

Inspection Report

2 June 2021











Copelands

Type of Service: Residential Care Home Address: 95/97 Donaghadee Road, Millisle, BT22 2BZ Telephone number: 028 9131 2700

www.rqia.org.uk

Information on legislation and standards underpinning inspections can be found on our website https://www.rgia.org.uk/

1.0 Service information

Organisation/Registered Provider: Belfast Central Mission	Registered Manager: Ms Andrea Selby	
Responsible Individual: Ms Lynne Kavanagh	Date registered: 14 June 2021	
Person in charge at the time of inspection: Ms Andrea Selby	Number of registered places: 40	
	20 in RC - I 20 in RC - DE	
	A maximum of 20 residents in category RC-DE across units: Windmill Lane and Lighthouse Mews. Remaining residents in RC-I, RC-PH and RC-PH(E) in units: Bayside and Sandgrove.	
Categories of care: Residential Care (RC)	Number of residents accommodated in the residential care home on the day of	
I – Old age not falling within any other category. DE – Dementia PH – Physical disability other than sensory impairment. PH(E) - Physical disability other than sensory	this inspection: The home is not open to admissions at the time of this inspection.	

Brief description of the accommodation/how the service operates:

This is a purpose built care home which submitted an application to RQIA for the registration of Copelands, a new residential care home, to provide social care for up to 40 persons.

The home is divided into four households each with ten bedrooms. All rooms have en-suite facilities and a countryside or sea view.

Windmill Lane and Lighthouse Mews, both on the ground floor, provide residential care for people with dementia; Bayside on the ground floor and Sandgrove on the first floor, provide general residential care. Residents have access to communal lounges, dining rooms, a common room with cinema, an activity room, the café, a hairdressing salon, a roof-top garden and the outdoor garden.

Copelands provides a dedicated worship space for services conducted by visiting clergy or speakers which can also be used by residents for a time of quiet reflection or private prayer.

2.0 Inspection summary

An announced pre-registration care and estates inspection took place on 2 June 2021 from 1 pm to 3.15 pm.

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

The inspection sought to assess an application submitted to RQIA for the registration of a new residential care home at Copelands.

Areas of good practice were identified in relation to the home's environment, management arrangements and having a phased admission plan.

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.

Information has been gathered throughout the registration process. Scrutiny of this information means that admission of new residents within this residential home is permitted from a care and estates perspective.

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.

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the proposed statement of purpose
- the proposed resident's guide
- a selection of operational policies and procedures

The following records were examined prior to the inspection:

- fire risk assessment
- legionella risk assessment.
- Mechanical & electrical installation and commissioning certificates

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

4.0 The inspection

Environment

We inspected the residential care home and found that the premises had been completed to a very high standard, were tastefully decorated, clean and hygienic throughout. Fire exits and corridors were clear and free from obstruction. Bedrooms were observed to be furnished with a bed, two bedside tables, a wardrobe, a chest of drawers and a console table. The manager informed us that residents moving to this new accommodation may bring their own furniture if they wish and will personalise their room according to their own tastes and preferences. Ensuite accommodation is provided to each bedroom and includes a level deck shower, toilet and wash hand basin. All hot water outlets in these areas are suitably controlled, preventing the risk of scalding, and high quality slip resistant floor finishes have been installed throughout. All bedrooms and ensuite accommodation comfortably exceed the floor area required in the current care standards for residential care homes.

The communal spaces, which are located throughout the premises, were found to be bright, airy and presented to a very high standard. Several lounges on the first floor opened directly onto enclosed balconies which offer safe outdoor space for residents with panoramic views of the coast line and surrounding countryside. Residents will also have access to a large fully enclosed roof terrace with similar views. This will provide a safe and secure outdoor space for recreation and activities. These communal areas also comfortably exceed the floor area required in the current care standards for residential care homes.

Assisted bathrooms, sluice rooms and a number of assisted toilets are suitably located throughout the premises. Each has hand washing facilities, liquid soap and disposable hand towels available. In addition to hand washing facilities, hand sanitizing gel is available along with stations holding personal protective equipment throughout the home.

The overall standard of interior design including, furniture, soft furnishings and décor throughout the premises was commended.

Health & Safety, Building Services & Statutory Controls

We reviewed and confirmed that the following documents were valid and compliant with the care standards:

- Planning approvals
- Building Control final completion certificate
- Fire risk assessment, which was undertaken by a suitably registered assessor
- Fire detection & alarm installation & commissioning certificates (BS5839)
- Fire-fighting equipment certificate
- Emergency lighting installation & commissioning certificate (BS5266)
- Legionella risk assessment and controls
- Passenger lift installation/commissioning certificate
- Nurse Call completion/commissioning certificate
- Fixed Electrical installation certificate (BS7671)

All mechanical & electrical building services have been installed and commissioned in accordance with current legislation and best practice guidance. The fire safety and legionella risk assessment documents were in place, and the control measures highlighted in each document have been implemented and are being maintained.

Staffing

We discussed staffing arrangements with the manager who told us that staff recruitment was ongoing; those staff already recruited had completed a period of induction and mandatory training; staffing levels will be kept under continual review once admissions commence to the home to ensure the assessed needs of residents are met.

Training

There was a system in place to monitor staffs' compliance with mandatory training. During the inspection the manager confirmed that all staff had completed mandatory training. Two staff members spoken with confirmed that they were enabled to attend training and that the training provided them with the necessary skills and knowledge to care for the residents.

Admission arrangements

We discussed the plan in place for admissions to the home with the manager, while adhering to current government guidelines during the pandemic. Admissions will be phased following extensive pre-admission assessment with residents offered the opportunity to view the home and meet with staff prior to moving in where possible. The home aims to offer residents choice and independence in a supportive environment. The manager told us that Copelands residential care home will offer residents a full and varied programme of meaningful activities to meet their individual interests and needs.

Safeguarding

The home has an adult safeguarding policy and procedure in place which is consistent with current regional guidance. Ms Lynne Kavanagh, Responsible Individual, is the adult safeguarding champion for the home. We discussed deprivation of liberty safeguards (DoLS); the manager confirmed that processes and policies were in place to manage and review DoLS within the home. The pre-admission assessment and liaison with the local Health and Social Care Trust, will determine if individual patients are subject to DoLS and will inform care planning and review in this area.

Governance arrangements

We discussed governance arrangements to monitor and report on the quality of residential care and other services provided in the home. Policies and procedures were available; staff must familiarise themselves with these as part of their induction. There were systems in place to manage, for example, complaints, reporting notifiable events to RQIA and other relevant bodies and completion of a monthly monitoring report.

Statement of Purpose and Resident's Guide

The Statement of Purpose and Resident's Guide was reviewed prior to the inspection. They were found to contain relevant information regarding the aims and objectives, facilities available

and the philosophy of care of the home. Correspondence on 14 June 2021 with Lynne Kavanagh, Responsible Individual, advised that an updated Statement of Purpose and Resident's Guide for Copelands residential care home, would be submitted to RQIA in the near future, to reflect small amendments that are required to be made. This will be reviewed by RQIA on receipt.

Areas of good practice

Areas of good practice were identified in relation to the home's internal and external environment, staff training, adult safeguarding and management arrangements.

Areas of improvement

No areas for improvement were identified during the inspection.

5.0 Conclusion

Admission of new residents within this residential care home is permitted from a care and estates perspective.

6.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
Total number of Areas for Improvement	0	0

This inspection resulted in no areas for improvement being identified, and a QIP is not required or included, as part of this inspection report. Findings of the inspection were discussed with Lynne Kavanagh, Responsible Individual, Lois Payne, Head of Residential Services, Andrea Selby, Home Manager and Nigel Emery, Estates Manager, 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.





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