



The **Regulation** and  
**Quality Improvement**  
Authority

# Unannounced Care Inspection Report 30 January 2019



## Desart Mews

**Type of Service: Residential Care Home**  
**Address: 95 Cathedral Road, Armagh BT61 8AB**  
**Tel No: 07872871531**  
**Inspector: Julie Palmer**

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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 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 34 bedded residential care home registered to provide care for residents living with learning disabilities, mental health issues, and physical disabilities.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Amore (Watton) Limited  <b>Responsible Individual:</b> Mrs Nicola Cooper	<b>Registered Manager:</b> Miss Ashley Currie
<b>Person in charge at the time of inspection:</b> Ashley Currie	<b>Date manager registered:</b> 6 September 2018
<b>Categories of care:</b> 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	<b>Number of registered places:</b> 34

### 4.0 Inspection summary

An unannounced inspection took place on 30 January 2019 from 16.30 to 17.15 hours.

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

Desart Mews was registered with RQIA on 6 September 2018 but there have been no residents 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 pre-registration care inspection on 21 June 2018 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. An area for improvement was identified in relation to informing RQIA of any planned admissions to the home. The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and resident experience.

### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	1

An area for improvement was identified and details of the Quality Improvement Plan (QIP) were discussed with Ashley Currie, registered manager, 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 care & estates inspection**

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 21 June 2018.

## **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 previous care inspection report
- the returned QIP from the previous care inspection

During the inspection the inspector met with Ashley Currie, registered manager.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

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 June 2018**

The most recent inspection of the home was an announced care and premises pre-registration inspection. Other than those actions detailed in the QIP no further actions were required to be taken.

## 6.2 Review of areas for improvement from the last care inspection dated 21 June 2018

Areas for improvement from the last care inspection		
Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011		Validation of compliance
<b>Area for improvement 1</b> <b>Ref:</b> Standard 35.7 <b>Stated:</b> First time <b>To be completed by:</b> 21 July 2018	The registered person shall ensure there are adequate supplies of liquid soap, alcohol hand gels, and disposable towels wherever care is delivered.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Soap, hand gel and disposable towel dispensers were wall mounted in suitable areas and were observed to be full; additional supplies of items were stored appropriately.	
<b>Area for improvement 2</b> <b>Ref:</b> Standard 27.1 <b>Stated:</b> First time <b>To be completed by:</b> 21 July 2018	The registered person shall ensure the building is kept clean and hygienic at all times, reference is made to a full terminal clean throughout the home prior to admissions.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The two bungalows and two apartment blocks were clean and hygienic; the registered manager confirmed a full terminal clean will be completed prior to admission of any residents.	

## 6.3 Inspection findings

### 6.3.1 The Environment

The home consists of four units made up of two six bedded bungalows and two apartment blocks which have eleven beds split over two floors. All bedrooms are en-suite with built in furniture; a number of the apartments also contain kitchenette areas. The facility is finished to a high specification with tastefully decorated bedrooms and communal spaces including sitting rooms and kitchen/dining areas.

The environment was found to be clean and hygienic, the registered manager confirmed all units were maintained and cleaned on a regular basis and a full clean will be carried out prior to admission of any residents.

### 6.3.2 Admissions to the Home

There have been no admissions to the home since the date of registration and the registered manager stated no admissions were planned or were in the planning phase at the date of inspection. RQIA should be informed when admissions to the home are planned and an area for improvement was identified.

#### Area for improvement

One area for improvement was identified in relation to informing RQIA of any planned admissions to the home.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	1

## 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Ashley Currie, registered manager, 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

<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 3</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Prior to date of any admissions.</p>	<p>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. Ref: 6.3.2</p> <hr/> <p><b>Response by registered person detailing the actions taken:</b> The registered person will make RQIA aware when any new admissions are planned and that each resident will have a some transition and introduction to the home.</p>
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*\*Please ensure this document is completed in full and returned via Web Portal\**



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