

Inspection Report

13 Jun 2023



Rosevale Lodge Lisburn

Type of service: Residential Care (RCH)
Address: 173 Moira Rd, Lisburn, BT28 1RW
Telephone number: 028 9260 4433

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Healthcare Ireland No 2 Ltd	Registered Manager: Ms Cheryl Palmer
Responsible Individual: Ms Amanda Celine Mitchell	Date registered: Not registered
Person in charge/Person met at the time of inspection: Ms Cheryl Palmer	Number of registered places: 36
Categories of care: RC – DE RC - I	Number of residents accommodated in the home on the day of this inspection: N/A
Brief description of the accommodation/how the service operates:	
<p>This is a residential care home which is registered to provide social care for a maximum of thirty-six service users . The home is situated on the first floor level of a two storey detached building, care is provided for service users living with dementia .</p> <p>A registered nursing home is located on the building ground floor level, both services are managed by the same person.</p>	

2.0 Inspection summary

An announced estates inspection took place on 13 May 2023, from 10:00am to 11:45am in connection with variation application ref VA011586.

This inspection focused on the alteration and refurbishment works completed to demolish the partition wall between the former first floor smoker`s activity room and a general day activity room, creating a larger general day/activity room.

The smoker`s activity space was relocated to an exterior covered area in the ground floor enclosed courtyard.

The maximum number of registered service users will remain unchanged at 36 as a result of this proposed variation application.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement.

It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

4.0 The inspection findings

4.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 14 February 2023 RQIA ref IN041477		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 13 (7) Stated: First time To be completed by: Immediately and ongoing	The registered person shall ensure that the environmental IPC issues identified at this inspection are addressed. Ref: 5.2.3	Carried forward to the next inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011) (Version 1:1)		Validation of compliance
Area for improvement 1 Ref: Standard 13 Stated: Second time To be completed by: 1 May 2023	The registered person shall ensure a structured programme of varied activities and events related to the statement of purpose and identified needs of residents is provided. Ref: 5.1 and 5.2.4	Carried forward to the next inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of	

	this inspection and this is carried forward to the next inspection.	
Area for improvement 2 Ref: Standard 19 Stated: First time To be completed by: Immediately and ongoing	The registered person shall ensure the references requested when recruiting an employee includes one from the applicants present or most recent employer and that any gaps in recruitment are explored. Ref: 5.2.1 Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	Carried forward to the next inspection

4.2 The inspection findings

4.2.1 Is the newly adapted section of the home compliant with the Department of Health's (DoH) Residential Care Homes Minimum Standards and with other relevant legislative requirements and Approved Codes of Practice (ACOPs)?

Building alterations included demolition of a partition wall between the resident's former smoker's room and the general day/activity room.
A new smoker's activity shelter was erected in the ground floor exterior enclosed courtyard.

The required pre registration documents were assessed, approved and recorded prior to the inspection.
Pre registration documents submission included: proposed floor plans & fire risk assessment.

The modified accommodation as specified in this variation application was inspected and found to be compliant with current standards.

The fire risk assessment and legionella risk assessment documents had been reviewed and action plan recommendations implemented.

From an estates inspector's perspective this variation application has complied with the estates registration requirements listed in the current Residential Care Home minimum standards, and therefore subject to care inspector approval this application may be processed to completion.

No areas for improvement were identified.

4.2.2 Care Inspector findings.

Not applicable

5.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
Total number of Areas for Improvement	1*	2*

* the total number of areas for improvement includes one that has been stated for a second time, two stated for first time, and all are carried forward from the previous inspection on 14 February 2023 ref IN041477 for review at the next inspection.

This inspection resulted in no new areas for improvement being identified. Findings of the inspection were discussed with Ms Cheryl Palmer, Registered Manager as part of the inspection process and can be found in the main body of the report.

Quality Improvement Plan	
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 13 (7) Stated: First time To be completed by: Immediately and ongoing	The registered person shall ensure that the environmental IPC issues identified at this inspection are addressed. Ref: Section 4.1
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011) (Version 1:1)	
Area for improvement 1 Ref: Standard 13 Stated: Second time To be completed by: 1 May 2023	The registered person shall ensure a structured programme of varied activities and events related to the statement of purpose and identified needs of residents is provided. Ref: Section 4.1
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.
Area for improvement 2 Ref: Standard 19 Stated: First time To be completed by: Immediately and ongoing	The registered person shall ensure the references requested when recruiting an employee includes one from the applicants present or most recent employer and that any gaps in recruitment are explored. Ref: Section 4.1
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.



The **Regulation** and
Quality Improvement
Authority

The Regulation and Quality Improvement Authority
James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

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

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