

Announced Variation to Registration Care Inspection Report 8 March 2018



Woodlawn House

Type of Service: Nursing Home (NH)
Address: Quarry Lane, Dungannon, BT70 1HX
Tel No: 028 8771 3565
Inspector: Sharon Loane

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 8 persons.

3.0 Service details

Organisation/Registered Provider: Southern HSC Trust Responsible Individual: Shane Devlin – registration pending	Registered Manager: See box below
Person in charge at the time of inspection: Louise Donnelly	Date manager registered: Louise Donnelly – registration pending
Categories of care: Nursing Home (NH) LD – Learning disability. LD (E) – Learning disability – over 65 years.	Number of registered places: 8

4.0 Inspection summary

An announced variation to registration inspection of Woodlawn House took place on 8 March 2018 from 10.00 to 11.30.

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 purpose of the inspection was to review a variation application VA010808 works progression, and evaluate if the variation should be approved as completed. The variation submitted was to increase the number of registered places from eight to nine. This additional bed will be provided in a self-contained secure unit. Raymond Sayers, Estate Inspector assisted in the inspection process.

The variation to registration to Woodlawn House could not be 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	*3

*The total number of areas for improvement includes three standards which have been which have been carried forward for review at the next care inspection.

Issues requiring improvement/verification were discussed with Louise Donnelly, manager as part of the inspection process. Post inspection, this information has also been shared with the manager in a separate correspondence, which outlined matters to be dealt with in order to progress and approve the registration of the additional bed.

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Louise Donnelly, manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent inspection dated

The most recent inspection of the home was an unannounced care inspection undertaken on 25 January 2018. Other than those actions detailed in the QIP no further actions were required.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- variation application submitted to RQIA to increase occupancy from eight to nine beds
- the proposed statement of purpose

The following areas were examined during the inspection:

- the new premises
- discussion regarding operational matters

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.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 25 January 2018

The most recent inspection of the home was an unannounced care inspection and the completed QIP was returned and approved by the care inspector.

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

6.2 Review of areas for improvement from the last care inspection dated 25 January 2018

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Care Standards for Nursing Homes (2015)		Validation of compliance
Area for improvement 1 Ref: Standard 39 Criteria 1 Stated: First time	The registered person shall ensure that the manager is provided with an induction in relation to their role and responsibilities. Records should be maintained and retained for inspection.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and will be carried forward for review at the next care inspection.	
Area for improvement 2 Ref: Standard 35 Stated: First time	The registered person shall ensure that the systems and processes in place are sufficiently robust to assure the quality of care and other services provided. Actions plans should be developed where shortfalls have been identified and arrangements are in place to ensure actions have been actioned to ensure quality improvements.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and will be carried forward for review at the next care inspection.	

Area for improvement 3 Ref: Standard 35 Criteria 7 Stated: First time	The registered person shall review the current arrangements for the completion of monthly monitoring visits undertaken in accordance with regulation 29 of the Nursing Homes Regulations (Northern Ireland) 2005. Action plans should accurately reflect areas for improvement as identified within the main body of the report and should be reviewed at to ensure compliance has been achieved.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and will be carried forward for review at the next care inspection.	

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 25 January 2018 were not reviewed as part of the inspection and are carried forward to the next care inspection.

6.3 Inspection findings

Environment

The manager guided the inspectors around the self-contained secure unit which is located approximately 10 metres on a plot of land adjacent to the main Woodlawn House building.

This self-contained unit is designed to provide accommodation for one service user. The unit offers bright accommodation to include a secure external activity area with access from the living/activity room. All areas of the unit are wheelchair accessible. The unit consists of the following:

- living room/Activity room
- kitchenette
- bedroom with en-suite facilities
- staff office
- staff WC

All areas accessed by the service users were furnished with furniture and fixtures suitable for the needs of the patients who would be accessing the service.

Adequate car parking facilities are also provided.

Statement of Purpose & Service User's Guide

Prior to the inspection the statement of purpose and the service user guides were submitted to RQIA and a review of both documents found them to be satisfactory. Both documents are available in an easy-read version, to suit the category of care for which the home is registered.

Policies and Procedures

The manager advised that a policy and procedure manual was available and centrally indexed the policies and procedures for all operational areas of the home. A system was in place to ensure that policies and procedures are reviewed three yearly minimum and more frequently if required.

Staffing

The manager outlined the proposed staffing structure and that these arrangements would be reviewed in accordance with the health and welfare needs of the patients to be accommodated. The staffing arrangements will be reviewed and monitored at subsequent care inspections.

A number of issues pertaining to the premises and grounds were identified. Additional matters relating to the operational needs of the service were also identified and further actions are required to ensure that the premises are fit for purpose in accordance with the homes statement of purpose. As discussed earlier, these matters were detailed in a separate correspondence forwarded to the manager, post inspection. A further inspection will be undertaken by RQIA in order to approve the variation application submitted.

There were no issues listed as requiring improvement.

	Regulations	Standards
Total number of areas for improvement	0	0

6.4 Conclusion

The application to vary the registration of Woodlawn House was not approved from a care perspective following this inspection. A further inspection will be required to grant approval for the registration of the additional bed.

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.



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