

Inspection Report 5 April 2023











St Joseph's

Type of Service: Nursing Home Address: 16 Princes Street, Warrenpoint, BT34 3NH Tel no: 028 4175 3572

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website https://www.rqia.org.uk/

1.0 Service information

Organisation/Registered Provider: Registered Manager:

Kilmorey Care Ltd Ann Begley

Registered Person: Date registered:

Cathal O'Neill 20/05/2022

Person in charge at the time of inspection:

Ann Begley

Brief description of the accommodation/how the service operates:

The home is a registered nursing home which provides nursing care for up to 50 patients. Patients' bedrooms are located over three floors. The home offers communal dining and seating areas with garden spaces available for patients.

2.0 Inspection summary

An announced inspection took place on 5 April 2023 from 2pm to 03:30pm by an estates and care inspector in connection with a variation application.

This inspection focused on the newly adapted sections of the premises associated with the variation application to provide a 14 bedded dementia unit within the existing building.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

The inspection consisted of checks to related documentation submitted by the provider during the assessment of the variation application, followed by a walk around the home on the date of the inspection. This inspection focussed only on the new and adapted accommodation associated with the variation.

4.0 What people told us about the service

We spoke with the manager during the inspection who highlighted and described the changes made within the home and the intended use of the new facilities for use by patients and staff.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection to St Joseph's was undertaken on 23 January 2023 by a care inspector, the areas for improvement identified during their inspection were not assessed as part of this inspection

Action required to ensur Nursing Homes (April 20	Validation of compliance	
Area for improvement 1 Ref: Standard 41 Stated: First time	The registered person shall review the staffing arrangements in the home to ensure patients' needs are met at all times. Consideration should be given to the deployment of staff, the layout of the home and working routines. Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	Carried forward to the next inspection
Area for improvement 2 Ref: Standard 39 Stated: First time	The registered person shall ensure that any staff given the responsibility of stoma management will have first received training in this aspect of care. Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	Carried forward to the next inspection
Area for improvement 3 Ref: Standard 47 Criteria (3) Stated: First time	The registered person shall ensure that any staff involved in the preparation of food for patients will have completed basic food hygiene prior to preparing any food. Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	Carried forward to the next inspection

Area for improvement 4	The registered person shall ensure that food intake records are reflective of the actual food consumed by patients.	
Ref: Standard 12	, .	
Criteria (27)	Action required to ensure compliance with this standard was not reviewed as	Carried forward to the next
Stated: First time	part of this inspection and this is carried forward to the next inspection.	inspection

5.2 Inspection findings

5.2.1

Statutory control documents and building engineering maintenance service certificates were reviewed, and found to be compliant with current legislative requirements.

Fire safety and legionella prevention controls are implemented in accordance with respective risk assessment documents.

Interior and exterior accommodation reviewed complied with the DoH Care Standards for Nursing Homes.

A dementia user environmental audit had been completed and recommendations implemented.

There were no areas for improvement required as a result of the estates review.

6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified.

The areas for improvement identified during the previous care inspection are carried forward for review at the next inspection.

Areas for improvement have been identified where action is required to ensure compliance with The Care Standards for Nursing Homes (April 2015).

	Regulations	Standards
Total number of Areas for Improvement	0	4*

^{*} the total number of areas for improvement includes four standards which are carried forward for review at the next inspection.

	Quality Improvement Plan	
Action required to ensure (April 2015)	compliance with the Care Standards for Nursing Homes	
Area for improvement 1 Ref: Standard 41 Stated: First time	The registered person shall review the staffing arrangements in the home to ensure patients' needs are met at all times. Consideration should be given to the deployment of staff, the layout of the home and working routines.	
To be completed by: 23 March 2023	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
	Ref: 5.2.1	
Area for improvement 2 Ref: Standard 39	The registered person shall ensure that any staff given the responsibility of stoma management will have first received training in this aspect of care.	
Stated: First time To be completed by: 23 February 2023	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
,	Ref: 5.2.2	
Area for improvement 3 Ref: Standard 47 (3)	The registered person shall ensure that any staff involved in the preparation of food for patients will have completed basic food hygiene prior to preparing any food.	
Stated: First time	Action required to ensure compliance with this standard	
From the date of the inspection onwards	was not reviewed as part of this inspection and this is carried forward to the next inspection. Ref: 5.2.2	
(23 January 2023)	INGI. J.Z.Z	

Area for improvemen	t 4 The registered person shall ensure that food intake records are reflective of the actual food consumed by patients.
Ref: Standard 12 (27)	
Stated: First time	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is
To be completed by: 23 February 2023	carried forward to the next inspection.
,	Ref: 5.2.2

^{*}Please ensure this document is completed in full and returned via Web Portal





The Regulation and Quality Improvement Authority James House 2-4 Cromac Avenue Gasworks Belfast BT7 2JA