

## **Registration and inspection of residential care services for older people**

### **Additional Frequently Asked Questions**

#### **Q. What is the relevant legislation?**

The legislation governing the registration and inspection of residential care services for older people is:

- Health Act 2007
- Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2009
- Health Act 2007 (Care & Welfare of Residents in Designated Centres for Older People) Regulations 2009

#### **Who's who during registration?**

##### **Q. Who is the applicant?**

The applicant is the person who is applying to the Social Services Inspectorate of the Health Information and Quality Authority to be a registered provider of a nursing home or residential care setting for older people in Ireland.

##### **Q. Is the “registered provider” the same person as the “fit person”?**

As a provider you must demonstrate to the satisfaction of the Social Services Inspectorate that you are suitable or fit for the role. The registered provider, the person-in-charge and those involved in the management of the centre must all be “fit” persons.

**Q. Who is registered provider in my organisation?**

If the service is provided by a corporate body, such as the Health Service Executive or a voluntary organisation, the registered provider is the person nominated by that organisation to carry overall responsibility for the service on its behalf. This person must have sufficient authority to make decisions about the service, for example, to allocate extra resources where these are needed to implement inspection recommendations. If the service is owned privately, the registered provider is the owner. If the privately owned service is a partnership or a limited company, one named/nominated person must be identified as the registered provider on the application form to the Authority.

**Q. What level of qualification does the person in charge require?**

The Health Act 2007 (Care & Welfare of Residents in Designated Centres for Older People) Regulations 2009 require that the Person in charge is a registered nurse with certain experience in geriatric nursing.

**Services covered by the new system**

**Q. Who should apply for registration now?**

New designated centres must register. All existing residential centres, as of 1 July 2009, are deemed registered for the first three years. Therefore, there is no need for existing centres to immediately apply for registration. However, a person carrying on the business of providing residential services for older people must notify the Chief Inspector of this fact within six months of 1 July 2009. The Inspectorate will operate a phased registration process and will be in contact with centres regarding applications to register.

**Q. How long will registration take?**

The Inspectorate will have a list of all homes requiring either re-registration or first-time registration and will be in touch with each provider after 1 July 2009 to initiate the registration process. The registration process will take at a minimum two months to complete.

**Q. Can we be registered for more than one category of care?**

Yes. The centre can be registered for some or a mixture of the following categories of care. These will then be applied to the Centre's registration as operating conditions.

**Care condition**

- older persons
- dementia
- physical disability
- intellectual disability
- acquired brain injury
- children
- other

**Staffing and staff qualifications**

**Q. What is the definition of appropriate staffing levels?**

What the Inspectorate will be looking for is that, at any point in time, the number and skill mix of staff on duty in a residential care service is appropriate to the assessed needs of the residents and the size, layout and purpose of the residential care setting.

**Q. Will you be advising us on staffing ratios?**

The SSI is not defining staff ratios for designated centres as each centre will vary in its physical layout, purpose and number and category of residents. On inspection, the staff ratios will be assessed in respect of whether that centre can meet the needs of all the residents within the centre.

**Q. Do all staff require FETAC level-5 training?**

Standard 22 and 24 of the *National Quality Standards for Residential Care Settings for Older People in Ireland* outlines requirements regarding staffing. The Inspectorate will not be prescriptive regarding the level of qualification; the Standards are indicative and not prescriptive. It is the duty of the provider to demonstrate that staff employed have the appropriate skills and can deliver high quality and safe care to the residents in accordance with their assessed needs.

**Q. What minimum data set (MDS) tool does the Authority want us to use?**

What inspectors will be determining on inspection is that all the residents' data is collated and accessible. The Authority will not be determining a specific MDS. It is the provider's responsibility to determine what tool they use. There are supplementary guidelines for the choice and use of MDS on page 70 of the National Standards.

**Q. What is the standard assessment tool for assessing the needs of residents?**

What the Inspector will be looking for is that each resident has a comprehensive assessment of all their needs carried out and that these assessments are regularly reviewed. The Inspectorate will not be determining a specific assessment tool. It is the provider's responsibility to determine what tools they use.

**Q. Will there be a standard template for the "statement of purpose and function"?**

No. The Inspectorate will not be developing a sample statement but the requirements of the statement of purpose and function are set out in the Health Act 2007 (Care and Welfare) Regulations 2009.

**Garda clearance requirements for staff**

**Q. Do all my staff need Garda clearance?**

Yes. To ensure compliance with the Health Act 2007 (Care and Welfare) Regulations 2009 and *National Quality Standards for Residential Care Settings for Older People in Ireland* (the Standards), the registered provider must not employ a person to become a member of staff until they have undergone Garda vetting and clearance.

**Q. Does evidence of Garda clearance have to be maintained on site?**

Evidence of Garda clearance must be kept on site or be easily obtainable if stored off site. The SSI requires evidence that Garda vetting has been undertaken for all staff in the centre. The SSI may request these records to ensure that staff have been recruited in accordance with best human resource management practices.

**Q. Do I have to obtain Garda clearance for existing employees?**

Yes. In order to be in compliance with the Health Act 2007 (Care and Welfare) Regulations 2009 and *National Quality Standards for Residential Care Settings for Older People in Ireland* (the Standards), the registered provider must not employ a person to become a member of staff until they have obtained Garda vetting.

**Q. So all my staff have to have Garda clearance?**

Yes. All staff have to be vetted, however long they have been employed, irrespective of nationality. The nursing home will have to give evidence that they have Garda clearance for all employees.

**Q. Who does the Garda vetting, the SSI or the registered provider?**

The Social Services Inspectorate will only administer Garda vetting for the person applying to be the registered provider, the person in charge, and key senior management personnel. The registered provider arranges Garda vetting of their own staff.

**Q. Will temporary staff or part-time staff need Garda clearance?**

The registered provider must ensure staff employed on a temporary basis/part-time basis have Garda clearance and references.

**Q. How do we arrange Garda clearance for our staff?**

Garda Vetting is carried out by the Garda Vetting Unit in Thurles, County Tipperary.

**Reference requirements**

**Q. Are references needed when applying for registration?**

Yes. The SSI requires the applicant to attach with the Application to Register, three written references in respect of the Person-in-Charge and each other person involved in management. They must not be references from relatives or from any staff, residents or relatives of residents at the centre. The references should establish the relationship between the applicant and the referee and will ask the referee to answer questions about the applicant regarding their integrity and capability in regards to their position in the centre. In the interests of assessing fitness, the Inspectorate may also require references in respect of the proposed Registered Provider. Reference forms will be sent along with the application pack, and referees will return the completed form directly to the Social Services Inspectorate.

**Q. What other references are required?**

There should also be evidence on site that references have been acquired for all staff employed directly in the centre.

**Q. Can references be sought retrospectively?**

Yes. The onus is on the registered provider as a fit person to ensure that all employees have been recruited in line with best human resource practices and are suitable for the role for which they are employed. The registered provider must ensure that they have the appropriate information on each person employed to work in their centre. This includes three written references for each employee. The Health Act 2007 (Care and Welfare) Regulations 2009 Schedule 2 specifies information required for those working in a designated centre.

**Q. How will you assess if we have made adequate checks on our employees?**

An SSI Inspector may look at certain records during an inspection or request particular records if necessary. They may also look at the recruitment policies in place and speak directly to staff in relation to the recruitment and induction processes within a centre.

## **Fit-person Entry Programme**

**Q. Who completes the Fit-person Entry Programme?**

The person applying to become the registered provider completes the self-assessment form and returns this to the SSI. If you are applying to be the registered provider of more than one designated centre you should use the Programme itself in each of your centres, together with your staff, while you only need to complete the self-assessment form once.

**Q. When do we complete the Fit-person Entry Programme?**

The applicant will be sent the self-assessment form together with the application to register a designated centre. The applicant has **8 weeks** to complete the self-assessment form and return to the SSI.

**Q. What happens to the Fit-person Entry Programme once it has been completed?**

Once the applicant has completed the Fit-person Entry Programme it will be returned to the SSI. This will be considered by the registration panel along with other information gathered on inspection. All this information will be assessed when making the decision on whether to grant registration.

**Q. How can the Fit-person Entry Programme help me to make improvements?**

By assessing the standard of care being delivered at the designated centre, and where necessary, developing the practice further, the expected outcome is that each resident in the centre will be enabled and supported to live as full, safe and as independent a life as possible.

## Applications for registration

### **Q. What is the six-month rule and how does it work?**

Providers will have to apply to register their centre six months prior to the expiration of their current registration once they have gone through the first registration process with the Authority.

### **Q. Will you be seeking information on financial stability?**

On occasion, SSI may ask for a financial declaration in respect of the registered provider. This information will be used only for the purpose of assessing the financial stability of the Centre. The Inspectorate's concern is to ensure that centre is likely to remain in operation for the foreseeable future in order to safeguard the welfare of residents.

## Information on fees

### **Q. When do we pay the registration fee?**

The registration fee is payable at the time the application to register a centre is submitted to the Health Information and Quality Authority's Social Services Inspectorate.

### **Q. How much is the registration fee?**

The registration fee is €500 and is payable with the application to register a centre. This occurs every three years.

### **Q. How do we pay the registration fee?**

The registration application fee is payable by electronic funds transfer and instructions regarding this will be provided in the guidance which will accompany this registration application form.

### **Q. How much is the annual fee?**

The annual fee is €190 in respect of each resident who will be accommodated in the centre. This is set by the Minister for Health and Children.

### **Q. When do we pay the annual fee?**

As a general rule, the annual fee is payable in three equal instalments on 1 January, 1 May and 1 September each year in respect of each four month period immediately following those dates. Each instalment is payable not later than the last day of the calendar month in which the instalment falls due.

### **Q. What about the initial 3-year period – are there special rules?**

Yes. For the initial period as from 1 July 2009, the annual fee of €190 is payable in respect of each resident accommodated at the designated centre on 1 July

2009. For each year thereafter, the fee is €190 in respect of each resident accommodated at the centre on the anniversary of that date. This continues until the Centre is Registered by the inspectorate.

For the first 6 months of 2009, the annual fee in respect of the period 1 July 2009 to 31 December 2009 is payable on a pro rata basis and must be paid no later than 30 September 2009.

## The inspection process

### **Q: How many inspections will there be per year?**

The SSI will normally inspect newly registered providers within a short period after their first registration. Inspections are always carried out prior to the renewal of a registration certificate. The SSI will also carry out inspections in the period between registration renewals. These may be announced or unannounced and the frequency of these inspections will depend on the nature and level of compliance of the designated centre. It is expected that there will be four inspections in a three-year period, one of which will be the registration-process inspection. Inspections will be carried out on proportional basis.

### **Q. Could I get an inspection by the Health Information and Quality Authority's Social Services Inspectorate before I apply to register?**

Yes. The SSI will initiate a phased three-year registration process from 1 July 2009. Some centres will therefore be registered sooner than others. This may mean that for some providers the first visit by the SSI will be an inspection other than the registration inspection.

### **Q. How much notice will we be given before an inspection?**

If the inspection is an announced inspection, an administrator from the Authority will usually contact providers to let them know the date and month of the inspection. There will usually be at least one month's notice of an announced inspection. Sometimes the Authority may give short notice or may undertake an unannounced inspection of a residential care setting.

### **Q. What types of inspection are there?**

There are a number of different types of inspections: registration-related, scheduled, and additional inspections.

#### **1. Registration-related inspections**

- every centre receives an inspection visit as part of the registration and re-registration process

- new owners who have applied for first-time registration will receive an inspection visit prior to the centre operating and another inspection visit takes place three to six months later when there are residents in the centre
- when there is a change of ownership and a new provider applies to be registered, an inspection will take place.

**Q. Will there be notification of the registration inspection?**

Yes. The applicant will be notified of the registration inspection which will ensure key people are available to meet the inspector, that documents are available, etc.

**Q. What does the registration inspection involve?**

The inspector will meet with the applicant and carry out a fit-person interview. The interview is designed to assess your fitness, some aspects of which will already have been assessed by documentation you have provided as part of your application. The interview will assess your understanding of, and capacity to comply with the requirements of the Health Act (Registration of Designated Centres) Regulations 2009, the Health Act (Care and Welfare) Regulations 2009 and *The National Quality Standards for Residential Care Settings for Older People in Ireland*. A full inspection of the premises will also be undertaken including reviewing documentation, observing practices and speaking with staff and residents. The SSI may also ask the applicant for certain documentation to be provided for review in advance of this inspection.

**2. Scheduled inspections**

These are inspections that take place during the three-year registration cycle. How often these inspections take place is informed by the registered provider's level of compliance with the Standards and regulations demonstrated on the previous inspection, and any information the SSI receives about the centre in the intervening time. These may be either announced or unannounced.

**3. Additional inspections**

There are a number of different types of additional inspections, as follows:

- follow-up inspections, which are to check on specific matters arising out of a previous inspection to ensure that the action required by the registered provider has been taken
- additional inspections, which follow a change in circumstances, for example, following notification to the SSI that there is a new person in charge
- triggered inspections are inspections, which are triggered by one of a number of events including receipt of a complaint/concern or notification to the Authority of a significant event affecting the safety or wellbeing of residents. The triggered inspection allows the inspector to focus (but not

exclusively) on the area of concern indicated by the information the SSI has received

- random inspections, which are “spot checks” of the service.

**Q. Will inspections be announced or unannounced?**

All inspections, with the exception of the registration inspection, can be announced or unannounced and may take place at any time of the day or night. The inspection visit is only a part of the inspection process. The process may also include the submission of data by the centre and concludes when the provider receives the inspection report.

**During the inspection**

**Q. How long will an inspection take?**

The duration of the inspection will depend on the nature and size of the designated centre. We would anticipate that most inspection visits will take approximately one to two days.

**Q. How many inspectors will be on an inspection?**

The number of inspectors on any given inspection will be determined by the size and complexity of your centre. Inspectors will usually be from the Authority but occasionally external advisors may be included when necessary. For each inspection there will be a lead inspector who is responsible for ensuring the inspection team is appropriate and balanced.

**Q. Would an inspector expect to meet the person-in-charge on an inspection?**

Yes, for the registration inspection we will meet and hold interviews with both the registered provider and the person in charge. This may also be the case with scheduled inspections.

**Q. Would an inspector expect to meet the person-in-charge on a night time inspection?**

No. We would expect to see that a suitable person is on duty with the knowledge and expertise to oversee the centre at night time. As we will undertake night time inspections we ask that the registered provider notifies all staff in the centre that inspectors may call at any time. The registered provider should also tell their staff to ask to see the inspectors’ authorisation and identification.

**Q. Would an inspector want access to all documentation on a night time inspection?**

The Authority is aware that centres operate differently at night time than during the day so we would not expect access to the same level of documentation. If documents are required the inspector may request documents to be submitted following the inspection.

**Q. Will inspectors enter resident's rooms during night time inspections?**

If the Authority carries out a night time inspection we will make all attempts to avoid the unnecessarily disturbance of residents.

**Q. How will we know if it is an official inspector?**

The registered provider should inform their staff that inspectors have the power to conduct inspections at any time of the day or night. Staff should ask to see the inspectors' Certificates of Appointment before letting them enter the premises. All inspectors will also carry photo identification issued the Authority.

**Q. What is the purpose of carrying out night time inspections?**

As residential care is a 24-hour service it is important that the SSI obtains a comprehensive understanding of what that service is like at all times of the day or night. There are numerous and varying demands placed on the service at different times of the day and experiencing what the service is like at different times enables inspectors to gain an understanding of what life is like for residents in that service.

**Assessing the standard of care and service**

**Q. How will you assess my service?**

The inspector will gather evidence in a number of ways. They will read documents, observe activities and listen to the people in the centre. Inspectors will spend a considerable amount of time speaking to residents, if they wish to speak to inspectors, during an inspection, which will inform them of what it is like to be a resident in that centre. They will also spend time around the service in order to get a good understanding of what that service is like as a whole.

**Q. How will you make judgements on the service we provide?**

To assess the overall quality of the service provided in the centre, inspectors will focus on what life is like for the residents there. To do this, inspectors will examine how well the requirements of the Health Act 2007, the Health Act (Care and Welfare) Regulations 2009 and the *National Quality Standards for Residential Care Settings for Older People in Ireland* are met under the following headings:

1. Governance and leadership.
2. Quality of service.
3. Healthcare needs.
4. Premises and equipment.
5. Communication.
6. Staffing.

In order to ensure that judgements are not made on the basis of single sources of evidence, e.g. one resident's/staff member's/relative's comments, SSI's methodology for gathering evidence is based on:

- what inspectors observe (observation)
- what inspectors are told (questioning/discussions)
- what inspectors read (documentation).

This means that the inspectors triple-check everything to see if what is observed, what is spoken, and what is documented links together.

**Q. How will you address an unsuitable environment – what action will you expect to see being taken?**

Where a centre is non-compliant with the standards in relation to the physical environment we expect to see a plan of action for how this non-compliance will be rectified and an appropriate timeframe in which this is to be achieved.

**Q. Will the inspector speak to residents?**

Inspectors will review documents in as far as possible in advance of an inspection event. This will allow them to spend time with residents while they are on inspection. While any staff must assist the inspectors when asked to do so, residents must give their permission to be interviewed. Inspectors will also speak to relatives and advocates while in the centre.

**Q. Will environmental health officers and/or inspectors from the Health and Safety Authority etc. still visit my service?**

Yes. The Health Information and Quality Authority's Social Services Inspectorate is the regulatory body for residential services for older people and is concerned with the provision of social care services within those designated centres and compliance with the Health Act 2007 (Care and Welfare) Regulations 2009 and

*National Quality Standards for Residential Care Settings for Older People in Ireland.* Other statutory bodies will continue to visit centres to ensure compliance with other legislation including health and safety, fire safety, environmental health etc.. SSI may check to see if a centre is fully compliant with other requirements and verify that correct certification has been acquired.

## The inspection report

### **Q. Will inspection reports be published?**

Yes, inspection reports will be published on the Authority's website.

### **Q. Can we comment on factual inaccuracies?**

Yes. Before the inspection report is published it will be sent to the registered provider to be checked for factual accuracy. Any factual errors in the report will be corrected with the agreement of the Authority before it is published on the website. However, service providers will not be allowed to alter findings or recommendations in reports.

### **Q. What if a provider disagrees with the findings of an inspection report?**

The provider may write a response to the report if they so wish which will be appended to the report when published on the website.

### **Q. What will the report look like?**

The inspection report is a combination of information and evidence gained about the centre prior to the inspection (in the case of an announced inspection) and findings from the inspection.

### **Q. Will overall conclusions be drawn about my service?**

Based upon evidence collected the inspectors will make an overall judgement regarding the standard of service provided by the Designated Centre.

#### **Evidence of good practice**

This means that an acceptable standard has been reached and the provider demonstrates a culture of review and strives to drive forward best practice.

#### **Some improvements required**

This means that practice is generally satisfactory but there are areas that need attention.

#### **Significant improvements required**

This means there is considerable scope for improvement and some unacceptable practice

**Q. Will you acknowledge good practice in the report?**

Yes. The Authority's Social Services Inspectorate will be fair and proportionate and where there is evidence of good practise this will be acknowledged in the report. Likewise issues of non-compliance and poor practise will also be contained in the report. Highlighting both the positive and negative aspects of the centre will allow a member of the public to make informed choices in relation to the designated centre.

**Q. What is the timeframe for the report to be published?**

The report will be published on our website shortly after the inspection visit. During this time the report will be sent to the provider to allow them comment on factual accuracy. On average the inspection report will be published with in four to six weeks from the date of inspection.

### Following the inspection

**Q. When do we know how we did in the inspection? Will we get feedback?**

Before concluding the inspection the inspectors will give the provider, centre staff and the residents an opportunity to know the outcome of the inspection. The inspectors will hold a feedback meeting with the provider and any member of the centre's staff that the provider wishes to be in attendance. The purpose of the meeting is for the inspector to report on their findings, highlighting both good practice and where improvements are needed. This meeting also gives the provider an opportunity to ask any questions they may have. While the inspectors might need to review their findings further, the feedback given and the information in the inspection report will accord.

**Q. How will the SSI know that recommendations made by the inspector have been carried out?**

Following on from an inspection, the SSI will agree an action plan with the registered provider. The action plan will set out follow-up actions and set a timeframe for the recommendations to be carried out. An inspector may do a follow-up inspection to ensure that the recommendations have been carried out.

### Conditions of registration

**Q. What are conditions of registration?**

All services will be registered with conditions. Conditions are used to describe and define the parameters within which the service operates. They ensure that

the registered provider, residents, staff and members of the public are clear about the total service provided in the centre. These conditions mean that every designated centre will be registered for a total number of beds, and one or more service user categories. These categories are:

<u>Care condition</u>	<u>Category</u>
▪ older persons (over 65)	A
▪ dementia	D
▪ physical disability	E
▪ intellectual disability	F
▪ acquired brain injury	B
▪ children	C
▪ other	G

**Q. How can conditions be changed?**

Conditions of registration may be varied, added or removed by an application made by the registered provider or by the Authority.

**Q. How do I vary conditions of my registration?**

Where a registered provider wishes to vary or remove a condition of registration within the three years for which the centre is registered, the registered provider must make an application to SSI. Application fees are payable and the amount will depend on the variation applied for. When the assessment is complete and the Authority has determined whether or not the variation of a condition is appropriate in the particular circumstances, it will write to the provider with a "Notice of Proposal".

The next step is that the SSI will issue the provider with a "Notice of Decision" stating whether the application has been accepted and, if so, it formalises the new condition(s). If the application to vary conditions is successful the registered provider will be issued with a new registration certificate listing the new conditions. This does not affect the registered provider's obligation for registration renewal which must be carried out every three years.

**Q Will I be inspected if I apply to change a condition of registration?**

Depending on the type of variation applied for, an inspector may visit the centre to make an assessment.

## Cancellation and unsuccessful applications for registration

### **Q. What happens if you cancel my registration?**

Under section 64 of the Health Act 2007, the Chief Inspector may cancel the registration of a designated centre. In this case the designated centre must cease to operate. The SSI will notify the Health Service Executive of the cancellation of registration who will make alternative arrangements for the residents of the designated centre.

### **Q. What happens if the applicant is deemed unfit?**

If an applicant is deemed unfit, registration will not be granted. The SSI will notify the applicant of its proposal in respect of registration, whether this is to grant, refuse or vary conditions of registration. An appeals process is available to the applicant if they do not agree with the proposal of the Chief Inspector. Under section 53 of the Health Act 2007 when an application has been considered, the applicant will be sent a written "Notice of Proposal" to:

- grant an application for registration or registration renewal setting out the operating conditions
- refuse an application for registration or registration renewal
- change the conditions of an existing registration (attach additional conditions, or vary or remove existing ones)
- cancel a provider's registration.

The applicant will have, as outlined in the Health Act, 28 days during which they may make written representations to the Chief Inspector of Social Services concerning the proposal. A final decision will not be made until the applicant has:

- made written representations to the Chief Inspector of Social Services concerning the Proposal, or
- notified the Chief Inspector of Social Services in writing that they do not intend to make representations, or
- the time limit of 28 days has elapsed.

Where written representations are made, the representation should specify the reasons why the applicant disagrees with the Proposal. A representation allows the Chief Inspector of Social Services to adhere to the principles of natural justice, in examining whether the SSI has acted fairly, taking into account all the information available and any additional information provided, before a final decision is made.

**Q. How does the appeal procedure operate?**

Under Section 57 of the Health Act 2007, the registered provider has the right of appeal to the District Court against the Chief Inspector's decision. The appeal must be made within 28 days after service of the "Notice of Decision" and the registered provider must notify the Chief Inspector of the appeal at the same time as it is made to the District Court.

The decision will take effect if no appeal is brought within 28 days or longer as determined by the Chief Inspector. The decision will not take effect if an appeal is brought by the registered provider until the determination or withdrawal of that appeal (section 57(2)(a) Health Act 2007).

If the registered provider appeals to the District Court under section 57 of the Health Act 2007, the registered provider may continue to operate the designated centre until a determination is made, or until the appeal is withdrawn or a further appeal to the Circuit Court is lodged. The District Court may:

- confirm the decision of the Chief Inspector of Social Services
- direct the Chief Inspector of Social Services to:
  - (a) register or renew the registration of the designated centre
  - (b) restore the registration of the designated centre
  - (c) vary or remove a condition of the registration, or
  - (d) attach an additional condition to the registration (section 57(4)).

**Concerns and complaints**

**Q. Does my service have to have a complaints policy in place?**

Yes. Part 12 of Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2009 outlines requirements in relation to complaints procedures. Registered providers of designated centres will be required to have written operational policies and procedures in place relating to the making, handling and investigation of complaints from any person about any aspects of service, care and treatment provided in, or on behalf of a designated centre. Registered providers will also be required to have an appeals process in place. Providers will be required to ensure a nominated person is available in the designated centre to deal with complaints, a record of complaints is maintained and that an independent person, (independent to the nominated person to investigate complaints) is available to monitor all aspects of the complaints process.

**Q. Can families complain to the Health Information and Quality Authority?**

The Social Services Inspectorate will not investigate individual complaints in designated centres. However, if information in relation to complaints is received by the SSI it may inform the scheduling of inspections in particular centres.

**Q. Will the HSE complaints procedure be taken over by the Health Information and Quality Authority?**

No. The Authority is not taking over from the role of the complaints officer within the Health Service Executive. The SSI will not investigate individual complaints as the inspectorate is interested in the centre's overall compliance with the regulations and the Standards. If the SSI is made aware of a concern we will look at this in relation to the operation of the centre as a whole. We may look at how the provider deals with complaints and judge whether they are in compliance with the Regulations and Standards in this regard. If an individual already made a complaint and is not happy with the outcome we will advise on what further options are open to you.

## Notifications

### **Q. When do I need to notify the SSI of events in my Centre?**

The registered provider, under regulations, is obliged to notify the SSI of certain events within a particular timeframe. It is very important that the provider familiarise themselves and their staff with these notifiable events. Specific details of these notifiable events are contained in Guidance for Providers on Notifications and Care and Welfare of Residents in Designated Centres for Older People Regulations 2009.

## New service planning

### **Q. Can I get information on developing a new service?**

Yes. The SSI recommends that if you are considering building a new designated centre you should contact its registration office in Cork (021-2409650 or [registration@hiqa.ie](mailto:registration@hiqa.ie)). This is an opportunity for you to inform the SSI of your intentions and to make preliminary enquiries about your statutory obligations and requirements in respect of the service you intend to provide. This will assist providers to be fully informed and become as prepared as possible before progressing plans and applying to register.

## Information on our inspectors

### **Q. Will inspectors carry official identification?**

Each inspector employed by the Authority will receive a certificate of appointment and personal identification. When an inspector is exercising any power conferred on the Authority, he/she will produce, on request by any person a copy of their certificate together with personal identification.

### **Q. What is the background of the inspectors?**

All inspectors come from a variety of professional backgrounds. All have been trained in registration, inspection and enforcement and will inspect all aspects of the residential care service. On appointment, inspectors go through extensive training including an induction process into the systems and processes of the SSI and specialist key areas relating to the regulation of social care services.

### **Q. Will I be able to contact the SSI for advice on inspections?**

Yes. An inspector will be assigned to each designated centre. There is a dedicated advice number (021 2409660) and you will be directed appropriately if you wish to contact the SSI to discuss issues in relation to registration and inspection.