

Announced Variation to Registration Care Inspection Report 13 September 2017 and 5 October 2017



Wood Green Private Residential Home

Type of Service: Residential

Address: Wood Green, Circular Road, Jordanstown, BT37 0RJ

Tel No: 028 9036 9901

Inspector: Bronagh Duggan

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a residential care home with 22 beds that provides care for people living with dementia. The residential care home operates on the ground floor of a three storey building. The other two floors consisting 58 places in total were registered to provide nursing care. The home was first registered with RQIA in March 2017.

3.0 Service details

| | |
|---|--|
| Registered Provider: Manor Healthcare Ltd Responsible Individual(s): Mr Eoghain King | Registered Manager: Mr Tiago Moreira |
| Person in charge at the time of inspection: Mr Tiago Moreira | Date manager registered: 20 March 2017 |
| Categories of care: Residential Care DE – Dementia | Number of registered places: 22 |

4.0 Inspection summary

An announced variation to registration inspection of Wood Green Private Residential Care Home took place on 13 September 2017 from 10:30 to 12:45 and a subsequent follow up inspection on 5 October 2017 from 16:30 to 17:15.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

The inspection sought to assess an application submitted to RQIA for a variation to the registration of Wood Green for an additional 32 registered residential places in category DE (dementia) situated on the first floor of the building. The proposed new residential places had originally been registered as nursing places in March 2017. The application would increase the number of residential category DE places in the home from 22 to 54. The subsequent variation to the number of nursing beds registered is addressed in a separate report.

The variation to registration of Wood Green Private Residential Care Home was approved from a care perspective following the inspection follow up on 5 October 2017.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and residents experience.

4.1 Inspection outcome

| | Regulations | Standards |
|--|-------------|-----------|
| Total number of areas for improvement | 3 | 0 |

This inspection resulted in no new areas for improvement being identified. Three requirements have been carried over from the previous care inspection. Findings of the inspection were discussed with Tiago Moreira, registered manager, as part of the inspection process and can be found in the main body of the report.

4.2 Action/enforcement taken following the most recent care inspection dated 5 June 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 5 June 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: the variation application and supporting documentation.

During the inspection the inspector met with the registered manager; the responsible individual was also present for periods throughout the first part of the inspection on 13 September 2017.

The findings of the inspection were provided to the registered manager on 5 October 2017.

Areas for improvement identified at the last care inspection were not reviewed as part of this inspection and are carried forward to the next care inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 17 July 2017

The most recent inspection of the home was an unannounced finance inspection.

This QIP will be validated by the finance inspector at the next finance inspection.

6.2 Review of areas for improvement from the last care inspection dated 5 June 2017

| Areas for improvement from the last care inspection | | |
|---|--|--|
| Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005 | | Validation of compliance |
| Area for improvement 1 Ref: Regulation 27. (2) (o) Stated: Carried forward from pre-registration | The registered provider must ensure that the garden area identified to the back of the home is developed with planted and grass areas. Each unit should have a separated area provided with suitable fencing. This should be completed as soon as the weather permits. | Carried forward to the next care inspection |

| | | |
|--|---|---|
| <p>To be completed by: 30 September 2017</p> | <p>Action taken as confirmed during the inspection:</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p> | |
| <p>Area for improvement 2</p> <p>Ref: Regulation 27. (2) (a)</p> <p>Stated: Second time</p> <p>To be completed by: 5 August 2017</p> | <p>The registered provider must ensure that the environment of the residential floor will be further enhanced to promote best practice in dementia care and to ensure the overall environment is conducive to accommodate residents with dementia.</p> <p>Action taken as confirmed during the inspection:</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p> | <p>Carried forward to the next care inspection</p> |
| <p>Area for improvement 3</p> <p>Ref: Regulation 27.(4) (d) (v)</p> <p>Stated: First time</p> <p>To be completed by: 7 June 2017</p> | <p>The registered person must ensure fire safety checks are completed regularly and maintained on an up to date basis.</p> <p>Action taken as confirmed during the inspection:</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p> | |

This inspection focused solely on the variation to registration application made by the registered provider to RQIA. The areas for improvement from the last care inspection on 5 June 2017 were not reviewed as part of the inspection and are carried forward to the next care inspection.

6.3 Inspection findings

Staffing

The registered manager outlined the planned staffing arrangements for the first floor (which would consist of an additional 32 beds) for both day and night cover. The registered manager advised there had been a recruitment drive for staff and that staffing levels would be maintained at appropriate levels to meet the needs of residents who would only be admitted to the home on an incremental basis.

Infection prevention and control

The registered manager confirmed the first floor of the home had received a full terminal clean having been vacated from previous nursing use. Good standards of hygiene were observed in the home. Inspection of the premises confirmed that there were wash hand basins, adequate supplies of liquid soap dispensers and drying facilities for areas of care delivery.

Shelving and storage issues were identified as needing further improvements during the inspection on 13 September 2017 as supplies of these were inadequate to maintain good infection prevention and control procedures when fully operating. During the follow up on 5 October 2017 the registered manager advised arrangements were in place regarding the installation of shelving for storage use. Written evidence was provided by the responsible individual to this effect.

Environment

The additional 32 places identified in the variation application occupy the first floor of the building. All bedrooms were en suite, communal areas available included living areas, bathrooms, a dining room with preparatory kitchen and open communal spaces. The environment was modern, clean, fresh and finished to a high specification. Signage was in place to help promote a “dementia friendly” environment.

During the inspection on the 13 of September 2017 no dining tables were available for use. There was also a lack of side tables, shelving, storage and soft furnishings which would be conducive to the promotion of a homely environment. The registered manager and responsible individual were advised the lack of finishing's were unsatisfactory and a follow up inspection would need to be undertaken to ensure that the home was fit for purpose and admissions. During the follow up inspection on 5 October 2017 the additional furnishings including dining tables were in place.

Fire Safety

The home had a fire safety risk assessment in place dated February 2017; the registered manager advised the fire safety risk assessor had been consulted with accordingly regarding the proposed changes within the building.

Care Records

Care records were not viewed on this occasion.

Management arrangements

The registered manager outlined the management arrangements for the home including the role of the deputy manager, the quality assurance measures which will be used moving forward and the ethos envisioned for the home.

Areas of good practice

Areas of good practice were identified in relation to the environment, the management ethos and infection prevention and control measures.

Areas for improvement

No new areas for improvement were identified during the inspection. Three requirements have been carried forward from the previous care inspection on 5 June 2017. These will be reviewed at the next care inspection.

Conclusion

Following the inspection the variation to registration for Wood Green Private Residential Care Home was approved. This increased the number of residential approved places from 22 to 54.

| | Regulations | Standards |
|--|-------------|-----------|
| Total number of areas for improvement | 3 | 0 |

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Tiago Moreira, registered manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the residential care home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

No areas for improvement were identified at this inspection

Areas for improvement not reviewed at this inspection and carried forward to the next care inspection.

Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005

| | |
|--|---|
| <p>Area for improvement 1</p> <p>Ref: Regulation 27.(2) (o)</p> <p>Stated: First time</p> <p>To be completed by: 30 September 2017</p> | <p>The registered provider must ensure that the garden area identified to the back of the home is developed with planted and grass areas. Each unit should have a separated area provided with suitable fencing. This should be completed as soon as the weather permits.</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p> <p>Ref: 6.2</p> |
| <p>Area for improvement 2</p> <p>Ref: Regulation 27.(2) (a)</p> <p>Stated: Second time</p> <p>To be completed by: 5 August 2017</p> | <p>The registered provider must ensure that the environment of the residential floor will be further enhanced to promote best practice in dementia care and to ensure the overall environment is conducive to accommodate residents with dementia.</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p> <p>Ref: 6.2</p> |
| <p>Area for improvement 3</p> <p>Ref: Regulation 27. (4) (d) (v)</p> <p>Stated: First time</p> <p>To be completed by: 7 June 2017</p> | <p>The registered person must ensure fire safety checks are completed regularly and maintained on an up to date basis.</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p> <p>Ref: 6.2</p> |



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