



# Announced Pre-Registration Care and Premises Inspection Report 13 April 2021



## Bramley Cottage

**Type of Service: Residential Care Home**  
**Address: 95 Cathedral Road, Lower Desart Lane,  
Armagh, BT61 8AR**  
**Tel no: 028 3751 7840**  
**Inspectors: Bronagh Duggan and Gavin Doherty**

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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 residential care home with six beds that provides care for people who have a learning disability.

### 3.0 Service details

<b>Applicant Organisation/Registered Provider:</b> Amore (Watton) Limited	<b>Applicant Registered Manager:</b> Kayleigh Hunniford
<b>Applicant Responsible Individual:</b> Nicola Cooper	
<b>Categories of care:</b> Residential Care (RC) LD - Learning Disability LD(E) – Learning Disability over 65 years	<b>Number of registered places:</b> 6
<b>Person in charge at the time of inspection:</b> Kayleigh Hunniford	

### 4.0 Inspection summary

An announced pre-registration care and estates inspection of Bramley Cottage was undertaken by the care and estates inspectors on 13 April 2021 from 10.30 to 12.00.

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 the registration of Bramley Cottage as a residential care home.

Areas of good practice were identified in relation to planned admission arrangements and the ongoing management of estates controls within the premises.

No areas for improvement were identified.

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 registration of this residential care home is granted from a care and a premises perspective.

### 4.1 Inspection outcome

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

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Kayleigh Hunniford, manager, as part of the inspection process and can be found in the main body of the report.

## 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 the registration Bramley Cottage, the home's Statement of Purpose and Residents Guide, the application for registration of Nicola Cooper, as responsible person and the application for registration of Kayleigh Hunniford as registered manager.

During the inspection the inspectors met with the manager and Tracey Henry locality manager.

The following records were examined during the inspection:

- Sample of care record templates
- Policies and procedures
- Staff training records
- Fire Risk Assessment
- Maintenance certificates for the fire detection and alarm system
- Maintenance certificates for the emergency lighting installation
- LOLER certification for hoists, overhead tracking and slings
- Portable Appliance Testing certificates
- Fixed Electrical Installation inspection certificate
- Legionella risk assessment and associated control measures.

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

## 6.0 The inspection

### 6.1 Inspection findings

#### Staffing

The manager advised that the care needs and dependency levels of residents accommodated within the home would be assessed and monitored; staffing levels would be adjusted as necessary to ensure that the needs of residents were met. The manager advised residents would be admitted on a gradual basis to the home ensuring time for residents to settle and ensuring staffing levels are reviewed according to the individual needs of residents.

Review of staff training information showed staff had completed mandatory training. The manager advised staff would be provided with additional training as required to meet the needs of residents admitted to the home.

The manager outlined the organisation structure for the home which included an identified team leader reporting directly to the manager, senior care assistants and care assistants. Supervision and reporting arrangements were also discussed.

## **Safeguarding**

There was a safeguarding policy and procedure in place this was in keeping with current best practice. Staff had completed training in relation to safeguarding.

## **Infection Prevention and Control**

The home was clean and tidy throughout. Facilities were available within the home to promote regular handwashing including soap dispensers and handtowels. Following the inspection the manager outlined the planned domestic cover arrangements for the home.

## **Environment**

An inspection of the premises relating to this service application was undertaken by the estates and care inspector. The premises consist of an existing six bedded single storey unit which has been maintained and decorated to a high standard.

The six bedrooms were fully furnished with a single bed and a range of furniture providing storage for residents' personal possessions. Wardrobe storage within the bedrooms was suitably secured to the backing wall. Low surface temperature heating is provided throughout the premises, removing any risk of scalding from hot surfaces. En-suite accommodation is provided to each bedroom. Each includes a level deck shower, toilet and wash hand basin. Each have liquid soap and disposable hand towels available. All hot water in these areas is suitably thermostatically controlled, preventing the risk of scalding, and high quality slip resistant floor finishes have been installed throughout. Both bedrooms and the en-suite accommodation comfortably exceed the floor area required in the current care standards for residential care homes. The communal living and dining areas were found to be bright, airy and presented to a high standard. This space also comfortably exceeds the floor area required in the current care standards for residential care homes. A well-appointed kitchen, utility/laundry facility and sluice/cleaners store are also provided along with a staff rest area and staff toilet.

Current certificates with relation to the premises' mechanical and electrical installations were available for inspection. The certificates indicated that the systems were being diligently maintained in accordance with current best practice guidance.

A current risk assessment with regard to the control of legionella bacteria in the premises' hot and cold water systems was in place and the significant findings from this assessment were being actively addressed and managed by the home's maintenance person. Again, the user checks were being maintained in accordance with current best practice guidance.

## **Fire Safety**

The premises had an up to date fire risk assessment, undertaken by a suitably accredited fire risk assessor. All recommendations were noted to be appropriately addressed.

The servicing of the fire detection and alarm system, emergency lighting installation and fire-fighting equipment was being undertaken in accordance with current best practice guidance. Extensive user checks were also being documented and maintained.

Policies and procedures have been put in place to ensure that:

- staff training will be carried out on induction and twice annually thereafter
- fire drills will be undertaken annually for all staff
- fire safety checks will be undertaken in accordance with best practice guidance for the
  - fire-fighting equipment,
  - fire alarm and detection system,
  - emergency lighting installation and,
  - means of escape.

### Care records

A review of a sample care record file showed plans were in place for detailed support plans based on the social care model. A sample of risk assessments were also included, the manager confirmed all records would be completed in a person centred way following admission to the home.

### Management arrangements

The manager outlined the management arrangements and governance systems in place within the home. These were found to be in line with good practice. The needs of residents were to be met in accordance with the home's Statement of Purpose and the categories of care for which the home would be registered with RQIA.

Policies and procedures were in place to help direct care given. The manager confirmed these were specific to the residential care home, and were easily accessible for all staff.

The manager confirmed monthly monitoring visits would be completed with a report produced and made available for residents, their representatives, staff, trust representatives and RQIA to read.

### Areas of good practice

The manager was committed to ensuring admissions to the home were done on a gradual basis to ensure residents had appropriate time to settle in to the new environment and build good staff relations. It was noted that the ongoing management of the estates controls measures within the premises were being maintained to a high standard.

### Areas for improvement

No areas for improvement were identified during the inspection.

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

## 6.2 Fit person interview

Providers of regulated establishments require to be registered with RQIA in accordance with Article 12 of The Health and Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, as it is an offence to carry on an establishment of any description without being registered in respect of it.

Nicola Cooper submitted an application to RQIA to become the responsible individual of Bramley Cottage residential care home. The relevant information, supporting documentation and appropriate fees accompanied the application.

Registration of Nicola Cooper with RQIA as responsible individual was granted.

Bramley Cottage was required to appoint a registered manager. An application was received in respect of Kayleigh Hunniford. The relevant information, supporting documentation and appropriate fees accompanied the application.

Discussion with Kayleigh Hunniford evidenced that she had a clear understanding of her role and responsibilities as a registered person under the relevant legislation and minimum standards. Registration of Kayleigh Hunniford with RQIA as registered manager was granted.

## **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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