

# Inspection Report

31 May 2024



## Oak Tree Manor Residential Home

**Type of Service: Residential Care Home**  
**Address: 2A Hazel Avenue, Dunmurry,**  
**Belfast BT17 9QU**  
**Tel no: 028 9061 0435**

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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

<b>Organisation/Registered Provider:</b> Kathryn Homes Ltd	<b>Registered Manager:</b> Miss Veronica Sousa
<b>Responsible Individual:</b> Mrs Tracy Anderson	<b>Date registered:</b> 30 December 2022
<b>Person in charge at the time of inspection:</b> Miss Veronica Sousa- Manager	<b>Number of registered places:</b> 51
<b>Categories of care:</b> Nursing (RC): DE – dementia	<b>Number of patients accommodated in the residential care home on the day of this inspection:</b> 51
<b>Brief description of the accommodation/how the service operates:</b> Oak Tree Manor Residential Care Home is a residential care home registered to provide health and social care for up to 51 residents. The home is divided into three units ( Rowan, Cedar and Seymour) over two floors.  There is a nursing home which occupies the first floor and the manager for this home is responsible for both services.	

## 2.0 Inspection summary

An announced combined estates & care inspection took place on 31 May 2024 from 9:30am to 11.30am in connection with the variation application reference number VA012503. See sections 4.2 and 4.3 respectively.

The inspection focused solely on the conversion works associated with the variation application to alter the interior building plan configuration. The ground floor Quiet Lounge 2 was converted into two single bedrooms with ensuite WC/Shower. The maximum number of patients registered increases by two to 53. The categories of care for residents to be admitted remain the same.

### 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.

### 4.0 The inspection findings

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

Areas for improvement from the last inspection on 7 May 2024		
Action required to ensure compliance with The Residential Care Home Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 14 (2)(a)(c)  <b>Stated:</b> First time	The registered person shall ensure that all parts of the home that the residents have access to are free from hazards to their safety. This is stated in relation to ensuring the domestic store and sluice room are kept locked, and the inappropriate storage of topical medication.	<b>Carried forward to the next inspection</b>
	<b>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.</b>	
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 13 (4)  <b>Stated:</b> First time	The registered person shall ensure that all incoming medicines are accurately receipted.	<b>Carried forward to the next inspection</b>
	<b>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.</b>	

<b>Area for improvement 3</b>  <b>Ref:</b> Regulation 13 (4)  <b>Stated:</b> First time	The registered person shall ensure that medicine trolleys are locked at all times when unattended.	Carried forward to the next inspection
	<b>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.</b>	
<b>Action required to ensure compliance with the Residential Care Homes Minimum Standards, December 2022</b>		<b>Validation of compliance</b>
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 31  <b>Stated:</b> Third time	The registered person shall ensure that medication administration records are fully and accurately maintained. Specifically: <ul style="list-style-type: none"> <li>• Handwritten additions are verified by two members of staff</li> <li>• Entries match personal medication records and reflect the prescriber's most recent instructions.</li> </ul>	Carried forward to the next inspection
	<b>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.</b>	
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 9.3  <b>Stated:</b> First time	The registered person shall ensure that any referrals for a resident's health and wellbeing are sought from primary health care services, and documented in the resident's records.	Carried forward to the next inspection
	<b>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.</b>	

<b>Area for improvement 3</b>  <b>Ref:</b> Standard 16.4  <b>Stated:</b> First time	The registered person should ensure all suspected alleged or actual incidents requiring safeguarding referral, are reported to the relevant persons and agencies in a timely manner.	<b>Carried forward to the next inspection</b>
	<b>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.</b>	
<b>Area for improvement 4</b>  <b>Ref:</b> Standard 6  <b>Stated:</b> First time	The registered person shall ensure that each resident has an individual and up to date care plan. Specifically, care plans for one to one supervision should contain sufficient detail on the specific supervision arrangements to guide staff.	<b>Carried forward to the next inspection</b>
	<b>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.</b>	
<b>Area for improvement 5</b>  <b>Ref:</b> Standard 27.1  <b>Stated:</b> First time	The registered person shall ensure that the malodour in the identified bedrooms are addressed.	<b>Carried forward to the next inspection</b>
	<b>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.</b>	
<b>Area for improvement 6</b>  <b>Ref:</b> Standard 6.2  <b>Stated:</b> First time	The registered person shall ensure that resident call bells are provided in every room used by residents when safe to do so. For residents who cannot safely use a call bell, their care plans should detail the alternative measures in place to ensure their safety and comfort.	<b>Carried forward to the next inspection</b>
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<b>Area for improvement 7</b>  <b>Ref:</b> Standard  <b>Stated:</b> First time	The registered person shall ensure that the reason for and the outcome of each administration are recorded on every occasion, for medicines prescribed for the management of distressed reactions on a 'when required' basis.	<b>Carried forward to the next inspection</b>
	<b>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.</b>	
<b>Area for improvement 8</b>  <b>Ref:</b> Standard 31  <b>Stated:</b> First time	The registered person shall review the management of controlled drugs to ensure appropriate storage and the accurate maintenance of records of Schedule 2 controlled drugs in the controlled drug register.	<b>Carried forward to the next inspection</b>
	<b>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.</b>	
<b>Area for improvement 9</b>  <b>Ref:</b> Standard 30  <b>Stated:</b> First time	The registered person shall implement a robust audit system which covers all aspects of the management of medicines. Any shortfalls identified should be detailed in an action plan and addressed.	<b>Carried forward to the next inspection</b>
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#### 4.2 Estates Inspector findings

**Is the newly adapted sections of the home are compliant with the Department of Health's (DoH) Residential Care Home Minimum Standards and with other relevant legislative requirements and Approved Codes of Practice (ACOPs)?**

The building conversion work was completed within the existing residential care home, the two new bedrooms both have wc/shower ensuites, and are compliant with current standards. The

bedrooms floor areas exceeds the current 12 sq m minimum standard requirement and the interior building fabric was completed to a good standard.

The required pre-registration documents were assessed, approved and recorded prior to the inspection. Documents submission included statutory approvals, proposed floor plans, fire risk assessment and water safety/legionella risk assessment.

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 inspector's perspective this variation application complied with the estates registration requirements listed in the current residential care home minimum standards, therefore this application may be processed to completion.

No areas for improvement were identified.

### 4.3 Care Inspector findings.

The two single bedrooms were attractively decorated and suitably furnished. Soft furnishings were of good quality, colour schemes were appealing and the rooms had storage facilities. These two bedrooms include en-suite facilities, providing an accessible toilet and wash hand basin. The call bell system within the two bedrooms was in order.

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.

### 5.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no new areas for improvement being identified.

Areas for improvement have been identified where action is required to ensure compliance with **The Residential Care Homes Regulations (Northern Ireland) 2005 and the Residential Care Homes' Minimum Standards (December 2022) (Version 1:2)**.

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	3*	9*

\* the total number of areas for improvement includes three under Regulation and nine under the Standards which are carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with the management team, 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 Home Regulations (Northern Ireland) 2005

<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 14 (2)(a)(c)  <b>Stated:</b> First time  <b>To be completed by:</b> From the date of inspection (20 September 2023)	<p>The registered person shall ensure that all parts of the home that the residents have access to are free from hazards to their safety. This is stated in relation to ensuring the domestic store and sluice room are kept locked, and the inappropriate storage of topical medication.</p> <p>Ref 4.1</p> <p><b>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.</b></p>
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 13 (4)  <b>Stated:</b> First time  <b>To be completed by:</b> Immediate and ongoing (7 May 2024)	<p>The registered person shall ensure that all incoming medicines are accurately receipted.</p> <p>Ref: 4.1</p> <p><b>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.</b></p>
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### Action required to ensure compliance with the Residential Care Homes Minimum Standards, December 2022

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