

Inspection Report

Name of Service: Ashgrove
Provider: Ann's Care Homes
Date of Inspection: 18 February 2025

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:	Ann's Care Homes
Responsible Individual:	Mrs Charmaine Hamilton
Registered Manager:	Mrs Barbara Armstrong – not registered
Service Profile – This home is a registered nursing home which provides nursing care for up to 46 patients who have a dementia. As a result of this variation application, the maximum number of patients will increase to 48.	

2.0 Inspection summary

An announced combined estates & care inspection took place on 18 February 2025 from 10.40am to 12.15pm in connection with the variation application reference number VA012785.

The inspection focused solely on the two new bedrooms within the Carlingford Unit and the associated refurbishment of the dining room, hairdressing room and new store room.

No new areas for improvement were identified as a result of this inspection. Areas for improvement identified at the previous care inspection were carried forward for review at the next inspection.

The maximum number of registered places will increase from 46 to 48 as a result of this proposed variation application.

3.0 The inspection

3.1 How we Inspect

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

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from patients, relatives, staff or the commissioning Trust.

3.3 Inspection findings

3.3.1 Care Inspector Findings

The new bedrooms, with en-suite toilet facilities, were clean, spacious, well decorated and suitably furnished. The fixtures, fittings, and furnishings within the bedrooms were compliant with the Care Standards for Nursing Homes (2022).

The extended dining room provided patients with a pleasant environment in which to have their meals. The room was spacious, well lit and well furnished.

The new hairdressing facility had ample fixtures, fittings and storage facility for the visiting hairdressers to provide their services. The new storage area could be locked and had wipeable shelving to ensure infection prevention and control measures could be completed.

In conclusion, from a care perspective RQIA were satisfied that the actions taken in relation to this variation are compliant with current DoH minimum standards and may be processed to completion.

No areas for improvement were identified.

3.3.2 Estates

Documentation presented during and subsequent to the inspection confirmed that the premises, engineering services and equipment are installed and commissioned in line with relevant legislation, ACOPs and best practice guidance.

The accommodation as specified in this variation application was inspected and found to be compliant with current DoH minimum standards.

The fire risk assessment and legionella risk assessment documents had been reviewed and action plan recommendations implemented.

From an estates perspective RQIA were satisfied that the premises' were suitable to meet the aims and objectives, as described in the home's Statement of Purpose.

No areas for improvement were identified.

4.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no new areas for improvement being identified. Findings of the inspection were discussed with the management team as part of the inspection process and can be found in the main body of the report.

	Regulations	Standards
Total number of Areas for Improvement	2*	0

*The total number of areas for improvement includes two that have been carried forward for review at the next inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005	
Area for Improvement 1 Ref: Regulation 12 (1) (a) (b) Stated: Second time	The registered person shall ensure that patients are appropriately monitored following a fall where a head injury has occurred or the potential of a head injury is possible. Ref: 2.0
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.
Area for improvement 2 Ref: Regulation 14 (2) (a) and (c) Stated: First time	The registered person shall ensure that wet floors in the home are signed to alert anyone entering the area on the risk of slipping. Ref: 2.0
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.



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