



The Regulation and  
Quality Improvement  
Authority

The Graan Abbey  
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**Announced Enforcement Compliance Inspection  
of  
The Graan Abbey**

**18 August 2015**

The Regulation and Quality Improvement Authority  
Hilltop, Tyrone & Fermanagh Hospital, Omagh, BT79 0NS  
Tel: 028 8224 5828 Fax: 028 8225 2544 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## 1. Summary of Inspection

An announced enforcement compliance inspection took place on 18 August 2015 from 10:00 to 15:30 hours.

The purpose of the inspection was to assess the level of compliance achieved by the home regarding one Failure to Comply Notice issued on 16 June 2015. The areas for improvement and compliance with regulation were in relation to the management of restraint (FTC/NH/1215/2015-16/01).

The date for compliance with the notice was 18 August 2015.

**FTC Ref: FTC/NH/1215/2015-16/01**

Evidence was available to validate full compliance with the above Failure to Comply Notice.

### 1.1 Actions/Enforcement Taken Following the Last Care Inspection

Following an unannounced care inspection on 04 June 2015, one Failure to Comply Notice was issued with regards to the management of restraint.

#### Actions/Enforcement\* Resulting From This Inspection

As indicated above, evidence was available to validate full compliance with the above failure to comply notice.

\*All enforcement notices for registered agencies/services are published on RQIA's website at:

[http://www.rqia.org.uk/inspections/enforcement\\_activity.cfm](http://www.rqia.org.uk/inspections/enforcement_activity.cfm)

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Carewell Homes Ltd Mrs Carol Kelly	<b>Registered Manager:</b> See below
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Martina McGuinness	<b>Date Registered:</b> Registration pending
<b>Categories of Care:</b> NH-I, NH-PH, NH-DE, NH-MP, NH-MP(E), NH-LD, RC-I, RC-PH, RC-MP, RC-MP(E)	<b>Number of Registered Places:</b> 86
<b>Number of Patients Accommodated on Day of Inspection:</b> 69	<b>Weekly Tariff at Time of Inspection:</b> Nursing - £581.00 Residential - £461.00

### 3. Inspection Focus

The inspection sought to assess the level of compliance with the nine required actions indicated within the one Failure to Comply Notice issued on 16 June 2015.

### 4. Methods/Process

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

- discussion with the manager, the responsible person and the owner
- discussion with patients and staff
- review of a sample of four care records
- review of three weeks duty rotas
- observation of care practices
- review of audits pertaining to restraint
- evaluation and feedback.

### 5. The Inspection

#### 5.1 FTC Ref: FTC/NH/1215/2015-16/01

#### **Notice of Failure to Comply with Regulation 14 (5) of the Nursing Homes Regulations (Northern Ireland) 2005**

**The registered person shall ensure that no patient is subject to restraint unless restraint of the kind employed is the only practicable means of securing the welfare of that or any other patient and there are exceptional circumstances.**

Discussion with the responsible person and review of training records evidenced that 34 staff had attended training in the management of restraint on 24 June 2015, with further training planned for September 2015. Additional training had been provided on dementia awareness, safeguarding vulnerable adults, physical interventions and the management of challenging behaviour. Staff had also completed e-learning training in the management of restraint.

Policies and procedures on the use of restraint and safeguarding vulnerable adults had been reviewed and updated and reflected best practice guidance.

Review of a sample of four care records evidenced that care plans had been developed following assessment which reflected the care needs of the patients in regards to restrictive practice. Care plans were reviewed in a meaningful manner and on at least a monthly basis.

There was evidence that patients and/or their representatives have been consulted in relation to the use of restrictive practice. Care plans reflected the recommendations made by the multidisciplinary team.

A register of the types of restraint being used to ensure the safety of patients was in place. There was evidence of weekly audits of all restraint. A record of these audits was reviewed and confirmed that any deficits identified had been fully actioned. The manager confirmed that the use of restrictive practice had been reduced as a result of these audits.

A sample of Regulation 29 reports was reviewed and found to be robust and consistent with information recorded in care records and findings at time of inspection.

The responsible person confirmed that staffing levels and the deployment of staff had been reviewed. Staffing levels in Cloisters unit had been increased by one care assistant during the day. Two senior care assistants were recruited and would be supernumerary within Primrose and Cloisters units to provide support and supervision for staff. Two clinical lead nurses had also been employed for Cloisters and Innisview units and would be commencing employment in the near future. A sample of duty rotas for weeks commencing 10, 17 and 24 August 2015 were reviewed and confirmed that additional staff were on duty as advised by the responsible person.

Review of nurse in charge competency assessments evidenced that competency assessments (including the management of restraint) had been completed for all nurses in July 2015.

Evidence was provided to validate full compliance with the requirements of the failure to comply notice.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home/agency/service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

<b>I agree with the content of the report.</b>			
<b>Registered Manager</b>	Martina McGuinness	<b>Date Completed</b>	08/10/15
<b>Registered Person</b>	Carol Kelly	<b>Date Approved</b>	08/10/15
<b>RQIA Inspector Assessing Response</b>	<b>Bridget Dougan</b>	<b>Date Approved</b>	<b>08/10/15</b>

Please provide any additional comments or observations you may wish to make below:

*\*Please complete in full and returned to RQIA from the authorised email address\**