



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	18044
<b>Establishment ID No:</b>	1049
<b>Name of Establishment:</b>	Abingdon Manor Care Centre, Belfast (Antrim & Down Suites)
<b>Date of Inspection:</b>	22 May 2014
<b>Inspector's Name:</b>	Kieran Monaghan

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Abingdon Manor Care Centre (Antrim & Down Suites)
<b>Address:</b>	949 Crumlin Road Belfast BT14 8FG
<b>Telephone Number:</b>	028 90 71 78 78
<b>Registered Responsible Person:</b>	Mr Desmond Wilson, Abingdon Manor Care Centre Ltd
<b>Registered Manager:</b>	Ms. Clare Moore, Registered Manager
<b>Person in Charge of the Home at the time of Inspection:</b>	Ms. Clare Moore, Registered Manager
<b>Other person(s) present during inspection:</b>	N/A
<b>Type of establishment:</b>	Nursing Home (NH)
<b>Categories of Care:</b>	I ,PH ,PH(E) ,TI
<b>Conditions of Registration:</b>	N/A
<b>Number of Registered Places:</b>	20
<b>Date of previous Estates inspection:</b>	7 June 2011
<b>Date and time of inspection:</b>	22 May 2014 (10:25am. – 12:50pm.)
<b>Name of Inspector:</b>	K. Monaghan

## **2.0 INTRODUCTION**

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect nursing homes.

This is a report of an announced inspection to assess the quality of the premises and grounds in which the service is being provided including the upkeep of the building and engineering services and equipment. The report details the extent to which the standards measured during inspection were met.

## **3.0 PURPOSE OF THE INSPECTION**

The purpose of this inspection was to consider whether the premises and grounds were safe, well maintained and remain suitable for their stated purpose in compliance with legislative requirements and current minimum standards. This was achieved through a process of evaluation of available evidence.

The Regulation and Quality Improvement Authority aims to use inspection to support providers in improving the quality of services, rather than only seeking compliance with regulations and standards.

The aims of the inspection were to examine the estates related policies, practices and monitoring arrangements for the provision of nursing homes, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003,
- The Nursing Homes Regulations (Northern Ireland) 2005 and
- Nursing Homes Minimum Standards (DHSSPS, 2008)

Other published standards which guide best practice may also be referenced during the Inspection process.

#### **4.0 METHODS/PROCESS**

Specific methods/processes used in this inspection include the following:

1. Discussions with Ms. Clare Moore, Registered Manager
2. Inspection of the home internally and externally. Patients' private bedrooms were only inspected when unoccupied and permission was granted
3. Evaluation and feedback

Any other information received by RQIA about this regulated establishment has also been considered by the Inspector in preparing for this inspection.

#### **5.0 CONSULTATION PROCESS**

During the course of the inspection the Inspector spoke to Ms. Clare Moore, Registered Manager.

#### **6.0 INSPECTION FOCUS**

This inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Nursing Homes Minimum Standards with the focus on assessing progress with the issues raised during and since the previous inspection.

##### **Standards inspected:**

- Standard 32 - Premises and grounds,
- Standard 35 - Safe and healthy working practices and
- Standard 36 - Fire Safety

## 7.0 PROFILE OF SERVICE

Abingdon Manor Care Centre is situated on an elevated site at the top of the Crumlin Road enjoying a panoramic view of Belfast. It is a purpose built split level development of 60 beds, divided equally into six self-contained suites operating within the larger home. Each unit has ten ensuite bedrooms with kitchen, utility, day room and dining room. This design creates a friendly, family like setting for residents.

The upper ground floor level houses the 'Armagh' suite which is registered for ten elderly patients with dementia related illnesses and the 'Antrim' and 'Down' suites which are registered in total for twenty frail elderly residents. The lower ground floor consists of two suites, the 'Tyrone' and 'Fermanagh' suites registered for twenty residents with learning disabilities and the 'Londonderry' suite registered for ten residents with physical disablement. Other facilities within the home include an internal garden, activity room, library, visitors' room and two hairdressing salons.

This is the report of the twenty bedded frail elderly unit (Antrim & Down Suites).

This suite within the home is registered to provide care for patients in the following category:

I  
PH  
PH (E)  
TI

## 8.0 SUMMARY

During this Estates inspection a number of issues were identified for attention. Following this Estates Inspection of Abingdon Manor Care Centre (Antrim & Down Suites), Belfast on 22 May 2014, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

- Standard 32 - Premises and grounds
- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in nine requirements and one recommendation. These are outlined in the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Ms. Clare Moore, Registered Manager, throughout the inspection process.

## 9.0 INSPECTION FINDINGS

9.1	<b>Recommendations and requirements from previous Estates inspection on 07 June 2011</b>
9.1.1	The following should be noted with regard to the issues included in the Quality Improvement Plan for the previous Estates inspection that was carried out on 07 June 2011:
9.1.2	The weed growth had been removed from the paths and patio areas. These areas however required to be washed again. Reference should be made to item 1 in the Quality Improvement Plan.
9.1.3	The issues identified for attention in the report for the most recent inspection and test to the fixed wiring installation had been addressed with the exception of the issues in relation to the provision of residual current devices. A further inspection and test of the fixed wiring installation had been arranged for 03 June 2014. The issue in relation to the provision of residual current devices should be discussed with the inspecting engineer. Reference should be made to item 3 in the Quality Improvement Plan.
9.1.4	Action in relation to the thermostatic mixers was ongoing. Thirteen thermostatic mixers required to be replaced. Completion of this work should be confirmed to RQIA. Reference should be made to item 3 in the Quality Improvement Plan.
9.1.5	The documentation to support the ongoing maintenance for ventilation installations in the premises was not presented for review during this Estates inspection. A copy of the report for the most recent service of the ventilation systems should be forwarded to RQIA. Reference should be made to item 3 in the Quality Improvement Plan.
9.1.6	The log for recording the weekly visits to the Northern Ireland Adverse Incidents website to check the Safety Alert Broadcasts in relation to medical devices was not presented for review as Ms. Moore confirmed that this was held centrally at head office for all of the homes.
9.1.7	The method of controlling the window openings was discussed during this Estates inspection. Ms. Moore confirmed that this was satisfactory.

## 9.0 INSPECTION FINDINGS CONTINUED

9.1	<b>Recommendations and requirements from previous Estates inspection on 07 June 2011</b>
9.1.8	The temperature gauge on the heating boiler was not reviewed during this Estates inspection. Confirmation in relation to this issue should be provided to RQIA. Reference should be made to item 3 in the Quality Improvement Plan.
9.1.9	The temperature of the cold water at the sentinel outlets should be checked and recorded each month to ensure that it does not exceed 20°C. The frequency for flushing any water outlets that are not in use should also be increased to twice weekly. Reference should be made to item 4 in the Quality Improvement Plan.
9.1.10	The records presented for review in relation to the fire detection and alarm system indicated that the most recent inspection and test was completed on 01 April 2014. Subsequent to this Estates inspection a copy of the certificate for this inspection and test was received by RQIA. The frequency for the inspections and test to the fire detection and alarm system should however be confirmed. Reference should be made to item 7 in the Quality Improvement Plan.
9.1.11	The doors to stores/cupboards should be kept locked shut. Reference should be made to item 7 in the Quality Improvement Plan.
9.1.12	The above issues are restated where appropriate in the relevant sections of the attached Quality Improvement Plan.
9.2	<b>Standard 32 – Premises and grounds</b>  <b><i>The premises and grounds are safe, well maintained and remain suitable for their stated purpose</i></b>
9.2.1	Remedial works should be carried out to the paths to make good the uneven areas at the trees. The planned redecoration works should also be completed. Reference should be made to item 2 in the Quality Improvement Plan.

## 9.0 INSPECTION FINDINGS CONTINUED

9.3	<p><b>Standard 35 - Safe and healthy working practices</b></p> <p><i>The home is maintained in a safe manner</i></p>
9.3.1	<p>The passenger lift was serviced on 29 April 2014 and the most recent thorough examination was completed on 23 April 2014. The report for the thorough examination identified a number of issues for attention. Some of these issues had been addressed. The remainder of these issues should be addressed. Reference should be made to item 5 in the Quality Improvement Plan.</p>
9.3.2	<p>The gas safety checks to the heating boilers and the kitchen equipment were completed on 09 May 2014. The report for the gas safety check to the kitchen equipment indicated that a risk assessment in relation to the need for a link up to the ventilation system should be completed. Confirmation of completed in relation to this risk assessment should be confirmed to RQIA. Subsequent to this Estates inspection RQIA received a copy of the certificate for the most recent gas safety check to the laundry equipment. This report identified the need to replace a filter. Reference should be made to item 6 in the Quality Improvement Plan.</p>
9.3.3	<p>The risk assessment for the prevention or control of legionella bacteria in the water systems was not presented for review during this Estates inspection. Subsequent to this Estates inspection a copy of the report for this risk assessment was received by RQIA.</p>
9.4	<p><b>Standard 36 – Fire Safety</b></p> <p><i>Fire safety precautions are in place that reduce the risk of fire and protect patients, staff and visitors in the event of fire.</i></p>
9.4.1	<p>The fire risk assessment for the home was completed on 11 November 2013. Ms. Moore confirmed that most of the issues identified for attention in the report for this fire risk assessment had been addressed. The main issue that had still to be addressed related to making bedroom doors self-closing. Assessments had been carried out in relation to this issue. The proposals for addressing this issue and any other remaining issues from the fire risk assessment report should be confirmed to RQIA. Reference should be made to item 8 in the Quality Improvement Plan.</p>



## 9.0 INSPECTION FINDINGS CONTINUED

9.4	<b>Standard 36 – Fire Safety Continued</b>
9.4.2	The records for the monthly function checks to the emergency lights were presented for review during this Estates inspection. The emergency lights were also inspected and tested on 21 May 2014. The remedial works identified during this inspection and test should be completed. Reference should be made to item 8 in the Quality Improvement Plan.
9.4.3	Ms. Moore confirmed that fire training and a fire drill were carried out in November 2013 and the next sessions will be arranged for June 2014. The procedure for calling the Northern Ireland Fire and Rescue Service should be reviewed and revised if required to ensure that they are called as soon as the fire alarm activates. Reference should be made to item 9 in the Quality Improvement Plan.
9.4.4	The doors to bedrooms 18 in the Antrim Suite and bedroom 24 in the Down Suite should be adjusted to smoke seal effectively. The kitchen extract system should be inspected on a regular basis. Reference should be made to item 9 in the Quality Improvement Plan.
9.4.5	<p>It is recommended that the annual reviews of the fire risk assessment should be carried out by a person or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies.</p> <p>Reference should be made to correspondence issued by RQIA to all Registered Persons on 13 January 2013 and the following guidance contained therein:</p> <p><a href="http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20caarrying%20out%20Fire%20Risk%20Assessment.pdf">http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20caarrying%20out%20Fire%20Risk%20Assessment.pdf</a></p> <p><a href="http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf">http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf</a></p> <p>Reference should be made to item 10 in the Quality Improvement Plan.</p>

## **10.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement plan appended to this report were discussed with Ms. Clare Moore, Registered Manager, as part of the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Nursing Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the nursing home to improve the quality of life experienced by patients.

The registered provider is required to record comments on the quality improvement plan.

## **11.0 ENQUIRIES**

Enquiries relating to this report should be addressed to:

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



The **Regulation** and  
**Quality Improvement**  
**Authority**

## QUALITY IMPROVEMENT PLAN

- for -

### ANNOUNCED ESTATES INSPECTION

- to -

**ABINGDON MANOR CARE CENTRE, BELFAST (ANTRIM & DOWN UNITS) RQIA ID 1049**

- on -

**22 May 2014**

QIP Position Based on Comments from Registered Persons			QIP Closed		Estates Officer	Date
			Yes	No		
A.	All items confirmed as addressed.					
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.					
C.	Clarification or follow up required on some items.					

**NOTES:**

The details of the quality improvement plan were discussed with Ms. Clare Moore, Registered Manager who deals with the ongoing maintenance issues in the home, as part of the inspection process.

The timescales commence from the date of inspection. Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Nursing Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the nursing home to improve the quality of life experienced by patients.

The registered provider is required to record comments on the quality improvement plan. The quality improvement plan is to be signed below by the registered provider and registered manager and returned to [estates@rqia.org.uk](mailto:estates@rqia.org.uk).

**Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:**

<b>NAME OF REGISTERED MANAGER COMPLETING QIP</b>	
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	

The following requirements should be noted for action in relation to Standard 32 – Premises and grounds:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1.	Regulations 27(2)(b)	The paths and patio areas be washed again. Reference should be made to paragraph 9.1.2 in the Report.	1 Month	
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2.	Regulations 14(2)(a) 14(2)(c) 27(2)(d)	Remedial works should be carried out to the paths to make good the uneven areas at the trees. The planned redecoration works should also be completed. Reference should be made to paragraph 9.2.1 in the Report.	1 Month & Ongoing	

Announced Estates Inspection to Abingdon Manor Care Centre, Belfast (Antrim & Down Units) RQIA ID 1049 on 22 May 2014 - (K. Monaghan)

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**The following requirements should be noted for action in relation to Standard 35 - Safe and healthy working practices:**

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3.	Regulations 14(2)(a) 14(2)(c) 27(2)(q)	The issue in relation to the provision of residual current devices should be discussed with the inspecting engineer during the inspection and test to the fixed wiring installation that is planned for 03 June 2014 Completion of the remedial work to the thermostatic mixers should be confirmed to RQIA. A copy of the report for the most recent service of the ventilation systems should be forwarded to RQIA. Confirmation in relation to the temperature gauge for the heating boiler should be provided to RQIA. Reference should be made to paragraphs 9.1.3, 9.1.4, 9.1.5 and 9.1.8 in the Report.	1 Month	
4.	Regulations 14(2)(a) 14(2)(c) 27(2)(q)	The temperatures for the cold water at the sentinel outlets should be checked and recorded each month to ensure that it does not exceed 20°C. The frequency for flushing any water outlets that are not in use should also be increased to twice weekly. Reference should be made to paragraph 9.1.9 in the Report.	Ongoing	

Announced Estates Inspection to Abingdon Manor Care Centre, Belfast (Antrim & Down Units) RQIA ID 1049 on 22 May 2014 - (K. Monaghan)

**The following requirements should be noted for action in relation to Standard 35 - Safe and healthy working practices:**

<b>Item</b>	<b>Regulation Reference</b>	<b>Requirements</b>	<b>Timescale</b>	<b>Details Of Action Taken By Registered Person (S)</b>
5.	Regulations 14(2)(a) 14(2)(c) 27(2)(q)	The remainder of these issues identified for attention in the report for the thorough examination of the passenger lift that was carried out on 23 April 2014 should be addressed. Reference should be made to paragraph 9.3.1 in the Report.	1 Month	
6.	Regulations 14(2)(a) 14(2)(c) 27(2)(q)	Confirmation of completion in relation to the risk assessment for the gas equipment in the kitchen should be confirmed to RQIA. The filter replacement for the laundry equipment should also be confirmed to RQIA. Reference should be made to paragraph 9.3.2 in the Report.	1 Month	

Announced Estates Inspection to Abingdon Manor Care Centre, Belfast (Antrim & Down Units) RQIA ID 1049 on 22 May 2014 - (K. Monaghan)

**Assurance, Challenge, Improvement in Health and Social Care**

**The following requirements should be noted for action in relation to Standard 36 - Fire Safety:**

<b>Item</b>	<b>Regulation Reference</b>	<b>Restated Requirements</b>	<b>Timescale</b>	<b>Details Of Action Taken By Registered Person (S)</b>
7.	Regulations 27(4)(b)	The frequency for the inspections and test to the fire detection and alarm system should be confirmed to RQIA. The doors to the stores/cupboards should be kept locked shut. Reference should be made to paragraphs 9.1.10 and 9.1.11 in the Report.	1 Month & Ongoing	
<b>Item</b>	<b>Regulation Reference</b>	<b>Requirements</b>	<b>Timescale</b>	<b>Details Of Action Taken By Registered Person (S)</b>
8.	Regulations 27(4)(b)	The proposals for addressing the remaining issues from the fire risk assessment report should be confirmed to RQIA. The remedial works identified during the inspection and test to the emergency lights that was carried out on 21 May 2014 should be completed. Reference should be made to paragraphs 9.4.1 and 9.4.2 in the Report.	1 Month	

Announced Estates Inspection to Abingdon Manor Care Centre, Belfast (Antrim & Down Units) RQIA ID 1049 on 22 May 2014 - (K. Monaghan)



**The following requirements should be noted for action in relation to Standard 36 - Fire Safety:**

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
9.	Regulations 27(4)(b)	The procedure for calling the Northern Ireland Fire and Rescue Service should be reviewed and revised if required to ensure that they are called as soon as the fire alarm activates. The doors to bedrooms 18 in the Antrim Suite and bedroom 24 in the Down Suite should be adjusted to smoke seal effectively. The kitchen extract system should be inspected on a regular basis. Reference should be made to paragraphs 9.4.3 and 9.4.4 in the Report.	1 Month & Ongoing	

**The following requirements should be noted for action in relation to Standard 36 - Fire Safety:**

Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
10.	Standard 36.1	<p>It is recommended that the annual reviews of the fire risk assessment should be carried out by a person or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies. Reference should be made to correspondence issued by RQIA to all Registered Persons on 13 January 2013 and the following guidance contained therein:</p> <p><a href="http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf">http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf</a></p> <p><a href="http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf">http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf</a></p> <p>Reference should be made to paragraph 9.4.5 in the Report.</p>	Ongoing	

Announced Estates Inspection to Abingdon Manor Care Centre, Belfast (Antrim & Down Units) RQIA ID 1049 on 22 May 2014 - (K. Monaghan)

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