

Inspection Report

10 June 2021



Glenabbey Manor

Type of Service: Residential Care Home
Address: 93 - 97 Church Road, Glengormley,
Newtownabbey, BT36 6HG
Tel no: 028 9084 3601

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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: Kathryn Homes Ltd Responsible Individual: Dermot Parsons	Registered Manager: Mrs Liza Lorimer, not registered
Person in charge at the time of inspection: Liza Lorimer	Number of registered places: 76 comprising: A maximum of 47 residents in category RC-DE; 19 accommodated on the ground floor and 28 accommodated on the first floor. A maximum of 29 residents in category RC-I accommodated on the second floor.
Categories of care: Residential Care (RC) I – Old age not falling within any other category DE – Dementia.	Number of residents accommodated in the residential care home on the day of this inspection: 66
Brief description of the accommodation/how the service operates: This is a registered Residential Home which provides social care for up to 76 residents. The home is divided into three units: 19 residents who live with dementia can be accommodated on the ground floor and 28 residents who live with dementia can be accommodated on the first floor. Twenty nine residents who require general residential care can be accommodated on the second floor.	

2.0 Inspection summary

An unannounced inspection took place on 10 June 2021 between 9.30 a.m. and 10.45 a.m. The inspection was completed by a care and an estates inspector.

RQIA received information from an anonymous source on 4 June 2021 who raised concerns in relation to management of the home's water system and the nutritional care of residents. Upon receipt of this information, RQIA discussed these concerns with the manager and the home's health and safety staff.

Assurances were received from the manager as to the quantity of food available to residents and how the quality of their dining experience is monitored.

Discussion with staff and review of records prior to and during the inspection confirmed that while Legionella had been detected within the home's water system, appropriate control measures were in place to manage this. However, an area for improvement was identified in relation to the timely notification of incidents to RQIA; this is discussed further in Section 4.2.1.

The findings of this report will provide the manager and the Responsible Individual with the necessary information to improve staff practice.

3.0 How we inspect

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

In preparation for this inspection a range of information about the service was reviewed to help us plan the inspection. This included any other written or verbal information received about this home.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

4.0 The inspection

4.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection to Glenabbey Manor was undertaken on 2 March 2021 by a pharmacist inspector.

Areas for improvement from the last inspection on 16 and 18 September 2020		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 20 (1) (a) Stated: First time	The registered person shall ensure that at all times suitably qualified, competent and experienced persons are working in the home in such numbers as are appropriate for the health and welfare of residents.	Carried forward to the next inspection
	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 29 (4) (b) (c) Stated: First time	<p>The registered person shall ensure that the reports of the monthly monitoring visits by the registered provider include the following:</p> <ul style="list-style-type: none"> the specific period reviewed for accidents and incidents all actions partially or not fully completed carried forward to the next month. <p>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.</p>	Carried forward to the next inspection
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011)		Validation of compliance
Area for improvement 1 Ref: Standard 17.1 Stated: Second time	<p>The registered person shall ensure that all complaints are fully documented in line with the company's policies and procedures and best practice.</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>	Carried forward to the next inspection
Area for improvement 2 Ref: Standard 13 Stated: First time	<p>The registered person shall ensure that effective arrangements are in place to provide consistent, person centred activities to residents.</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>	Carried forward to the next inspection
Area for improvement 3 Ref: Standard 12.10 Stated: First time	<p>The registered person shall ensure the following:</p> <ul style="list-style-type: none"> Speech and Language Therapy recommendations are clarified, where necessary resident's care records contain clear directions for staff at all times in relation to the level of supervision each resident requires with eating and drinking. <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>	Carried forward to the next inspection

4.2 Inspection findings

4.2.1 The environment

Discussion with staff confirmed that routine water sampling within the home had identified the presence of Legionella bacteria in one identified area of the home. Review of information provided by the manager and the home's health and safety staff evidenced that this was assessed as presenting a low risk to residents and that appropriate control measures were in place.

However, it was noted that communication from the home's estates team to the manager in respect of the water system was not sufficiently timely or detailed on occasion; it was also stressed that the manager should proactively obtain relevant guidance and/or instruction from her estates team at all times when clarification concerning estates matters is required.

Discussion with the manager and review of records highlighted that there was a delay in RQIA being appropriately informed of the presence of Legionella bacteria in an identified area of the home; an area for improvement was made.

Feedback from the manager and review of records confirmed that all staff have received updated training in relation to water safety. The home's managerial staff have also undergone enhanced training in this area.

Following the inspection, RQIA received written communication from the senior management team of Kathryn Homes Ltd setting out the measures now in place to ensure clear and timely communication between the organisation's estates personnel and its home managers.

4.2.2 Residents' nutritional care

Discussion with the manager on 4 June 2021 provided assurance that an effective system was in place regarding delivery of foods to the home; the manager advised that no disruption to food delivery had occurred in recent months with the exception of a bread delivery on one specific morning; the manager provided assurances that contingency measures were in place at the time to manage this so that residents' meals were not impacted.

The manager advised that following recent consultation with residents and their relatives, the home's menu has been altered; the manager stated that a quality assurance questionnaire will be carried out in due course to obtain feedback regarding this change. This will be reviewed at a future inspection.

5.0 Conclusion

Discussion with the manager and staff evidenced that appropriate control measures were in place for the ongoing management of the home's water system. Kathryn Homes Ltd continues to liaise with the RQIA estates team regarding measures in place to address the presence of Legionella bacteria in one identified area of the home.

Discussion with the manager provided assurance that appropriate measures were in place regarding the provision of food to residents.

The home's menu has been recently updated and a quality assurance questionnaire is to be distributed by the manager to seek resident/relative feedback concerning this change.

One new area for improvement was identified in relation to statutory notifications to RQIA.

7.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland).

	Regulations	Standards
Total number of Areas for Improvement	3*	3*

*The total number of areas for improvement include five which are carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with Mrs Liza Lorimer, manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 20 (1) (a) Stated: First time To be completed by: Immediate and ongoing	The registered person shall ensure that at all times suitably qualified, competent and experienced persons are working in the home in such numbers as are appropriate for the health and welfare of residents. Ref: 4.1 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.

<p>Area for improvement 2</p> <p>Ref: Regulation 29 (4) (b) (c)</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing</p>	<p>The registered person shall ensure that the reports of the monthly monitoring visits by the registered provider include the following:</p> <ul style="list-style-type: none"> the specific period reviewed for accidents and incidents all actions partially or not fully completed carried forward to the next month. <p>Ref: 4.1</p> <p>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.</p>
<p>Area for improvement 3</p> <p>Ref: Regulation 30 (1) (d)</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing</p>	<p>The registered person shall give notice to the Regulation and Improvement Authority without delay of the occurrence of any event in the home which adversely affects the wellbeing or safety of any resident.</p> <p>Ref: 4.2.1.</p> <p>Response by registered person detailing the actions taken: Going forward home manager will ensure that all notifications are received without delay. All events have recently been checked and appropriate notifications have been made.</p>
<p>Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011)</p>	
<p>Area for improvement 1</p> <p>Ref: Standard 17.1</p> <p>Stated: Second time</p> <p>To be completed by: Immediate and ongoing</p>	<p>The registered person shall ensure that all complaints are fully documented in line with the company's policies and procedures and best practice.</p> <p>Ref: 4.1</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>
<p>Area for improvement 2</p> <p>Ref: Standard 13</p> <p>Stated: First time</p> <p>To be completed by: 30 October 2020</p>	<p>The registered person shall ensure that effective arrangements are in place to provide consistent, person centred activities to residents.</p> <p>Ref: 4.1</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>

Area for improvement 3 Ref: Standard 12.10 Stated: First time To be completed by: Immediate and ongoing	<p>The registered person shall ensure the following:</p> <p>Speech and Language Therapy recommendations are clarified, where necessary</p> <p>Resident's care records contain clear directions for staff at all times in relation to the level of supervision each resident requires with eating and drinking.</p> <p>Ref: 4.1</p>
	<p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>

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