



The Regulation and
Quality Improvement
Authority

*emailed to RAIA
28/2/15 fr Cathal's email*

Glenview
RQIA ID: 1470
11 Bleary Road
Portadown
BT63 5NE

Received 27 Aug 15

Inspector: Karen Scarlett
Inspection ID: IN022171

Tel: 028 38350500

Email:

manager@glenviewnursinghome.co.uk

Announced Enforcement Compliance Care Inspection of Glenview

20 May 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

1. Summary of Inspection

An announced enforcement compliance inspection took place on 20 May 2015 from 10:00 to 14:50 hours.

The purpose of this inspection was to assess the level of compliance with the two failure to comply (FTC) 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) and facilities and services provided for patients (FTC/NH/1470/2014-15/02). The date for compliance with the notices was 20 May 2015.

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

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. Compliance with the notices must now be achieved by 19 June 2015.

1.1 Actions/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.

1.2 Actions/Enforcement Resulting from this Inspection

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

With reference to the summary section above, the above notices were extended up to the legislative timeframe of 90 days with a date of compliance to be achieved by 19 June 2015.

*All enforcement notices for registered agencies/services are published on RQIA's website at: www.rqia.org.uk

2. Service Details

Registered Organisation/Registered Person: Mr Brendan Breen and Mrs Bernadette Breen	Registered Manager: See below
Person in Charge of the Home at the Time of Inspection: Mrs Elsabe Mitchell	Date Manager Registered: Mrs Elsabe Mitchell – temporary, acting manager
Categories of Care: NH-DE, NH-I, NH-PH, NH-PH(E)	Number of Registered Places: 40
Number of Patients/Residents Accommodated on Day of Inspection: 31	Weekly Tariff at Time of Inspection: £581 + £10.00 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 (FTC) notices issued on 18 March 2015. The date by which compliance must be achieved was 20 May 2015.

4. Methods/Process

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

- discussion with the acting manager and director
- discussion with patients
- discussion with domestic staff
- inspection of the premises
- review of infection control audits
- review of cleaning schedules
- review of staff training records in relation to infection prevention and control
- evaluation and feedback.

5. The Inspection

5.1 FTC/NH/1470/2014-15/01

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.

Systems had been introduced to ensure that the home was kept clean. This included a daily cleaning schedule detailing the expected cleaning duties for that day. This was displayed in the laundry room. In addition, a list had been produced detailing the specific cleaning duties expected in relation to bathrooms, bedrooms and when completing a deep clean. However, there was no documentation for the domestic to record what cleaning they had done on a daily basis.

The manager was unable to produce a schedule in relation to the cleaning of equipment in the home.

Discussion with the manager and the housekeeper evidenced that some systems for the supervision of staff had been introduced. The manager stated that she conducted a daily walk-around prior to her shift commencing and any areas of concern identified were reported to the housekeeper and domestic staff. No written records were kept in this regard. The housekeeper conducted a daily inspection of the rooms which had been deep cleaned on that day and kept a written record of these visits. Any areas of concern were reported to the domestic staff to address immediately. The manager stated that the registered provider, Mrs Breen, usually conducted a weekly visit to the home to observe the standards of hygiene. No written record was being kept of these visits.

There were no formal meetings being held with the domestic team. However, the housekeeper confirmed in discussion that she briefed the domestic staff before each shift.

The housekeeper had undertaken detailed environmental audits in April 2015 and was in the process of completing this for May 2015. Areas of concern were then shared with the manager as required. This should be extended to include ongoing monitoring of infection prevention and control practices, for example, hand hygiene audits or equipment use and storage. In order to make this process more robust it would be of benefit for the nurse manager to participate in these audits. However, in discussion, the housekeeper and manager did not evidence sufficient knowledge of current best practice in infection prevention and control practices. It would be of benefit to take the advice of specialist infection prevention and control professionals.

At the previous inspection it was noted that yellow, clinical waste bags were littering the outside of the premises. There was no evidence of inappropriate storage or disposal of waste during this inspection and waste bins within the home were being managed appropriately.

It was noted that the cleaning equipment was appropriately colour coded on the domestic trolley. On discussion, the domestic assistant was knowledgeable about the correct use of each colour of mop and the procedures for storage and cleaning of equipment.

Toileting slings were found hanging on hooks around the home and these were still being used communally. These must be appropriately decontaminated between use or provided for single patient use.

A review of training records evidenced that all staff had completed an e-learning module in relation to infection prevention and control. However, practices continued that were not in accordance with recommended best practice. This was discussed with the manager and consideration is to be given to providing higher level training to registered nursing staff and other staff as appropriate.

Overall, improvements in the standards of cleanliness in the home were noted particularly in patients' bedrooms and in the bathrooms. Lime-scale build up was still evident around a number of the taps. The manager and housekeeper agreed to review this and reinforce with staff the importance of implementing the appropriate control measures. In addition, there was leakage noted around a number of the sinks which are required to be resealed. Cleaning was required in an identified upstairs bathroom and the manager addressed this with the domestic assistant. It was also reinforced with the manager to emphasise to staff that equipment in bathrooms, such as shower chairs, is thoroughly cleaned underneath after each use.

Evidence was not available to validate full compliance with the requirements of the failure to comply notice.

RQIA senior management met following the inspection and given that some progress had been made, a decision was taken to extend the notice up to the legislative timeframe of 90 days.

5.2 FTC/NH/1470/2014-15/02

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

The director identified the six bedrooms which had been refurbished. These were inspected to ensure they reached the standard expected. The inspectors were accompanied by the director initially and then by the manager. One bedroom could not be fully inspected as a patient was sleeping in the room and it was darkened. Two rooms were presented to an acceptable standard. Issues were identified in the remaining three bedrooms including a torn commode seat pad, a soiled and stained armchair and a handle missing from a cabinet. It was disappointing that these rooms had not been presented to the standard expected.

A detailed inspection of the internal premises was carried out. It was noted that all divan beds in the property had been replaced with profiling beds and the scratched bed rails replaced. The majority of commodes had replacement seat pads and back rests fitted and the manager confirmed that this work was still ongoing. However, issues remained with the quality and cleanliness of the seating provided in the home. Chipped and damaged furniture was still evident in patients' bedrooms.

One previously identified en suite bathroom was found to be carpeted. This had been highlighted at the previous inspection and at a meeting in RQIA on 13 March 2015. The director had assured RQIA that this bathroom had been put out of use. This en suite bathroom must be kept beyond use or the carpet replaced with a suitable, alternative floor covering.

As part of the notice the responsible persons were to forward a detailed plan of works for the specifically identified bedrooms. This was received in a letter from the registered persons' architect on 8 April 2015. There was evidence of repainting and repair of walls, floors and built in furniture as listed.

The notice also required the registered persons to refurbish a further 20 per cent of patients' bedrooms in each subsequent three month period. An action plan detailing the next set of room numbers planned for refurbishment in each subsequent three month period was requested but has not been received by RQIA. In discussion the director stated that they were waiting to see if the refurbishment of the six bedrooms was to a satisfactory standard before proceeding further. Following the inspection he agreed to forward this action plan.

Evidence was not available to validate full compliance with the requirements of the failure to comply notice. RQIA senior management met following the inspection and given that some progress had been made a decision was taken to extend the notice up to the legislative timeframe of 90 days.

Registered Manager	<i>Naja Bostitt</i>	Date Completed	<i>25.8.15</i>
Registered Person	<i>Brenda Breen</i>	Date Approved	<i>25.8.15</i>
RQIA Inspector Assessing Response	<i>J. Barrett</i>	Date Approved	<i>4/9/15</i>

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

**Please complete in full and returned to RQIA nursing.team@rqia.org.uk **