

Unannounced Care Inspection Report 4 September 2019



Desart Mews

Type of Service: Residential Care Home Address: 95 Cathedral Road, Armagh BT61 8AB Tel no: 07872871531 Inspector: Bronagh Duggan

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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 from their responsibility for maintaining compliance with legislation, standards and best practice.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

1.0 What we look for



2.0 Profile of service

This is a registered residential care home which provides care for up to 34 residents within the categories of care as included in Section 3.0 of this report. The home consists of two bungalows and two apartment blocks on one site.

3.0 Service details

Organisation/Registered Provider: Amore (Watton) Ltd Responsible Individual: Nicola Cooper	Registered Manager and date registered: Kayleigh Hunniford (temporary)
Person in charge at the time of inspection: No one present	Number of registered places: 34
Categories of care: Residential Care (RC) MP - Mental disorder excluding learning disability or dementia MP (E) - Mental disorder excluding learning disability or dementia – over 65 years LD - Learning Disability LD (E) – Learning disability – over 65 years PH - Physical disability other than sensory impairment PH (E) - Physical disability other than sensory impairment – over 65 years SI – Sensory impairment	Total number of residents in the residential care home on the day of this inspection: 0

4.0 Inspection summary

An unannounced inspection took place on 4 September 2019 from 12.15 hours to 12.30 hours.

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

Desart Mews was registered with RQIA on 6 September 2018 but there has been no resident admitted to the home as yet. Given that the home is registered with RQIA it is subject to a minimum of two inspections per year. This inspection sought to assess progress with issues raised since the previous inspection on 30 January 2019 and to ensure that the home remained in a satisfactory state of repair.

The inspection evidenced that the home remained in a good state of repair externally; there was no evidence the home was operating. Following the inspection a meeting was arranged at RQIA offices with a representative from Amore (Watton) Ltd on 27 September 2019 to discuss arrangements regarding the maintenance and operating plans for the home.

The area for improvement in respect of previous care inspection has been carried forward to the next 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	*1

*The total number of areas for improvement includes one which has been carried forward for review at the next care inspection.

Details of the Quality Improvement Plan (QIP) were discussed with Sharon Butler, Director, 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.

4.2 Action/enforcement taken following the most recent inspection dated 30 January 2019

The most recent inspection of the home was an unannounced care inspection undertaken on 30 January 2019. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

5.0 How we inspect

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous inspection report, registration information, and any other written or verbal information received since the previous 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 last care inspection dated 30 January 2019

Areas for improvement from the last care inspection		
		Validation of compliance
Area for improvement 1 Ref: Standard 3 Stated: First time	The registered person shall ensure they inform RQIA of the date on which admissions are planned to commence and that each new resident is facilitated to receive a smooth introduction to the home.	compliance
	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 will be carried forward to the next care inspection.	Carried forward to the next care inspection

6.2 Inspection findings

6.2.1 The Environment

The home consists of four buildings which includes two six bedded bungalows and two 11 bedded apartment blocks split over two floors. On the day of the inspection the units were closed and secured there were no staff observed in the vicinity. The outside of the buildings and surrounding grounds were maintained to a good standard.

6.2.2 Admissions to the Home

There have been no admissions to the home since it was first registered in September 2018. Assurances were given during a meeting held at RQIA offices by the regional manager on 27 September 2019 that there would be no admissions to the home without informing RQIA in advance. The regional manager outlined potential timescales for the project and confirmed all relevant information would be shared with RQIA in due course.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Sharon Butler, Director, 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 and the DHSSPS Residential Care Homes Minimum Standards, August 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 DHSSPS Residential Care Homes Minimum Standards, August 2011		
Area for improvement 1 Ref: Standard 3	The registered person shall ensure they inform RQIA of the date on which admissions are planned to commence and that each new resident is facilitated to receive a smooth introduction to the home.	
Stated: First time	Ref: 6.1	
To be completed by: Ongoing	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	





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