



Announced Variation to Registration Care Inspection Report 13 December 2018



Magherafelt Manor Residential Home

Type of Service: Residential Care Home
Address: 22 Pound Road, Magherafelt, BT45 6NR
Tel No: 028 7930 0284
Inspector: Laura O'Hanlon

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 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 28 beds that provides care for residents living with dementia.

3.0 Service details

Registered Provider: Runwood Homes Ltd Responsible Individual: Gavin O'Hare-Connolly	Registered Manager: Siobhan Conway
Person in charge at the time of inspection: Siobhan Conway	Date manager registered: 17 July 2017
Categories of care: DE – Dementia	Number of registered places: 28 A maximum of 12 residents accommodated in the Willow Suite and a maximum of 16 residents accommodated in the Cedar Suite.

4.0 Inspection summary

An announced variation to registration inspection of Magherafelt Manor residential home took place on 13 December 2018 from 10.20 to 12.00.

The inspection sought to assess an application submitted to RQIA for a variation to the registration of Magherafelt Manor residential care home for a reduction in the number of residents accommodated from 31 to 28 residents. As part of this application the residents accommodated on the ground floor will be relocated to the top floor, therefore the residential home will be self-contained on the top floor.

The variation to registration was granted from a care perspective following this inspection.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and residents experience.

4.1 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 Siobhan Conway, registered manager, as part of the inspection process and can be found in the main body of the report.

4.2 Action/enforcement taken following the most recent care inspection dated 19 April 2018

No further actions were required to be taken following the most recent inspection on 19 April 2018.

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, written and verbal communication received since the previous care inspection and the variation to registration application submitted to RQIA.

During the inspection the inspector met with approximately 20 residents, three staff and the registered manager.

Specific methods used in this inspection include the following:

- Inspection of the premises
- Discussion with the registered manager
- Examination of records
- Evaluation of findings and feedback

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 29 October 2018

The most recent inspection of the home was an unannounced premises inspection. The completed QIP was returned and approved by the estates inspector. This QIP will be validated by the estates inspector at the next premises inspection.

6.2 Review of areas for improvement from the last care inspection dated 19 April 2018

There were no areas for improvement made as a result of the last care inspection.

6.3 Inspection findings

Statement of Purpose

The establishment's Statement of Purpose had been reviewed to include the decrease in the number rooms and outlined the range of services provided in accordance with Regulation 3 (1) of The Residential Homes Regulations (Northern Ireland) 2005.

Resident's Guide

The establishment's Resident's Guide had been reviewed to include the decrease in the number rooms and outlined the range of services provided in accordance with DHSSPS Residential Care Homes Minimum Standards (2011) and Regulation 4(1) (b) and 5 (1) (b) of the Residential Homes Regulations (Northern Ireland) 2005.

Policies and Procedures

The home had a range of policies and procedures in place to guide and inform staff. Policies were centrally indexed and retained in a manner which was easily accessible by staff.

The Environment

The application proposed that the residents accommodated on the ground floor would be relocated to the top floor. This involved the reduction in the number of residents from 31 to 28. As a result of this relocation all the residents would be accommodated on the top floor.

Residents would be accommodated in single en-suite bedrooms which were found to be hazard free. The resident's bedrooms were appropriately furnished. Discussion with the registered manager established that pictures were to be wall mounted and that residents would be involved in personalising their own bedrooms. All bedrooms for residents had been fitted with call bells.

The areas of the environment viewed during the inspection presented as organised and adequately heated. The décor and furnishings had been completed to a very high standard.

This floor contained dining areas, communal day rooms, laundry and sluice room facilities. There were facilities in place for residents and their families to make tea/coffee should they wish.

Infection prevention and control

Waste disposal bins were provided in the home. There was confirmation that personal protection equipment (PPE) would be supplied and accessible in all communal facilities.

Operational issues

Gavin O'Hare-Connolly is the responsible person for the home with Siobhan Conway as registered manager. The registered manager was aware of her responsibilities in regard to the categories of care for which the home will be registered.

Medication storage

A secure area was provided which would ensure that a medicine trolley could be secured to the wall. The room will be kept locked and only senior staff will have access.

Staffing

The registered manager advised that the planned staffing levels for the residential home were:

- 2 x senior care assistants
- 2 x care assistants

The inspector was informed that the planned staffing levels for the home were currently approximate and would be flexible and responsive to the changing needs and numbers of residents. Catering and domestic services were to be shared with the registered nursing home.

The registered manager confirmed that appropriate staffing levels would be maintained to ensure that the assessed needs of the residents are met.

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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