



# Unannounced Follow-up Care Inspection Report 13 March 2019



## Iniscora

**Type of Service: Residential Care Home**  
**Address: 29 St Patrick's Drive, Downpatrick BT30 6NE**  
**Tel No: 028 4461 2128**  
**Inspector: Alice McTavish**

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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 nine beds that provides care for adults who have a learning disability.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Mainstay DRP  <b>Responsible Individual:</b> Helen Owen	<b>Registered Manager:</b> Christine McLean
<b>Person in charge at the time of inspection:</b> Laura Torney, manager	<b>Date manager registered:</b> 3 October 2007
<b>Categories of care:</b> Residential Care (RC) LD - Learning Disability LD (E) – Learning disability – over 65 years	<b>Number of registered places:</b> 9

### 4.0 Inspection summary

An unannounced inspection took place on 13 March 2019 from 12.40 to 14.00.

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 Standards, August 2011.

This was a focused inspection which sought only to assess progress with any areas for improvement identified during and since the last care inspection.

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	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Laura Torney, 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 previous inspection report, the returned QIP, notifiable events, and any written and verbal communication received since the previous care inspection.

During the inspection the inspector met with the manager and two members of care staff. No visiting professionals and no residents' visitors/representatives were present. One resident was present but did not wish to engage in conversation with the inspector. The resident was observed, however, to be relaxed and comfortable in the home and in interactions with staff.

The following records were examined during the inspection:

- legionella risk assessment
- the home's statement of purpose and resident guide
- recording matrix of staff attendance at fire drills
- a sample of individual written agreements

A total of five questionnaires was provided for distribution to residents and/or their representatives to enable them to share their views with RQIA. A poster was provided for staff detailing how they could complete an electronic questionnaire. No questionnaires were returned by residents, residents' representatives or staff within the agreed timescale.

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 9 October 2018**

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector.

## 6.2 Review of areas for improvement from the last care inspection dated 9 October 2018

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for improvement 1</b> <b>Ref:</b> Regulation 14 (2) (c) <b>Stated:</b> First time	The registered person shall ensure that a Legionella risk assessment is completed for the home and any recommendations arising are fully addressed.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> A Legionella risk assessment was completed on 30 November 2018 and all recommendations arising were fully addressed.	
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 20.6, 20.9 <b>Stated:</b> First time <b>To be completed by:</b> 7 December 2018	The registered person shall ensure that the statement of purpose and residents' guide are updated to include the management of smoking materials as a restrictive practice.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> A review of the home's statement of purpose and residents' guide confirmed the inclusion of the management of smoking materials as a restrictive practice.	
<b>Area for improvement 2</b> <b>Ref:</b> Standard 29.6 <b>Stated:</b> First time <b>To be completed by:</b> 7 December 2018	The registered person shall ensure that a suitable system is put in place to provide managerial oversight of staff attendance at a practice fire drill at least annually with records retained.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Discussion with the manager and inspection of fire drill records confirmed that a recording system was in place.	

<b>Area for improvement 3</b> <b>Ref:</b> Standard 4.2 <b>Stated:</b> First time <b>To be completed by:</b> 7 December 2018	The registered person shall ensure the following: <ul style="list-style-type: none"> <li>• residents and/or their representatives are given written notice of all changes to the written agreement</li> <li>• the written agreement is kept up to date to reflect the current weekly fee</li> <li>• the updated agreement is signed and dated by the resident and/or their representative</li> </ul>	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> An inspection of a sample of individual written agreements confirmed that these areas were addressed.	

### 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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