

Announced Variation to Registration Care Inspection Report 7 March 2019



Glenabbey Manor

Type of Service: Residential Care Home
Address: 93 - 97 Church Road, Glengormley BT36 6HG
Tel No: 028 9084 3601
Inspector: Alice McTavish

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 which was registered to provide care for 57 older people and people who have dementia across the first and second floors of the building. The ground floor, which could accommodate a further 19 people, had not been registered as part of the residential care home to date.

3.0 Service details

Registered Provider: Runwood Homes Ltd Responsible Individual: Gavin O'Hare-Connolly	Registered Manager: Julie Beacom
Person in charge at the time of inspection: Julie Beacom	Date manager registered: 28 September 2018
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia	Number of registered places: 57

4.0 Inspection summary

An announced variation to registration inspection of Glenabbey Manor took place on 7 March 2019 from 10.00 to 12.10.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

The inspection sought to assess an application submitted to RQIA for a variation to the registration of Glenabbey Manor residential care home for an increase in numbers of beds from 57 to 76.

The variation to registration to increase the number of beds from 57 to 76 to accommodate older people 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 resident 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 Julie Beacom, registered manager and Michael Doolin, Senior Director of Operations, Runwood Homes 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.

4.2 Action/enforcement taken following the most recent care inspection dated 12 February 2019

No further actions were required to be taken following the most recent care inspection on 12 February 2019.

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 application for variation, previous inspection reports, returned Quality Improvement Plans, notifications of accidents and incidents since the previous inspection and any other written or verbal information received by RQIA.

During the inspection the inspector met with the registered manager and the Senior Director of Operations.

The staff duty rota was examined during the inspection.

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 12 February 2019

The most recent inspection of the home was an unannounced follow-up care inspection.

6.2 Review of areas for improvement from the last care inspection dated 12 February 2019

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

This inspection focused solely on the variation to registration application made by the registered provider to RQIA.

6.3 Inspection findings

6.3.1 Environment

The entrance to Glenabbey Manor is on the ground floor of the building. There is a large reception area with a reception desk and offices for the manager and for administrative staff. There is a large café area with comfortable seating for the use of residents and their visitors. There is a separate, large communal lounge which opens onto a secure garden area. There

are also two smaller sitting areas off the corridor which overlook the front of the home. There is a large dining room and additional dining space in the café.

All 19 bedrooms are spacious and have an en-suite bathroom. The bedrooms have a bed, bedside locker, dressing table or desk with a chair, a wardrobe, an over-bed table and an easy chair. There is both overhead and wall lighting. The taller items of furniture are properly secured to the wall. There is a call system in place in each bedroom and en-suite bathroom. There is provision for the safe and secure storage of valuables as there is a lockable drawer in the bedside locker. Each bedroom has a television. It was noted that there were no shower seats available for use in en-suite bathrooms; the registered manager agreed to place six seats on order and later confirmed that these were to be delivered before residents would be admitted to this part of the home.

The laundry and catering kitchen are situated on the ground floor of the building. These areas are clean, well equipped and there are good arrangements in place to ensure effective infection prevention and control.

There are two visitors' toilets, domestic and linen storage rooms, an office area for care staff with an adjoining medication room and additional storage areas for equipment. The home is decorated and furnished to a very high standard.

6.3.2 Management arrangements

The registered manager had recently tendered her resignation and was working her notice. The Senior Director of Operations outlined the measures which had been put in place to support to the incoming manager, including a minimum of a two week period during which the current registered manager would complete a detailed handover to the new manager.

The Senior Director of Operations and the Regional Manager would be present to provide support to the incoming manager during her induction period and afterwards. In addition, the incoming manager would be supported by the home's deputy manager; there was also a system in place whereby each manager was paired with another registered manager for informal support and advice.

6.3.3 Staff recruitment, induction and training

The registered manager reported that two additional Care Team Managers had been recruited and were completing induction and training before taking up duties on the first and second floors of the home. This would allow more established and experienced members of staff to work on the ground floor of the home. The home had sufficient numbers of care assistants in place. An assistant cook, kitchen assistants and domestic staff were also in the process of being recruited.

The registered manager advised that all staff would be supported in their roles through regular supervision and appraisal and that competency and capability assessments would be undertaken for all staff who are left in charge of the home in the absence of the manager.

6.3.4 Staffing

The manager described the staffing levels for the home and advised that these will be flexible and responsive to the changing needs and numbers of residents in future. A staff duty rota was already in place in anticipation of residents being admitted to the home.

A clear organisational structure was in place in the home. In addition to a registered manager, there was a deputy manager and domestic, laundry, administrative and maintenance staff. The care team would comprise Care Team Managers and care assistants. An activities co-ordinator was currently employed for 42 hours per week. In light of the increase in bed numbers, the Senior Director of Operations agreed that a corresponding increase in the hours for activities staff by 20 hours per week would be needed and agreed to put this into place.

6.3.5 Admission of residents

It was anticipated that new residents would be admitted in the near future. The plan is to admit a maximum of two residents each week. This phased admission would allow staff to get to know the care needs of individual residents and how these should be met whilst building relationships with the residents. This was agreed by the Senior Director of Operations and the current registered manager.

6.3.6 Safeguarding

The home had an adult safeguarding policy in place which reflected current regional guidance. The registered manager advised that training in adult safeguarding was arranged for all staff and that there were clear referral arrangements to trusts with contact details clearly displayed for staff in the home.

6.3.7 Infection prevention and control

The home had a suite of policies and procedures which covered all aspects of infection prevention and control, management of clinical and non-clinical waste and management of the environment. Inspection of the premises identified that communal bathrooms contained hand wash dispensers and paper towels. There was hand-washing signage throughout the home with hand sanitisers situated where necessary. There were gloves and aprons available for staff.

6.3.8 Medication storage

A room was provided as a treatment room and contained storage along with a medicine trolley which could be secured to the wall.

6.3.9 Care records

The registered manager advised that some resident records would be held in hard copy, for example, pre-admission information from trusts. Internal resident records would be maintained and stored on an electronic system, for example, care needs assessments, care and support plans, risk assessments, daily progress records and regular reviews of care.

6.3.10 Policies and procedures

The registered manager confirmed that all policies required to be in place in residential care homes were in place and easily available to all staff.

Areas of good practice

It was evident that sufficient thought and planning had gone into making suitable preparations for the admission of new residents.

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.



The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
Twitter @RQIANews