

Announced Premises Inspection Report 7 April 2020











Desart Mews

Type of service: Residential Care (RC) Address: 95 Cathedral Road, Armagh, BT61 8AB

Tel No: 028 3751 7840

Inspectors: Julie Palmer and Gavin Doherty

www.rqia.org.uk

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

1.0 What we look for



2.0 Profile of service

This is a residential care facility which is registered to provide care for up to 34 persons.

3.0 Service details

Registered Provider: Amore (Watton) Limited Responsible Individual: Mrs Nicola Cooper	Registered Manager: Kayleigh Hunniford (acting)
Person in charge at the time of inspection: Kayleigh Hunniford	Date manager registered: see above
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	Number of registered places: 34

4.0 Inspection summary

An announced inspection took place on 7 April 2020 from 10.20 hours to 11.50 hours. The inspection was undertaken by the care and estates inspectors.

The purpose of the inspection was to undertake a post-registration examination of the premises prior to first occupation.

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 Mrs Kayleigh Hunniford, 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.

4.2 Action/enforcement taken following the most recent care inspection on 4 September 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 4 September 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 previous care inspection report
- the returned QIP from the previous care inspection

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 4 September 2019

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		
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.			
To be completed by: Prior to date of any admissions.	Response by registered person detailing the actions taken: Amore (Watton) Limited have informed RQIA of their intention to commence admissions to the home. They will keep RQIA informed of the dates of any planned admissions which will take place following appropriate and comprehensive assessment of residents. It is their intention to initially only admit residents to Bungalow 1 and within the MP/MP(E) category of care.	Met		

6.2 Inspection findings

Estates

The premises inspected consisted of two self-contained bungalows, each with six bedrooms. Communal space consisted of a large lounge area and dining room. An additional activity room was available in Bungalow 2.

Overall, the bedroom and en-suite accommodation were found to be well proportioned and to exceed the space standards outlined in the current care standards for residential care homes. The entire premises had been constructed, decorated and furnished to a high standard.

Design, completion and commissioning certificates were in place for the premises mechanical and electrical services, and the fire detection and alarm system and the emergency lighting installation are subject to ongoing service contracts and in-house function checks. The portable fire-fighting equipment for the premises was serviced on 7 April 2020, and the certificate confirming this was forwarded to RQIA on 8 April 2020. The premises nurse call system is also subject to regular maintenance and user checks. Call points checked during the inspection functioned correctly.

A valid fire risk assessment was in place and no significant findings had been identified. The overall risk was stated as 'Tolerable' which is satisfactory for these premises.

A valid risk assessment with regards to the control of legionella bacteria in the premises hot and cold water systems was in place. The water safety plan flowing from this assessment has been addressed and suitable control measures are in place and being maintained by the premises maintenance person.

Window openings were suitably restricted and suitable safeguards were in place with regards to the provision of safe hot water and surfaces in both the bedroom and en-suite accommodation.

A large secured garden area is provided.

Care Environment

We reviewed Bungalow 1 and Bungalow 2 and found that both bungalows had been well maintained. All bedrooms are en-suite with built in furniture; 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 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.

Discussion with the manager confirmed that recruitment of staff was underway for the home and that initially residents will only be admitted to Bungalow 1, within the MP/MP(E) category of care, following comprehensive assessment to ensure as smooth a transition as possible.

Areas for improvement

No areas for improvement were therefore required to be issued for this inspection from an estates or care perspective.

	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.





The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
@RQIANews