

Report of an inspection of a Designated Centre for Older People.

Issued by the Chief Inspector

| Name of designated | St Brendan's Community Nursing |
|---------------------|--------------------------------|
| centre: | Unit |
| Name of provider: | Health Service Executive |
| Address of centre: | Lake Road, Loughrea, |
| | Galway |
| | |
| Type of inspection: | Unannounced |
| Date of inspection: | 17 July 2025 |
| Centre ID: | OSV-0000633 |
| Fieldwork ID: | MON-0045970 |

About the designated centre

The following information has been submitted by the registered provider and describes the service they provide.

St. Brendan's Community Nursing Unit is a purpose built residential care facility overlooking the lake in the town of Loughrea in County Galway. It provides twenty four hour nursing care for 100 people over the age of 18 years whose care needs range from low to maximum dependency. The building comprises four care areas. Sliabh Aughty and Crannogs on the upper floor and Knock Ash and Coorheen on the ground floor. Coorheen provides care for people with dementia. Each care area has 21 single rooms and two double rooms and all bedrooms have accessible en-suite toilet and bathroom facilities. There are two sitting/dining rooms in each care area. An additional quieter sitting room is located on the ground floor which has tea and coffee making facilities. The Four Seasons Room located on the ground floor is available for residents from each care suite to enjoy large group recreational activities and dining. There is a palliative care suite supported by the hospice home care team available.

The following information outlines some additional data on this centre.

| Number of residents on the | 87 |
|----------------------------|----|
| date of inspection: | |
| | 4 |

How we inspect

This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013 (as amended), and the Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2015 (as amended). To prepare for this inspection the inspector of social services (**hereafter referred to as inspectors**) reviewed all information about this centre. This included any previous inspection findings, registration information, information submitted by the provider or person in charge and other unsolicited information since the last inspection.

As part of our inspection, where possible, we:

- speak with residents and the people who visit them to find out their experience of the service,
- talk with staff and management to find out how they plan, deliver and monitor the care and support services that are provided to people who live in the centre,
- observe practice and daily life to see if it reflects what people tell us,
- review documents to see if appropriate records are kept and that they reflect practice and what people tell us.

In order to summarise our inspection findings and to describe how well a service is doing, we group and report on the regulations under two dimensions of:

1. Capacity and capability of the service:

This section describes the leadership and management of the centre and how effective it is in ensuring that a good quality and safe service is being provided. It outlines how people who work in the centre are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service.

2. Quality and safety of the service:

This section describes the care and support people receive and if it was of a good quality and ensured people were safe. It includes information about the care and supports available for people and the environment in which they live.

A full list of all regulations and the dimension they are reported under can be seen in Appendix 1.

This inspection was carried out during the following times:

| Date | Times of Inspection | Inspector | Role |
|-----------------------|-------------------------|-------------------|------|
| Thursday 17 July 2025 | 10:30hrs to 15:30hrs | Catherine Sweeney | Lead |

What residents told us and what inspectors observed

This inspection was scheduled on a day when the designated centre was facilitating a day care service in the communal area of the centre, known as Seven Springs. This area had been extended since the last inspection to include a large activity room, called the Avondale room. A large day room called the Four Seasons room was also used as a communal activity and dining area. Both of these communal rooms were observed to be used by both residents of the designated centre and the attendees of the day care service during the day of this inspection.

During the course of this inspection, the inspector observed the activities and facilities for occupation for all residents in the designated centre, and also observed the lunch-time meal service in the Four Seasons dining room and in the four care units of the centre. Resident feedback in relation to the provision of activities, the quality and choice of food, the staff in the centre and the operation of the day care service within the designated centre was overwhelmingly positive. Residents told the inspector that ' they really enjoyed their life in the centre' and that 'there was always something interesting or fun going on'.

On arrival to the centre the inspector observed a group of 10 residents in the Four Seasons room preparing and baking cakes for their tea time. Residents were observed being actively engaged and interested in the activity. Another large group of residents and day care service attendees were attending a prayer service in the Avondale room. Following these activities, both groups attended the Four Seasons room and were observed to be enjoying each others company. One resident told the inspector that 'it was lovely to be able to meet and catch up with neighbours and friends who attended the day care service'.

The inspector observed that activities were facilitated for all residents including those who chose to remain on their care units during the day. Residents who spoke with the inspector confirmed that they were informed of daily activities and offered choice in relation to how they would like to spend their day. Residents also confirmed that they were given the option to attend the day care service. Posters were displayed on notice boards at reception, and on each unit, inviting residents to the day service, if they wished.

Staff interaction with residents was observed to be person-centred and respectful. Residents reported that staff were 'very good' and were familiar with their likes and dislikes. Staff were familiar with residents daily routines and were observed to encourage and support residents to participate in the activity of their choice. One resident told the inspector that their diary was full and that she was so busy it was hard to fit in all the things she wanted to do.

Some residents, who chose not to participate in the organised activities, were observed to be engaged in their own activity such as reading their newspaper or watching television. Other residents were getting their hair done in the centre's hair

salon. Overall, the atmosphere in the centre was vibrant and warm. Residents, staff members and visitors greeted each other by name and appeared to be familiar with each other and to enjoy each others company. One resident told the inspector that the people in the centre made it 'feel like home'.

The care environment was observed to be clean and well maintained. Residents spoken with were happy with how their rooms were cleaned. Many resident bedrooms were observed to be decorated with items of personal significance to the resident such as photos, and ornaments. A decoration project was ongoing in the centre with three of the four units decorated in a person-centred and homely style, through the use of murals and objects of interest, that added colour and texture to the environment.

The next two sections of the report present the findings of this inspection in relation to the governance and management arrangements in place in the centre and how these arrangements impacted on the quality and safety of the service being delivered.

Capacity and capability

This was a one day, unannounced inspection carried out to monitor compliance with the Health Act 2007 (Care and Welfare of Residents in Designated Centre for Older People) Regulations 2013 (as amended). The inspector also followed up on the actions taken by the provider to address issues identified on the last inspection of the centre in November 2024. The registered provider had submitted an application to vary a condition of the registration of the centre in relation to extending the provision of day care services within the centre. The detail of this application was reviewed on this inspection.

This inspection found that the registered provider had taken the required action to address issues of non-compliance identified on a previous inspection of the centre. Improvements were noted in the layout of the premises, the upholding of residents' rights, documentation of resident care plans and the contracts of care for all residents.

A previous inspection found that residents of the designated centre were restricted in relation to the use of some communal space in the centre at times when the centre was being used to facilitate day care services. The restrictions included reduced access to dining areas and restricted choice in relation to some activities. As a result, condition 1 of the registration of the centre was updated, limiting the facilitation of day care services to two days per week, for a maximum of 14 people. The registered provider had submitted an application to vary this condition to allow the provision of day, five days per week for up to a maximum of 16 people. This inspection found that the issues relating to residents' rights had been addressed to the satisfaction of the residents in the centre. A large communal activities room had been added to the Seven Springs area of the centre. The addition of this room had

enabled the people from the day care service to attend without restricting or impacting on the residents in the centre. Day service users were invited to join in the activities scheduled for residents, and also joined residents for their meals in the large Four Seasons room. Likewise, residents were invited to join with the day care attendees for activities of interest to them.

The registered provider of this centre is the Health Service Executive. A regional management support team is in place and provides clinical and managerial oversight of the service. Within the centre, there is a management structure with clear lines of accountability and responsibility. A person in charge was supported by two assistant directors of nursing and a team of clinical nurse managers. Members of the nurse management team were rostered at night and at weekends to ensure effective oversight and supervision of care.

The registered provider had effective systems of management in place to ensure a safe and consistent service. Staff meeting records evidenced effective communication in relation to risk, quality improvement plans and adverse incidents. There was a system in place to record all adverse incidents in the centre including multidisciplinary meetings.

There were adequate levels of staff available to meet the assessed needs of the residents. Staff demonstrated good knowledge of the residents' needs and were observed to be supervised and supported by the nursing management team.

The registered provider had taken action to ensure that each resident in the centre had a contract of care that met the requirements of the regulations.

A review of the management of complaints found that complaints were managed in line with regulatory requirements.

Regulation 15: Staffing

The designated centre had adequate staffing levels to meet the assessed needs of the residents and for the size and layout of the building.

Judgment: Compliant

Regulation 23: Governance and management

The registered provider ensured that the centre was adequately resourced. The organisational structure of the centre was well organised with the management staff within the centre supported by a regional management team. The roles and

responsibilities of the management team were clear and there was clear pathways for escalating risk and issues of concern.

The registered provider had management systems in place to ensure that the service provided was safe and effectively monitored.

Judgment: Compliant

Regulation 24: Contract for the provision of services

The registered provider had a contract of care for each resident in the centre, including short stay residents. This was a completed action from a previous inspection.

Judgment: Compliant

Regulation 34: Complaints procedure

The registered provider had a system in place to manage complaints. All complaints and dissatisfaction with the service was recorded and managed in line with the centre's own complaints management policy. Residents spoken with confirmed that they were aware of the complaints process. There was a low level of complaints recorded.

Judgment: Compliant

Quality and safety

This inspection found that residents in the centre received a high standard of person-centred care in a care environment that met their needs and maintained their safety. Residents' rights were found to be upheld and respected. Residents were consulted with, and participated in, the organisation of the centre, particularly in relation to the day care service.

An inspection of the centre in November 2024 found that the centre had inadequate space available to residents for dining, particularly at times when the designated centre was facilitating a day care service in the Silver Springs area of the centre. During this time residents were also restricted from the Four Seasons room when the day care service was operational. This inspection found that communal space in the Seven Springs area of the centre had been extended to include an activities

room, facilitating an increase in both communal and dining space in the Four Seasons room. The inspector observed that residents from every unit of the centre were now offered choice as to where to spend their day, where to participate in activities and where to have their meals. There was adequate space provided for dining within each unit, resident bedrooms, or the Seven Springs area of the centre. Residents also had a variety of activities to choose from, including any of the activities supported by the day care service.

The inspector observed the lunchtime meal service within the Four Seasons room, and on the four units in the centre. The chef was observed attending the Four Seasons room in the late morning to confirm the number of residents who would be attending dining room for lunch. Residents were offered a varied menu and meals were served in an appetising manner. Residents who required assistance received care in a discreet and respectful manner. The atmosphere during the mealtime on the units and in the Four Seasons room was observed to be relaxed, comfortable and promoted social engagement between residents and staff, and day care attendees.

Residents' care was recorded on an electronic documentation system. Each resident had a comprehensive assessment of their health and social care needs completed on admission to the centre, which was updated as required and in line with regulatory requirements. Detailed, holistic care plans were in place and directed staff to provide care in line with residents assessed needs. Care plans were reviewed and updated as required.

Residents had access to a high standard of evidence based nursing care, in line with their care plans. Resident had access to medical review and support in addition to professional expertise from allied health care professionals, in line with their assessed needs.

Residents' rights were found to be upheld and respected. Residents had access to independent advocacy services to support independent decision-making. The registered provider provided facilities for recreation and occupation for all residents. Residents told the inspector that they enjoyed the activity programme and some reported that their 'lives were full'.

Regulation 17: Premises

The registered provider had reviewed the availability of dining space for residents since the last inspection. Residents were now offered a variety of dining spaces for their meals. Residents were facilitated to attend the dining room space in the Four Seasons dining area, increasing the space available in each unit for residents who chose to have their meals there.

Judgment: Compliant

Regulation 18: Food and nutrition

Residents had access to food and drinks that appeared wholesome and nutritious. Residents' feedback in relation to the choice, variety and quality of food was positive. The lunchtime meal service was observed to be a social and enjoyable occasion for residents.

There was adequate levels of staff available to assist residents with their meals. Residents' nutritional risks were appropriately assessed, managed and monitored.

Judgment: Compliant

Regulation 5: Individual assessment and care plan

A review of a sample of residents' care plans found that each resident had an individual assessment of their health and social care needs completed. These assessments were used to inform and develop a holistic and person-centred care plan. Care plans reviewed contained the information required to guide staff to deliver care that was aligned to residents' individual needs and preferences. Care plans were observed to be reviewed and updated when residents needs changed.

Judgment: Compliant

Regulation 6: Health care

Residents had access to health and social care support including physiotherapy, occupational therapy, dietitian, and speech and language through a system of referral. Recommendations from allied health professionals were observed to be integrated into a resident's care plan.

Judgment: Compliant

Regulation 9: Residents' rights

Since the previous inspection, the registered provider had taken action to ensure that the rights of each resident in the centre is upheld with regard to choice. Residents were supported and encouraged to use all communal areas of the designated centre, if they wished. Residents were offered the opportunity to attend

the activities associated with the day care service that was held in the centre twice a week. Residents informed that inspector that they very much enjoyed these days.

Residents could also choose where they had their meals. The inspector observed staff offering residents on each unit an opportunity to attend the Four Seasons room for meals and activities throughout the course of the inspection.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013 (as amended), and the Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2015 (as amended) and the regulations considered on this inspection were:

| Regulation Title | Judgment |
|---|-----------|
| Capacity and capability | |
| Regulation 15: Staffing | Compliant |
| Regulation 23: Governance and management | Compliant |
| Regulation 24: Contract for the provision of services | Compliant |
| Regulation 34: Complaints procedure | Compliant |
| Quality and safety | |
| Regulation 17: Premises | Compliant |
| Regulation 18: Food and nutrition | Compliant |
| Regulation 5: Individual assessment and care plan | Compliant |
| Regulation 6: Health care | Compliant |
| Regulation 9: Residents' rights | Compliant |