of requirements and recommendations made at this inspection</b>	0	1

The details of the QIP within this report were discussed with Ms Bernadette O'Neill (Manager) and Ms Shauna Fulton (Estates Administrator) as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Safecare Chrysalis Ltd Mr B McAteer Mr C McAteer	<b>Registered Manager:</b> Ms Bernadette O'Neill
<b>Person in Charge of the Home at the Time of Inspection:</b> Ms Bernadette O'Neill	<b>Date Manager Registered:</b> 27 January 2011
<b>Categories of Care:</b> NH-LD, NH-LD(E)	<b>Number of Registered Places:</b> 34
<b>Number of Patients Accommodated on Day of Inspection:</b> 30	<b>Weekly Tariff at Time of Inspection:</b> £570 - £850

## 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 been met:

**Standard 44: Premises and Grounds**

**Standard 47: Safe and Healthy working Practices**

**Standard 48: Fire safety**

## 4. Methods/Process

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

Prior to inspection the following records were analysed:

- The last returned Estates Quality Improvement Plan
- The last care inspection Quality Improvement Plan.

The following records were examined during the inspection:

- Fire and legionella risk assessments.
- Fire safety installation test and maintenance records.
- Water safety records.
- Engineering services records, eg gas, electric, lifts etc.
- Fire training records

## 5. The Inspection

### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced pharmacy inspection dated 02 September 2014. The completed QIP was returned and the specialist inspector considered the responses to be acceptable.

### 5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b> <b>Ref:</b> Regulation 14.-(2)(c)	<p>The registered persons must assess the adequacy of the current arrangements for restricting opening windows. The assessment should be in line with the following actions set out in the safety alert MDEA(NI)2007/100.</p> <p><b>Action taken as confirmed during the inspection:</b> Addressed.</p>	<b>Met</b>
<b>Requirement 2</b> <b>Ref:</b> 14.-(2)(c)	<p>With regard to the plumbing arrangements on the first floor the registered person must check that the flow temperature of the hot water is in line with good practice for the control of legionella and that blending devices, to ensure the safe temperature of delivered water, are fitted at a distance not exceeding 2m from the outlet.</p> <p><b>Action taken as confirmed during the inspection:</b> Addressed.</p>	<b>Met</b>
<b>Requirement 3</b> <b>Ref:</b> 14.-(2)(c)	<p>The frequency of disinfecting the shower heads should be increased to at least quarterly.  <b>Ref:</b> HSE document L8 and Health Technical Memorandum 04-01 <i>The control of legionella, hygiene, "safe" hot water, cold water and drinking water systems</i></p> <p><b>Action taken as confirmed during the inspection:</b> Addressed.</p>	<b>Met</b>

<b>Requirement 4</b>  <b>Ref: 27.-(4)(d)(v)</b>	Arrangements should be made for the emergency lights to be function tested monthly. Ref: BS 5266	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Addressed.	

### 5.3 Standard 44: Premises and Grounds 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.

#### 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.

#### Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care.

#### Areas for Improvement

The home has a current legionella risk assessment which was carried out by a specialist contractor in March 2015. The risk assessment recommends that the cold water storage tank is replaced and the inspector was informed that this has been arranged for June 2015.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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### 5.4 Standard 47: Safe and Healthy Working Practices

#### 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.

#### Is Care Effective? (Quality of Management)

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

**Is Care Compassionate? (Quality of Care)**

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

**Areas for Improvement**

No issues identified during this inspection.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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**5.5 Standard 48: Fire Safety****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 patients, 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**

The home has a current fire risk assessment which was carried out by a specialist contractor in June 2014. The assessor considered the overall fire safety risk to be trivial. The fire risk assessor also conducts the fire safety training for staff.

The inspector recommended that attendance at ad hoc fire drills be monitored and arrangements made for all staff to participate and that the wording of the fire procedure is reviewed to ensure there is clarity for staff in the event of an alarm.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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## 5.6 Additional Areas Examined

Not applicable.

### Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Bernadette O'Neill (Manager) and Ms Shauna Fulton (Estates Administrator) 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.

## 5.7 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, Nursing Homes Regulations (Northern Ireland) 2005.

## 5.8 Recommendations

This section outlines the recommended actions based on research, recognised sources and Care Standards for Nursing Homes 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

## 5.9 Actions Taken by the Registered Manager/Registered Person

The QIP will 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](mailto: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 home. 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 person/manager 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 person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

## Quality Improvement Plan

### Recommendations

#### Recommendation 1

**Ref:** Standard 48

**Stated:** First time

**To be Completed by:**  
19 June 2015 and  
ongoing

It is recommended that:

- attendance at ad hoc fire drills is monitored and arrangements made for all staff to participate.
- The wording of the fire procedure is reviewed to ensure there is clarity for staff in the event of an alarm (procedure is worded "in event of fire")

**Response by Registered Manager Detailing the Actions Taken:**

<b>Registered Manager Completing QIP</b>		<b>Date Completed</b>	
<b>Registered Person Approving QIP</b>		<b>Date Approved</b>	
<b>RQIA Inspector Assessing Response</b>		<b>Date Approved</b>	

*\*Please ensure the QIP is completed in full and returned to [estates.mailbox@rqia.org.uk](mailto:estates.mailbox@rqia.org.uk) from the authorised email address\**



A completed Quality Improvement Plan from the inspection of this service is not currently available. However, it is anticipated that it will be available soon.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address [info@rqia.org.uk](mailto:info@rqia.org.uk)