

Announced Variation to Registration Care Inspection Report 5 September 2017



Windsor Care Home

Type of Service: Nursing Home
Address: 69 Osborne Park, Belfast, BT9 6JP
Tel no: 028 9066 5598
Inspectors: James Lavery

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 registered nursing home which is registered to provide nursing care for up to 40 persons.

3.0 Service details

Registered Provider: Four Seasons Healthcare Responsible Individual: Dr Claire Royston	Registered Manager: Mrs Elaine Allen
Person in charge at the time of inspection: Mrs Elaine Allen	Date manager registered: 10 February 2017
Categories of care: Nursing Home (NH) I – Old age not falling within any other category. PH – Physical disability other than sensory impairment. PH(E) - Physical disability other than sensory impairment – over 65 years. TI – Terminally ill.	Number of registered places: 40 comprising: NH-I, NH-PH, NH-PH(E), NH-TI

4.0 Inspection summary

An announced variation to registration inspection of Windsor Care Home took place on 5 September 2017 from 10.05 to 12.45 hours.

The inspection was carried out along with an estates inspector and a separate report will be issued in respect of the estates inspection.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003; The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005; The Nursing Homes Regulations (Northern Ireland) 2005; and the DHSSPS Care Standards for Nursing Homes 2015.

The inspection sought to assess an application submitted to RQIA for a variation to the registration of Windsor Care Home which proposed a reconfiguration of the lower ground; ground and first floor of the building. These proposed changes have not resulted in any change to the number of available nursing beds within the home.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

The variation to registration to Windsor Care Home was granted from a care perspective following this inspection.

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Elaine Allen, Registered Manager, and Mrs Janice Brown, Regional 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 inspection dated 7 February 2017

The most recent inspection of the home was an unannounced care inspection undertaken on 7 February 2017. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

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 application to vary the registration of the home
- notifiable events since the previous care inspection
- written and verbal communication received since the previous care inspection which includes information in respect of serious adverse incidents(SAI's), potential adult safeguarding issues and whistleblowing
- the returned QIP from the previous care inspection
- the previous care inspection report
- the statement of purpose
- the patient guide
- RQIA registration certificate

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to the registered manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 07 February 2017

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

The completed QIP was returned and approved by the care inspector. The QIP was reviewed at this inspection.

6.2 Review of areas for improvement from the last care inspection dated 07 February 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 30 Stated: First time	The registered provider must ensure that RQIA are notified of accidents/incidents or events occurring in the nursing home in accordance with The Nursing Homes Regulations (Northern Ireland) 2005 – regulation 30	Met
	Action taken as confirmed during the inspection: Discussion with the registered manager and a review of notification records evidenced that accidents/incidents or events occurring in the nursing home had been appropriately reported to RQIA in accordance with The Nursing Homes Regulations (Northern Ireland) 2005 – regulation 30.	
Area for improvement 2 Ref: Regulation 20 (1) (a) Stated: First time	The registered provider must ensure that the system/process for monitoring the registration status of registered nursing staff employed to work in the nursing home is proactive and robust.	Met
	Action taken as confirmed during the inspection: Discussion with the registered manager and a review of audit records confirmed that the registration status of nursing staff employed within the home is monitored in a robust and consistent manner.	

<p>Area for improvement 3</p> <p>Ref: Regulation 13 (1)</p> <p>Stated: First time</p>	<p>The registered provider must review the use of the front door exit keypad in conjunction with guidance from the Department of Health on human rights and the deprivation of liberty (DoLs); and the home's registration categories.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Discussion with the registered manager and a review of the environment confirmed that access and egress via the front door is managed in a way which promotes the independence and safeguarding of patients in a proportionate manner. Access to the home is via the use of a key pad whereas egress from the home is via the use of a push button mechanism which patients can easily access.</p>		
<p>Action required to ensure compliance with The Care Standards for Nursing Homes (2015)</p>		<p>Validation of compliance</p>
<p>Area for improvement 1</p> <p>Ref: Standard 5</p> <p>Stated: First time</p>	<p>The registered provider should ensure that patient information and records are maintained in a confidential manner to ensure the privacy and dignity of patients.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Discussion with the registered manager and a review of the environment confirmed that records were stored securely on each floor. It was stressed to the registered manager that all staff must ensure that nursing offices are locked securely when not in use in order to promote the secure storage of patient records at all times.</p>		
<p>Area for improvement 2</p> <p>Ref: Standard 6</p> <p>Stated: First time</p>	<p>The registered provider should that net pants are label for individualised patient use; unnamed net pants are not laundered and used communally.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Discussion with the registered manager and a review of the laundry facilities confirmed that unlabelled net pants are not used for communal use.</p>		

6.3 Inspection findings

Environment

The inspectors viewed the premises accompanied by senior management of the home.

The reconfiguration which has taken place throughout the home included the following:

- Lower ground floor: The addition of five new bedrooms; partial demarcation between the communal lounge and dining area; the conversion of two communal toilets into storage areas; the conversion of two communal toilets into one communal 'wet room.'
- Ground floor: The addition of one office area and one physiotherapy room which has resulted in the reduction of two bedrooms; the conversion of one double bedroom into a single bedroom.
- First floor: The addition of one rehabilitation kitchen area which has resulted in the reduction of two bedrooms.

The new patient bedrooms were presented to a high specification and were tastefully decorated. Each bedroom was equipped with a range of built in furniture and television facilities. It was observed that furniture within one new bedroom was arranged in such a manner that would make mobilising around the room potentially difficult. This was highlighted to the registered manager who agreed that the layout of the furniture would be rearranged prior to any patient being admitted into the room in order to promote their independence and well-being.

During the inspection patients on the lower ground floor were observed to be enjoying breakfast within the dining room while other patients were relaxing within an adjacent communal lounge. Both areas appeared to be clean, tidy and appropriately spacious for patients and staff. The demarcation between the dining area and communal lounge area afforded a suitable degree of privacy for patients and staff in both areas.

The additional 'wet room' within the lower ground floor was observed to be completed to a high specification and the registered manager expressed confidence that this facility would enhance the delivery of care to patients within the home.

Observation of the newly designated physiotherapy room confirmed that it was equipped with some physiotherapy aids and appeared to be appropriately clean and spacious.

Discussion with the registered manager confirmed that patients are regularly admitted into the home for the purpose of rehabilitation and eventual discharge home. A new rehabilitation kitchen on the first floor has been added in order to assist with these care aims and is used by staff within the home in collaboration with visiting professionals from local health Trusts. A review of this new facility evidenced that it was tastefully decorated and suitable for the rehabilitation of patients. During the inspection patients were observed using the kitchen facilities while receiving assistance from both care staff and visiting professionals.

Staffing

Discussion with the registered manager confirmed that as there has been no increase to the number of available nursing beds within the home as a result of this variation to registration, no additional staff have been required. It was agreed that staffing levels and skill mix should continue to be reviewed in accordance with the health and welfare needs of the patients accommodated within the home. These staffing arrangements will be reviewed and monitored at subsequent care inspections against relevant legislative and best practice standards. The registered manager stated that staff have expressed enthusiasm about the changes to the internal environment of the home. Patients were observed individually and in small groups throughout the home and appeared to be relaxed and comfortable in their surroundings and in their interactions with staff.

Governance Arrangements

It was confirmed that Elaine Allen will continue to act as the home's registered manager. The registered manager stated that there are no anticipated changes to the operational structure of the home arising from this variation to registration.

Home's Statement of purpose and Patient Guide

It was confirmed that the statement of purpose and the patient guide had been appropriately updated in order to reflect the changes arising from this variation to registration. The need to ensure on an ongoing basis that these documents accurately reflect both the range of services provided and the delivery of care within the home was stressed to the registered manager.

Admission planning

Discussion with the registered manager confirmed that each of the new bedrooms would be assigned to either existing patients within the home or newly admitted patients. Discussion with the registered manager during and following the inspection confirmed that in order to ensure that patients and staff are afforded sufficient time to adjust to these changes, no more than two patients per day would be admitted into their new bedrooms.

Areas of good practice

Areas of good practice were observed in relation to the interior environment of the home and facilities which promote the rehabilitation of patients.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.4 Conclusion

The application to vary the registration of Windsor Care Home was granted from a care perspective following this inspection.

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit www.rqia.org.uk/webportal or contact the web portal team in RQIA on 028 9051 7500.



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