

Announced Premises Inspection Report 08 July 2016











Rosemount Care Centre

Type of Service: Nursing

Address: 2 Moy Road, Portadown, BT62 1QL

Tel No: 028 3833 1311 Inspector: R Sayers

1.0 Summary

An announced premises inspection of Rosemount Care Centre took place on 08 July 2016 from 10.00 to 13.40hrs.

A pre-registration variation inspection was also conducted concurrently with the announced inspection; the pre-registration inspection report was submitted separately from this report.

The pre-registration inspection was required to confirm that two former staff rooms had been converted into patient bedrooms, in compliance with current standards.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care. Refer to section 4.3.

Is care effective?

On the day of the inspection the premises supported the delivery of effective care. Refer to section 4.4.

Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care. Refer to section 4.5.

Is the service well led?

On the day of the inspection the management of the premises was considered to be well led. Refer to section 4.6.

This inspection was underpinned by The Nursing Homes Regulations (Northern Ireland) 2005 and the Care Standards for Nursing Homes 2015

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and	0	0
recommendations made at this inspection	O	U

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Ms Claire McKenna, Registered 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.

1.2 Actions/enforcement taken following the most recent premises inspection

Other than those items detailed in the previous QIP there were no further actions required to be taken following the last inspection.

2.0 Service Details

Registered organisation/registered provider: Zest Care Homes Limited	Registered manager: Jillian Claire McKenna
Person in charge of the home at the time of inspection: Jillian Claire McKenna	Date manager registered: 01 November 2011
Categories of care: NH-DE, NH-I, RC-DE	Number of registered places: 73

3.0 Methods/processes

Prior to inspection the following records were analysed: Previous estates inspection report, statutory notifications over the past 12 months and the duty call log.

During the inspection the inspector met with: four patients, Ms Claire McKenna (Registered Manager), Mr Tommy McVeigh (Maintenance Supervisor), kitchen and laundry staff.

The following records were examined during the inspection: Copies of building services certificates, building user log books relating to maintenance inspections of building engineering services, legionellae risk assessment, and fire risk assessment.

4.0 The Inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 03 March 2016

The most recent inspection of the home was an unannounced care inspection, reference IN022239 dated 3 March 2016. The completed QIP was returned, and approved by the care inspector on 6 May 2016. This QIP will be validated by the specialist inspector at their next inspection.

4.2 Review of requirements and recommendations from the last premises inspection dated 29 August 2013

Last premises inspe	Validation of compliance	
Requirement 1	Complete a BS7671 Periodic Inspection Report of the electrical installation.	
Ref: Regulation		
14 (2)(a),(b) &(c)	Action taken as confirmed during the inspection:	Met
Stated: First time	BS7671 works completed and upgrade works ongoing.	
Requirement 2	Prepare and implement a works action plan to install self- closer devices on all bedroom fire	
Ref: Regulation	doors.	
27.(4)(a)&(c)		Met
	Action taken as confirmed during the	
Stated: First time	inspection:	
	Fire safety works completed.	
Last premises inspection recommendations		Validation of compliance
Recommendation 1	Complete a decoration condition survey and implement a planned redecoration works project to	
Ref: Standard 32.1	maintain decorative standards.	Met
Stated: First time	Action taken as confirmed during the inspection:	mot
	Redecoration works are completed.	

4.3 Is care safe?

A range of building services maintenance documents were presented for review during this estates inspection. This documentation included: risk assessments, inspection and test reports for various elements of the engineering services.

Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this estates inspection.

A range of fire protection measures are in place for the premises, this includes: a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape.

The standard used by the registered person to determine the level of fire safety within the premises takes account of: the interaction between the physical fire precautions, the fire hazards, the number of patients, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment, which was completed by a risk assessor holding professional body registration for fire risk assessors.

This supports the delivery of safe care.

Number of requirements	0	Number of recommendations:	0
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4.4 Is care effective?

There are arrangements in place for routine premises management plus emergency breakdown repairs. Service users are involved, where appropriate in decisions around the redecoration and maintenance of the premises.

Interior refurbishment has been ongoing in the home; floor coverings have been renewed and wall /ceiling surfaces redecorated.

This supports the delivery of effective care.

A protective coating/stain is to be applied to the surfaces of garden furniture as the surfaces have been weathered.

4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit.

Service users are consulted about decisions around décor and the private accommodation where appropriate.

The service users consulted expressed satisfaction with the standard of the environment within the home.

This supports the delivery of compassionate care.

Number of requirements	0	Number of recommendations:	0
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4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant persons.

Arrangements are in place for managing premises related incidents/notifiable events and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

Number of requirements	0	Number of recommendations:	0

5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report

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 registered provider from their responsibility for maintaining compliance with the regulations and standards.





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