

Announced Variation to Registration Care Inspection Report 7 March 2019











Dunmurry Manor Residential Care Home

Type of Service: Residential Care Home

Address: 2A Hazel Avenue, Dunmurry, Belfast BT17 9QU

Tel No: 028 9061 0435 Inspector: Alice McTavish

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 residential care home registered to provide care for 36 people who have dementia. The residential care home is currently located on the ground floor of the building. The first floor of the building was initially registered to accommodate 40 patients in nursing care. A variation application was approved by RQIA to reduce the nursing beds to 24. It is planned that 15 beds on the first floor would now be registered as part of the residential care home.

3.0 Service details

Registered Provider: Runwood Homes Ltd	Registered Manager: Michelle Montgomery
Responsible Individual: Gavin O'Hare-Connolly	
Person in charge at the time of inspection: Michelle Montgomery	Date manager registered: Michelle Montgomery - application received - "registration pending".
Categories of care: Residential (RC) DE – Dementia	Number of registered places: 36

4.0 Inspection summary

An announced variation to registration inspection of Dunmurry Manor took place on 7 March 2019 from 13.50 to 16.00.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

The inspection sought to assess an application submitted to RQIA for a variation to the registration of Dunmurry Manor residential care home for an increase in number of beds from 36 to 51. The additional 15 beds would be for older people and would be located on the first floor of the building.

The variation to registration to increase the number of beds from 36 to 51 to accommodate older people was granted from a care perspective following this inspection.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and residents experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Michelle Montgomery, manager and Michael Doolin, Senior Director of Operations, Runwood Homes, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 21 February 2019

No further actions were required to be taken following the most recent inspection on 21 February 2019.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: the application for variation, previous inspection reports, returned Quality Improvement Plans, notifications of accidents and incidents since the previous inspection and any other written or verbal information received by RQIA.

During the inspection the inspector met with the manager and the Senior Director of Operations.

The staff duty rota was examined during the inspection.

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 21 February 2019

The most recent inspection of the home was an unannounced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 21 February 2019

There were no areas for improvement made as a result of the last care inspection.

This inspection focused solely on the variation to registration application made by the registered provider to RQIA.

6.3 Inspection findings

6.3.1 Environment

The first floor of the building is serviced by two passenger lifts. There is a spacious lounge, a dining room, large assisted bathroom, a staff station, sluice room, storage rooms and toilets on this floor. Residents who are accommodated on this floor will also have access to the life café and the secure garden area on the ground floor.

All 15 bedrooms are spacious and have an en-suite bathroom. The bedrooms have a bed, bedside locker, dressing table or desk with a chair, a wardrobe, an over-bed table and an easy chair. There is both overhead and wall lighting. The taller items of furniture are properly secured to the wall. There is a call system in place in each bedroom and en-suite bathroom. There is provision for the safe and secure storage of valuables as there is a lockable drawer in the bedside locker.

The laundry and catering kitchen are situated on the lower ground floor of the building. These areas are clean, well equipped and there are good arrangements in place to ensure effective infection prevention and control.

The home is decorated and furnished to a high standard.

6.3.2 Management arrangements

The home has a full time manager. The Senior Director of Operations advised that a head of residential care had been recruited and was due to commence work in the home on 8 March 2019.

6.3.3 Staff recruitment, induction and training

The manager reported that the home already had adequate numbers of Care Team Managers and care assistants in place. There were also sufficient domestic, laundry and catering staff in post.

6.3.4 Staffing

The manager described the staffing levels for the home and advised that these will be flexible and responsive to the changing needs and numbers of residents in future. A staff duty rota was already in place in anticipation of residents being admitted to the home.

A clear organisational structure was in place in the home. In addition to the manager, there was a head of residential care due to commence; there was also domestic, laundry, administrative and maintenance staff. The care team would comprise Care Team Managers and care assistants. The home already employed three activities co-ordinators.

6.3.5 Admission of residents

It was anticipated that new residents would be admitted in the near future. The plan was to admit a maximum of two residents each week. This phased admission would allow staff to get to know the care needs of individual residents and how these should be met whilst building relationships with the residents. This was agreed by the Senior Director of Operations and the registered manager.

6.3.6 Safeguarding

The home had an adult safeguarding policy in place which reflected current regional guidance. The registered manager advised that training in adult safeguarding was arranged for all staff and that there were clear referral arrangements to trusts with contact details clearly displayed for staff in the home.

6.3.7 Infection prevention and control

The home had a suite of policies and procedures which covered all aspects of infection prevention and control, management of clinical and non-clinical waste and management of the environment. Inspection of the premises identified that communal bathrooms contained hand wash dispensers and paper towels. There was hand-washing signage throughout the home with hand sanitisers situated where necessary. There were gloves and aprons available for staff.

6.3.8 Medication storage

A room was provided as a treatment room and contained storage along with a medicine trolley which could be secured to the wall.

6.3.9 Care records

The registered manager advised that some resident records would be held in hard copy, for example, pre-admission information from trusts. Internal resident records would be maintained and stored on an electronic system, for example, care needs assessments, care and support plans, risk assessments, daily progress records and regular reviews of care.

6.3.10 Policies and procedures

The registered manager confirmed that all policies required to be in place in residential care homes were in place and easily available to all staff.

Areas of good practice

It was evident that sufficient thought and planning had gone into making suitable preparations for the admission of new residents.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.





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