

Thematic Inspections Food and Nutrition and End-of-Life Care

RN001/2014

This Notice contains important information for Registered Providers and Persons in Charge of Designated Centres for Older People.

Health Information and Quality Authority

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1. Introduction

The Authority will roll out a national programme of thematic inspections on end-of-life care and food and nutrition in quarters two, three and four 2014. The key objective of this approach is to enable a more intense focus on these two specific areas to drive and encourage a quality improvement approach across the sector and facilitate improved outcomes for residents.

2. Relevant legislation and Standards

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

National Quality Standards for Residential Care Settings for Older People in Ireland

Outcome 14: End-of-Life Care

Each resident receives care at the end of his/her life which meets his/her physical, emotional, social and spiritual needs and respects his/her dignity and autonomy.

References:

Regulation 14: End of Life Care Standard 16: End of Life Care

Outcome 15: Food and Nutrition

Each resident is provided with food and drink at times and in quantities adequate for his/her needs. Food is properly prepared, cooked and served, and is wholesome and nutritious. Assistance is offered to residents in a discreet and sensitive manner.

References:

Regulation 20: Food and Nutrition Standard 19: Meals and Mealtimes

3. Methodology and documentation

As part of the methodology, the Authority has produced provider self-assessment questionnaires and regulatory guidance for nursing home providers and staff. These documents, together with the judgment framework are available on the Authority website at http://www.hiqa.ie/resource-centre/care-providers/inspection.

3.1 Guidance

In order to facilitate quality improvement, the Authority has developed and published evidence-based guidance on good practice in the areas of food and nutrition and end-of-life care. The guidance documents identify the essential elements which would be representative of what a designated centre must have in place as the foundation for the provision of safe, high quality

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care. This guidance contains explanations of concepts which will assist in implementing the Standards and meeting the regulations.

3.2 Judgment framework

The judgment framework relevant to the two outcomes sets out the critical components that should be in place to meet the stated outcomes. It assists providers to consider their service within a framework of compliance with the relevant standards and regulations. The framework provides transparency for providers and the public on how judgments are made. It contains two judgment descriptors: compliant and non-compliant. When non-compliance is identified, the impact on the individuals who use the service will be assessed and judged to be major, moderate or minor. These judgment descriptors relate to the impact the non-compliance has on the health, safety and wellbeing of the residents and reflect the timescales within which they must be addressed: immediately, as a matter of priority, or within a reasonable timescale. Providers should read and consider this document carefully.

3.3 Provider self-assessment

The self-assessment assists providers and staff to reflect on care provided to residents and where necessary take action to improve quality and ensure compliance. When undertaking the self-assessment, the provider should use the judgment framework to assess if the service is compliant or not. In the case of a judgment of non-compliance, providers should grade the degree as a minor, moderate or major non-compliance. The final part of the self-assessment includes an 'action' section to address any areas for improvement identified. The actions should include details of proposed actions and timeframes for completion.

3.4 Relatives questionnaires

The Authority welcomes the views and opinions of residents and relatives who provide valuable insights into the quality of life and care provided in designated centres. The Authority has developed and tested questionnaires to elicit the views and experiences of family members/friends. Prior to the inspection, providers will receive questionnaires which they should forward to the named next of kin (or other relevant person) of 10 residents who died in the designated centre within the last 24 months (please exclude relatives of residents deceased within the last 3 months). The questionnaire pack includes an explanatory letter from the Authority and guidance for completing the survey. A pre-paid envelope will accompany the questionnaire to facilitate relatives to return completed questionnaires directly to the Authority. On the day of inspection the Authority will give each provider feedback on relatives' comments.

4. Monitoring programme

Thematic inspections will commence from 1 April 2014. Each thematic inspection is unannounced and carried out over one day with inspection reports produced and published for each of the inspections, with qualitative and quantitative evidence and compliance judgments.

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Prior to inspections commencing providers¹ are required to submit to the Authority the completed self-assessment questionnaires on end-of-life care and food and nutrition along with associated policies. Please note that centres due for a registration renewal inspection in 2014 will **not** receive a dedicated thematic inspection as the outcomes will be covered as part of the renewal. However, these providers **are required** to submit completed self-assessments for end-of-life care and food and nutrition.

Please return completed self-assessments along with any relevant policies to the Authority by Friday 28 March 2014.² Documents should be submitted in soft copy to rst@higa.ie.

¹ The 52 providers who took part in the thematic test in 2013 will not receive a thematic inspection in 2014 and are not required to submit any documentation.

² This information is being required under section 65 of Health Act 2007 (as amended).