



The Regulation and  
Quality Improvement  
Authority

Glenview  
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**Announced Enforcement Compliance Inspection  
of  
Glenview**

**19 June 2015**

**The Regulation and Quality Improvement Authority**  
**9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT**  
**Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)**

## 1. Summary of inspection

An announced enforcement compliance inspection took place on 19 June 2015 from 10.00 to 13.00 hours.

The purpose of the inspection was to assess the level of compliance achieved by the home regarding the two failure to comply notices issued on 18 March 2015. The areas for improvement and compliance with regulation were in relation to infection prevention and control (FTC/NH/1470/2014-15/01(E) and facilities and services provided for patients (FTC/NH/1470/2014-15/02(E). The date for compliance with the notices was 19 June 2015.

**FTC Ref: FTC/NH/1470/2014-15/01(E) and FTC Ref: FTC/NH/1470/2014-15/02(E)**

Evidence was available to confirm full compliance with the above failure to comply notices.

### 1.1 Enforcement Taken Following the Last Care Inspection

An unannounced care inspection was undertaken on 25 February 2015. This identified ongoing issues with regards to infection prevention and control and the facilities and services provided to patients, including flooring, furniture, seating, equipment, beds and bedding.

Issues with regards to infection control and the facilities and services offered to patients had been raised at a previous inspection on 30 September 2014. The registered persons were invited to a meeting at RQIA to discuss these concerns and at this meeting it was agreed to carry out a follow up inspection in eight weeks to assess compliance.

The follow up inspection was carried out on 9 December 2014 and the issues identified had still not been resolved. The registered providers attended a meeting at RQIA at which it was intended to serve failure to comply notices in relation to these concerns. At this meeting an action plan was presented and assurances given that these issues would be effectively addressed. The notices were not served on this occasion and it was agreed that the registered persons would be given a further period to make the required improvements.

A further inspection was carried out on 25 February 2015 at which it was evidenced that compliance had still not been achieved.

The registered persons attended a further intention meeting at RQIA on 13 March 2015 and were issued with two failure to comply notices on 18 March 2015.

An enforcement compliance inspection was carried out on 20 May 2015. Evidence was not available during the inspection to validate full compliance with the above failure to comply notices. However, there was evidence of some improvement and progress made to address the required actions within the notices. Following the inspection, RQIA senior management held a meeting on 21 May 2015 and a decision was made to extend the compliance date up to the legislative timeframe of 90 days. The date for compliance with the notices was 19 June 2015.

FTC Ref: FTC/NH/1470/2014-15/01(E) and FTC Ref: FTC/NH/1470/2014-15/02(E)

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

No further enforcement action was taken as a result of this inspection.

\*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> Mr Brendan Breen and Mrs Bernadette Breen	<b>Registered Manager:</b> See below
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Elsabe Mitchell	<b>Date Manager Registered:</b> Mrs Elsabe Mitchell – temporary, acting manager
<b>Categories of Care:</b> NH-DE, NH-I, NH-PH, NH-PH(E)	<b>Number of Registered Places:</b> 40
<b>Number of Patients/Residents Accommodated on Day of Inspection:</b> 29	<b>Weekly Tariff at Time of Inspection:</b> E581 + E10.00 third party top up

## 3. Inspection Focus

The inspection sought to assess the level of compliance with the required actions indicated within the two failure to comply notices issued on 18 March 2015 and extended following an inspection on 20 May 2015. The date for compliance on the extended notices was 19 June 2015.

## 4. Methods/Process

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

- discussion with the acting manager and director
- discussion with the registered providers
- discussion with patients
- discussion with domestic and care staff
- inspection of the premises
- review of infection control audits
- review of cleaning schedules
- evaluation and feedback.

Prior to inspection the following record was analysed:

- a submitted action plan detailing the proposed refurbishment works to be completed.

## 5. The inspection

### 5.1 FTC Ref: FTC/NH/1470/2014-15/01(E)

#### Notice of Failure to Comply with Regulation 13 (7) of the Nursing Homes Regulations (Northern Ireland) 2005

**13 (7) The registered person shall make suitable arrangements to minimise the risk of infection and toxic conditions and the spread of infection between patients and staff.**

Following the last enforcement compliance care inspection on 20 May 2015, three actions in relation to this notice had been addressed. Staff were found to be adhering to best practice in waste management, all cleaning equipment was correctly colour coded in adherence to the NPSA (2007) recommendations and all staff had received training in infection prevention and control.

Five actions were identified as outstanding and these were examined at this inspection.

Effective systems had been introduced to ensure that the home was kept clean. Daily cleaning schedules had been introduced so that domestic staff were fully aware of their expected duties for each day. The housekeeper conducted an inspection each day to ensure that all areas were satisfactorily cleaned and these were signed once completed. Actions which required to be taken were also recorded on this form and addressed. Daily deep clean schedules had been introduced and domestic staff signed when each area had been completed. Weekly routine cleaning records had been introduced to ensure all areas of the home were kept clean.

Effective systems had been introduced to ensure that all equipment in the home was clean. A schedule had been introduced specifying the equipment requiring cleaning and the days on which this should be carried out. These were dated and signed by the nurse who carried out the cleaning.

A robust system of domestic supervision had been introduced. This included twice daily briefings with the domestic staff held by the domestic supervisor. The domestic supervisor also conducted daily inspections of the planned cleaning for that day. These were signed and any action required were documented and appropriately carried out.

In consultation with the older peoples' nurse specialist from the local Trust, infection control audits had been developed. These included areas such as hand hygiene, waste disposal and sharps' management. There was evidence that audits were being carried out on a monthly basis. In discussion, it was recommended that evidence was documented in the comments section as to how each area had been met and actions which were still required.

In discussion the manager confirmed that each patient who required a toileting sling had been given one for their personal use. An inspection of the premises and discussion with care staff confirmed that each toileting sling had been individually labelled and individual hooks had been provided to store these. Instructions for the laundering of these slings had been provided for staff.

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

## 5.2 FTC Ref: FTC/NH/1470/2014-15/02(E)

### Notice of Failure to Comply with Regulation 18 (2) (c) of the Nursing Homes Regulations (Northern Ireland) 2005

18 (2) The registered person shall having regard to the size of the nursing home and the number and needs of patients –

(c) provide in rooms occupied by patients adequate furniture, bedding and other furnishings, including curtains and floor coverings, and equipment suitable to the needs of patients and screens where necessary.

Following the last enforcement compliance inspection on 20 May 2015, one action in relation to this notice had been addressed. The providers had submitted a detailed plan of works to RQIA for the specified rooms identified for refurbishment. Two actions were identified as outstanding and these were examined at this inspection.




The providers submitted an action plan to RQIA detailing the room numbers planned for refurbishment in each subsequent three month period

The six bedrooms which had been identified by the providers as being refurbished were inspected to ensure they reached the standard expected. The issues in relation to flooring, furniture, seating, beds and bedding, vanity units and equipment, including bedrails, were found to have been satisfactorily addressed.

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. 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.

I agree with the content of the report.

Registered Manager		Date Completed	07-08-15
Registered Person		Date Approved	07/8/15
RQIA Inspector Assessing Response		Date Approved	2/9/15

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

**"Please complete in full and return to [nursing.team@cpia.org.uk](mailto:nursing.team@cpia.org.uk) from the authorised email address"**