

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

FAILURE TO COMPLY NOTICE

Name of Registered Establishment: Glenabbey Manor (RQIA ID: 020215)	Name of Registered Person: Gavin O'Hare-Connolly
Address of Registered Establishment: 93-97 Church Road, Glengormley, Newtownabbey, BT36 6HG	
Issue Date: 27 February 2018	FTC Ref: FTC/RCH/020215/2017-18/01
Regulation not complied with: <i>The Residential Care Homes Regulations (Northern Ireland) 2005</i> <i>Notification of death, illness and other events</i> <i>Regulation 30.–</i> <i>(1) The registered person shall give notice to the Regulation and Improvement Authority without delay of the occurrence of –</i> <i>(c) any serious injury to a resident in the home;</i> <i>(d) any event in the home which adversely affects the care, health, welfare or safety of any resident;</i> <i>(f) any accident in the home;</i>	
Specific failings to comply with regulations: During the inspection of 13 and 14 February 2018 it was identified that two residents sustained falls in the home, which necessitated medical intervention. RQIA had not been notified by the home of either incident, which is a breach of Regulation 30. The electronic daily alert did not contain any indication that RQIA had been notified. It was agreed that the alert message to the manager required urgent amendment by the provider to indicate that RQIA must be notified on any occasion when medical attention or advice is required for residents. This is the second time that this issue has been brought to the attention of the provider in respect of this home.	
Action required to comply with regulations: Immediate action must be taken to ensure that RQIA is notified of any events in accordance with Regulation 30; the amended electronic daily alert sent to the manager must be amended to identify occasions on which RQIA must be notified of accidents and incidents; this must be cross referenced against other systems used in the home to provide robust governance.	

The Registered Person may make written representations to the Chief Executive of RQIA regarding the issue of a failure to comply notice, within one month of the date of serving this notice.

Date by which compliance must be achieved: 27 March 2018

Signed.....

Director of Mental Health, Learning Disability and Social Work

This notice is served under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Care Homes Regulations (Northern Ireland) 2005

It should be noted that failure to comply with some regulations is considered to be an offence and RQIA has the power under regulations to prosecute for specified offences.

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Regulation not complied with: <i>The Residential Care Homes Regulations (Northern Ireland) 2005</i> <i>Staffing</i> <i>Regulation 20.–</i> <i>The registered manager shall carry out a competency and a capability assessment with any person who is given the responsibility of being in charge of the home for any period of time in his absence.</i>	
Specific failings to comply with regulations: The competency and capability records could not be produced for the Deputy Manager and for six other Care Team Managers (CTM) who may be given the responsibility of being in charge of the home in the absence of the manager. The manager stated that the records could not be produced as they were in the possession of staff who were not on site at that time. This is not in keeping with expected practice. A review of the staff duty rota identified that one CTM was designated to be in charge of the home on two known occasions (Sunday 4 February 2018 and Saturday 10 February 2018) prior to an assessment of competency and capability having been completed. In discussion with the inspectors the same CTM reported that she had been employed in the home for some four weeks but had not completed a competency and capability assessment. In discussion with the CTM on 13 February 2018, it had also been established that she had not yet completed training in the use of the electronic system of recording. She relied on colleagues to assist her to access the IT system to complete her recording. In addition, one staff member did not have an individual Personal Identification Number (PIN) to enable them to access the electronic system.	

The inability of at least one member of staff to access the IT system in order to make contemporaneous records of the care delivered to residents raises further concerns about governance issues in the home.

The registered provider's persistent failure to ensure that all staff who are left in charge of the home are competent and capable has the potential to place residents at risk of harm. This is the second time that this issue has been brought to the attention of the provider in respect of this home.

Action required to comply with regulations:

Immediate action must be taken to ensure robust governance in relation to the following areas:

- all care staff who may be given the responsibility of being in charge of the home in the absence of the manager must have an assessment of competency and capability completed before they are left in charge of the home
- the competency and capability records must be held in the home and available for inspection at all times
- all care staff are supplied with appropriate access to the home's electronic recording system to allow them to make contemporaneous records of the care delivered to residents.

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Regulation not complied with: <i>The Residential Care Homes Regulations (Northern Ireland) 2005</i> <i>Visits by registered provider</i> <i>Regulation 29.-</i> <i>(4) The person carrying out the visit shall –</i> <i>(a) interview, with their consent and in private, such of the residents and their representatives and persons working at the home as appears necessary in order to form an opinion of the standard of provided in the home;</i> <i>(b) inspect the premises of the home, its record of events and records of any complaints; and</i> <i>(c) prepare a written report on the conduct of the home.</i>	
Specific failings to comply with regulations: Five reports of provider visits to the home were requested and were reviewed as part of the inspection. The reports were prefaced with a legislative background referring to The Nursing Homes Regulations (Northern Ireland) 2005 and the DHSSPS Care Standards for Nursing Homes (2015). The home is registered as a residential care home. It was reported to the inspector that the report template had been recently revised; this error, however, was still not identified or corrected by the registered provider at the time of the inspection. A review of the reports identified that there was insufficient detail on monthly monitoring reports to provide assurances of sufficient managerial oversight. There was limited evidence of carry-over action from one month to another. For example, e-learning records were not available at the December 2017 monitoring visit and there	

was no clear indication of how this would be followed up or addressed within the January 2018 report. In the January 2018 report there was no commentary on the outcome of an audit of accidents and/or incidents, including the identification of any themes or patterns and any action taken or required. This represents a missed opportunity for the provider to analyse relevant data and for this to be used to review and improve care practices in the home.

The November and December 2017 reports indicated a draft version on the front cover which was completed by a compliance team, yet the report was signed off by the person who undertook the monitoring report. It was therefore unclear whether the reports presented were the final version.

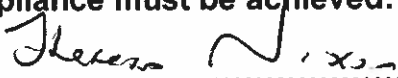
Action required to comply with regulations:

Immediate action must be taken to ensure that:

- the report template of the monthly monitoring visit by the registered provider is amended to state accurately whether the report is a final version
- the reports are prefaced with a legislative background referring to the appropriate Regulations and Standards applicable to residential care homes
- the reports should include sufficient detail to provide assurances of adequate managerial oversight across all areas of governance; this will allow the provider to critically analyse relevant data to review and improve care practices in the home

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