



Announced Premises Inspection Report 15 April 2021



Sir Samuel Kelly Memorial Eventide Home

Type of Service: Residential Care Home
Address: 39 Bangor Road, Holywood, BT18 0NE
Tel no: 028 9042 2293
Inspector: Gavin Doherty

www.rqia.org.uk

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 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 registered residential care home which provides care for up to 40 residents.

3.0 Service details

Organisation/Registered Provider: The Salvation Army Responsible Individual(s): Elaine Cobb	Registered Manager: Sharon Boyd
Person in charge at the time of inspection: Sharon Boyd	Date manager registered: 31 August 2018
Number of registered places: 40	

4.0 Inspection summary

An announced inspection took place on 15 February 2021 from 10.00 to 12.00 hours.

The purpose of the inspection was to inspect the premises affected by variation VA011331 submitted to RQIA on 26 October 2019. The works involved structural alterations to an existing wing of the home to provide an additional 16 bedrooms along with associated communal space and staff accommodation.

During the inspection, evidence of good practice was found in relation to management of the environment. No areas requiring improvement were identified.

This inspection was underpinned by:

- The Residential Care Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)

The findings of this report will provide the provider with the necessary information to assist them to fulfil their responsibilities.

5.0 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 the staff on duty, 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.

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

6.0 The inspection

The Environment

An inspection of the premises relating to this service application was undertaken by the estates inspector. The premises were found to have been refurbished and decorated to a very high standard.

All bedrooms were fully furnished with a single bed and a range of furniture providing storage for patients' personal possessions, including lockable storage space. 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 and 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 controlled, preventing the risk of scalding, and high quality slip resistant floor finishes have been installed throughout.

Once the bedrooms are occupied and the en-suites are in use, the registered manager must assess each individual service user and ensure that any additional accessibility aids that they may require in their private accommodation are installed. All bedrooms and en-suite accommodation comfortably exceed the floor area required in the current care standards for residential care homes.

The communal spaces, which are located throughout the premises, were again found to be bright, airy and presented to a very high standard. These areas also comfortably exceed the floor area required in the current care standards for residential care homes.

A new laundry facility has been provided as part of this variation. This facility has been designed to provide a clear workflow in accordance with current infection prevention and control best practice guidance.

All required statutory approvals were presented for inspection and were found to be in order. These included:

- Planning approvals
- Building Control approvals
- Fire Risk Assessment
- Design/Commissioning certificates for the fire detection and alarm system
- Design/Commissioning certificates for the emergency lighting installation
- Commissioning certificate for the extended nurse call system
- Fixed Electrical Installation completion certificate
- Legionella risk assessment and associated control measures

The premises had an up to date fire risk assessment, undertaken by a suitably accredited fire risk assessor, in place dated 11 April 2021. 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.

Following this inspection and taking into account the information gathered throughout the process, registration of the accommodation covered in this variation is granted from an estates perspective.

Areas for improvement

No areas for improvement were identified during the inspection.

	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.



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