

# Inspection Report

## 22 November 2022



## Wood Green

**Type of Service: Residential Care Home**  
**Address: Circular Road,**  
**Jordanstown, BT37 0RJ**  
**Tel no: 028 9036 9901**

[www.rqia.org.uk](http://www.rqia.org.uk)

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Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

## 1.0 Service information

<b>Organisation/Registered Provider:</b> Wood Green Management Company (NI) Ltd  <b>Responsible Individual:</b> Yvonne Diamond	<b>Registered Manager:</b> Mrs Tara Watters  <b>Date registered:</b> 22 July 2022
<b>Person in charge at the time of inspection:</b> Mrs Tara Watters	<b>Number of registered places:</b> 81  A maximum of 23 residents accommodated on the Ground Floor and a maximum of 26 residents accommodated on the 2nd Floor.
<b>Categories of care:</b> Residential Care (RC) DE – Dementia.	<b>Number of residents accommodated in the residential care home on the day of this inspection:</b>  N/A – Pre Registration
<b>Brief description of the accommodation/how the service operates:</b> The middle floor of the Wood Green building was previously registered with RQIA as a 32 bedded nursing home. Following the de-registration process of these nursing beds, Wood Green now provides health and social care for up to 81 residents.	

## 2.0 Inspection summary

An announced care inspection took place 22 November 2022, from 09.20am to 14.35pm by a care Inspector in connection with Variation VA012049.

This inspection focused on the variation submitted to RQIA to increase the number of residential beds on the first floor by 32 beds. This change in registration will lead to Wood Green providing residential care to 81 residents.

The beds in the existing nursing home on the first floor were de-registered with RQIA under a separate registration cancellation application RC000893.

### 3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

The inspection consisted of checks to estates related documentation submitted by the provider during the assessment of the variation, followed by a walk around the home on the date of the inspection by a care inspector. The Care inspector also discussed and reviewed management and governance arrangements for the increase in beds. This inspection focused only on the accommodation associated with the variation.

### 4.0 What people told us about the service

We spoke with the management team during the inspection who described the changes made within the home, the systems being used to manage this and the intended increase of the residential beds.

### 5.0 The inspection

#### 5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection to Woodgreen was on 19 July 202 by a care inspector. The areas for improvement identified during this inspection were not assessed as part of this inspection. The purpose of this inspection was to assess if the premises were suitable for an increase in beds from 49 to 81 residential care beds.

<b>Areas from improvement from the last inspection on 19 July 2022</b>		
<b>Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005</b>		<b>Validation of compliance</b>
<b>Area for improvement 1</b>	The registered person shall ensure that all stairwells in the home are free from obstruction.	<b>Carried forward to the next inspection</b>
<b>Ref:</b> Regulation 27(4) <b>Stated:</b> First time	<b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	

Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011) (Version 1:1)		Validation of compliance
<b>Area for improvement 1</b>	The registered person shall ensure that incontinence products are stored correctly.	<b>Carried forward to the next inspection</b>
<b>Ref:</b> Standard 35 <b>Stated:</b> First time	<b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	

## 5.2 Inspection findings

### 5.2.1 Are the newly adapted sections of the home compliant with the DoH Care Standards for Residential Care Homes and with other relevant legislative requirements and ACOPs?

The first floor nursing home was de-registered under registration cancellation application RC000893. As a result, the existing 32 beds, communal space, dining area, bathrooms and toilets were subsumed into the existing residential home and registration with RQIA, taking total bed occupancy to 81 beds.

A desktop estates appraisal was undertaken in relation to this variation application. It determined that the premises were originally constructed to meet the current Care Standards for Nursing Homes, and will continue to exceed the Residential Care Homes Minimum Standards going forward. There have been no structural changes to the premises, and the servicing and maintenance of the premises mechanical and electrical installations have not been affected. The premises fire risk assessment and legionella risk assessment currently in place remain valid.

### 5.2.3 Staffing Arrangements

The manager confirmed that all staff had been recruited and all the required checks had been completed in keeping with regulation. Staffing levels, structure and the deployment of staff was discussed with the manager in relation to the increase to 81 beds. The staffing levels will be reviewed and monitored at subsequent care inspections.

There were systems in place to ensure staff were trained and supported to do their job.

### 5.2.4 Management and Governance Arrangements

Discussion with the manager confirmed that they possessed a sound understanding of their role, responsibilities and accountability under the legislation.

We discussed with the manager the governance and schedule of audits to monitor and report on the quality of care and services provided in the home.

A sample of policies and procedures were reviewed.

There were systems in place to manage, for example, complaints, reporting notifiable events to RQIA and other relevant bodies and completion of a monthly monitoring report.

The Responsible Individual confirmed that they would visit the home on a regular basis to provide support for the manager and to carry out unannounced monthly monitoring visits.

### 5.2.5 Statement of purpose and patient guide

A copy of the Statement of Purpose and Patients' Guide was submitted to the RQIA prior to the pre-registration visit. This was reviewed and found to be satisfactory.

### 5.2.6 Admission arrangements

We discussed the plan in place for admissions to the home. The manager stated that admissions will be completed on a phased basis following a pre-admission assessment.

## 6.0 Quality Improvement Plan/Areas for Improvement

There were no new areas for improvement identified during this inspection.

The areas for improvement identified during the previous Care Inspection are carried forward for review at the next inspection.

Areas for improvement have been identified where action is required to ensure compliance with **The Residential Care Homes Regulations (Northern Ireland) 2005 and the Residential Care Homes' Minimum Standards (August 2011) (Version 1:1)**

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	1*	1*

\* the total number of areas for improvement includes two which are carried forward for review at the next inspection.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 27(4)  <b>Stated:</b> First time  <b>To be completed by:</b> Immediate and ongoing	The registered person shall ensure that all stairwells in the home are free from obstruction.  Ref: 5.2.3
	<b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>
<b>Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011) (Version 1:1)</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 35  <b>Stated:</b> First time  <b>To be completed by:</b> Immediate and ongoing	The registered person shall ensure that incontinence products are stored correctly.  Ref: 5.2.3
	<b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>

*\*Please ensure this document is completed in full and returned via Web Portal\**



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