

**Health Information and Quality Authority
Regulation Directorate**

**Compliance Monitoring Inspection report
Designated Centres under Health Act 2007,
as amended**



Centre name:	Ballinamore House Nursing Home
Centre ID:	OSV-0000317
Centre address:	Ballinamore, Kiltimagh, Mayo.
Telephone number:	094 938 1919
Email address:	ballinamorehouse@hotmail.com
Type of centre:	A Nursing Home as per Health (Nursing Homes) Act 1990
Registered provider:	Raicam Holdings Limited
Provider Nominee:	Sharon O'Boyle
Lead inspector:	Mary McCann
Support inspector(s):	Brid McGoldrick
Type of inspection	Announced
Number of residents on the date of inspection:	33
Number of vacancies on the date of inspection:	9

About monitoring of compliance

The purpose of regulation in relation to designated centres is to safeguard vulnerable people of any age who are receiving residential care services. Regulation provides assurance to the public that people living in a designated centre are receiving a service that meets the requirements of quality standards which are underpinned by regulations. This process also seeks to ensure that the health, wellbeing and quality of life of people in residential care is promoted and protected. Regulation also has an important role in driving continuous improvement so that residents have better, safer lives.

The Health Information and Quality Authority has, among its functions under law, responsibility to regulate the quality of service provided in designated centres for children, dependent people and people with disabilities.

Regulation has two aspects:

- Registration: under Section 46(1) of the Health Act 2007 any person carrying on the business of a designated centre can only do so if the centre is registered under this Act and the person is its registered provider.
- Monitoring of compliance: the purpose of monitoring is to gather evidence on which to make judgments about the ongoing fitness of the registered provider and the provider's compliance with the requirements and conditions of his/her registration.

Monitoring inspections take place to assess continuing compliance with the regulations and standards. They can be announced or unannounced, at any time of day or night, and take place:

- to monitor compliance with regulations and standards
- to carry out thematic inspections in respect of specific outcomes
- following a change in circumstances; for example, following a notification to the Health Information and Quality Authority's Regulation Directorate that a provider has appointed a new person in charge
- arising from a number of events including information affecting the safety or wellbeing of residents.

The findings of all monitoring inspections are set out under a maximum of 18 outcome statements. The outcomes inspected against are dependent on the purpose of the inspection. In contrast, thematic inspections focus in detail on one or more outcomes. This focused approach facilitates services to continuously improve and achieve improved outcomes for residents of designated centres.

Please note the definition of the following term used in reports: responsive behaviour (how people with dementia or other conditions may communicate or express their physical discomfort, or discomfort with their social or physical environment).

Compliance with the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2015 and the National Standards for Residential Care Settings for Older People in Ireland.

This inspection report sets out the findings of a monitoring inspection, the purpose of which was following an application to vary registration conditions. This monitoring inspection was announced and took place over 1 day(s).

The inspection took place over the following dates and times

From: 24 May 2017 09:30 To: 24 May 2017 12:30

The table below sets out the outcomes that were inspected against on this inspection.

Outcome	Our Judgment
Outcome 01: Statement of Purpose	Substantially Compliant
Outcome 08: Health and Safety and Risk Management	Non Compliant - Moderate
Outcome 12: Safe and Suitable Premises	Non Compliant - Moderate
Outcome 16: Residents' Rights, Dignity and Consultation	Non Compliant - Moderate
Outcome 17: Residents' clothing and personal property and possessions	Compliant

Summary of findings from this inspection

This announced inspection was conducted to inform the application to vary condition 9 of the current registration of this centre.

The last inspection was an unannounced monitoring inspection undertaken on 24 and 25 January 2017. Inspectors reviewed some of the actions from the previous inspection. These are discussed throughout the report.

Inspectors found that the design and layout of the premises did not meet the individual and collective needs of residents with regard to privacy and dignity. This is discussed further throughout the report. The provider has stated in the application to vary that the extension and renovation work on the premises is proposed to be completed by the 1 January 2021, approximately 5.5 years after the date set out in Condition 9 of the current registration of this centre (1 July 2015).

The action plan at the end of the report contains the actions required to ensure compliance with the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013 and the National Standards for Residential Care Settings for Older People in Ireland 2016.

Some of the action plan responses submitted by the provider did not satisfactorily address all of the failings identified in the report. As some of the action plan is not

acceptable, HIQA has taken the decision not to include these responses in the published report.

Compliance with Section 41(1)(c) of the Health Act 2007 and with the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2015 and the National Standards for Residential Care Settings for Older People in Ireland.

Outcome 01: Statement of Purpose

There is a written statement of purpose that accurately describes the service that is provided in the centre. The services and facilities outlined in the Statement of Purpose, and the manner in which care is provided, reflect the diverse needs of residents.

Theme:

Governance, Leadership and Management

Outstanding requirement(s) from previous inspection(s):

The action(s) required from the previous inspection were satisfactorily implemented.

Findings:

The centre's Statement of Purpose dated April 2017 sets out the aims and objectives of the service. This requires review to detail the current configuration of the centre and ensure that it contains all of the information contained in schedule 1 of the regulations.

Judgment:

Substantially Compliant

Outcome 08: Health and Safety and Risk Management

The health and safety of residents, visitors and staff is promoted and protected.

Theme:

Safe care and support

Outstanding requirement(s) from previous inspection(s):

Some action(s) required from the previous inspection were not satisfactorily implemented.

Findings:

The current configuration and close proximity of some of the beds raises concern from an infection control perspective.

Wardrobes were not secured to the wall in communal rooms and posed a risk of toppling over.

Fire drill records were reviewed by the inspectors. Fire drills were occurring at regular intervals and the documentation with regard to the fire drills had been improved since the last inspection. One zone on the first floor has a capacity to accommodate 14 residents. No simulated night time fire drill had been completed for this zone. The

provider stated that a specialist fire trainer is due to attend the centre in June 2017 to complete a simulated night fire drill of this zone.

The action with regard to completing neurological observations post an un-witnessed fall was addressed, and staff had been informed by the provider of the requirement to complete same.

Judgment:

Non Compliant - Moderate

Outcome 12: Safe and Suitable Premises

The location, design and layout of the centre is suitable for its stated purpose and meets residents' individual and collective needs in a comfortable and homely way. The premises, having regard to the needs of the residents, conform to the matters set out in Schedule 6 of the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013.

Theme:

Effective care and support

Outstanding requirement(s) from previous inspection(s):

Some action(s) required from the previous inspection were not satisfactorily implemented.

Findings:

The premises have been the subject of documented on-going non-compliances with the (Care and Welfare of Residents in Designated Centre for Older People) Regulations 2013 (as amended) regarding the provision of multi-occupancy bedrooms and the negative impact with regard to privacy and dignity that this configuration has on residents.

The judgment of the inspectors was that the four bedded room on the ground floor, in its current configuration and layout, is not suitable to meet the needs of four high dependency residents as it infringed negatively on the privacy and dignity of residents living in this room. This room measures approximately 37 square metres.

The nearest toilet/shower/bathroom to bedroom one is located 11.5 metres away. Residents in this room are high dependency, with poor or no mobility and have high hygiene needs due to their dependency. If they need to be assisted to the toilet/shower/bathroom, they must pass through a busy area where there is an entrance to a sitting room and clinical room on the right-hand side and a door leading to the main foyer and onto the reception area and the entrance on the left-hand side. Furthermore, the door into the sitting room has to be closed while residents are being transferred. This impinges on the independence and rights of residents in the sitting room. Additionally, there is confined access to the shower and toilet as the external door to the shower and toilets is 28 inches wide.

There was a sink available in the room to the left on entry; however, if a resident is using a specialist chair or a mobility aid and if the curtains were drawn around the beds,

this would be difficult to access due to the location of two beds.

Bedrooms three, four, five six and seven are located on the first floor in close proximity to each other. (Bedroom six is a twin room). Only residents who have been assessed as requiring the assistance of only one person may be accommodated on this floor, as detailed in a condition of registration of this centre. Consequently, more mobile residents are accommodated on this floor.

Two of the four-bedded multi-occupancy rooms on the first floor are located approximately 15 metres away from the nearest shower and four metres to the nearest toilet. The other four-bedded multi occupancy room was located 11.5 metres to the nearest shower and toilet. Travelling this distance through an open area which has a sofa for residents use poses a challenge to staff in protecting the privacy and dignity of residents. All three rooms are approximately 37 metres in size.

Bedroom seven is a three-bedded room. The current layout of this bedroom, although meeting the minimum required space per person, does not comply with protecting the privacy and dignity of three residents. The room provides an insufficient amount of private space for three residents. Each bed had screening in place which extended completely around the bed spaces; however, the screening around the bed on the right on entry provided inadequate space to maintain the residents' privacy and dignity as staff would not have enough space to assist the resident with personal hygiene needs. The resident also does not have enough space behind their privacy screening to sit on a chair in private, which would assist the resident in dressing and, therefore, maintain their independence.

There was a sink available in this room; however, this was difficult for one of the residents to access if the other two residents had their privacy curtains drawn. The room was well lit, with two windows providing natural light. All three residents had access to a call bell above their bed and an over bed light.

Judgment:

Non Compliant - Moderate

Outcome 16: Residents' Rights, Dignity and Consultation

Residents are consulted with and participate in the organisation of the centre. Each resident's privacy and dignity is respected, including receiving visitors in private. He/she is facilitated to communicate and enabled to exercise choice and control over his/her life and to maximise his/her independence. Each resident has opportunities to participate in meaningful activities, appropriate to his or her interests and preferences.

Theme:

Person-centred care and support

Outstanding requirement(s) from previous inspection(s):

No actions were required from the previous inspection.

Findings:

The inspectors judged that the layout of some rooms restricted how equipment such as a hoist could be used and did not facilitate staff to provide adequate privacy when such equipment was in use, particularly where beds were placed against a wall.

In one room, for example, three of the four beds were positioned with one side against a wall, thereby making one side of the bed inaccessible for staff. Additionally, if residents have a disability such as a right sided weakness, this could impede them from being able to access drinks or other items, which does not support their dignity and independence. While there was screening around each bed, the space behind the curtains was too confined for staff to assist less able residents in a dignified way. Space around some bedsides was not personalised, although some space was available and not fully utilised.

There was a sink available in the room to the left on entry but this would be difficult to access due to the location of two beds if a resident was using a specialist chair or a mobility aid and if the curtains were drawn around the beds. The lack of floor space available on the left of the room on entry between the two beds resulted in residents individual wardrobes being located across the room opposite their beds, which was not readily accessible to residents. There was insufficient space for a resident in this room to receive a visitor by their bed and have a private conversation. Some residents who may spend long periods of time in bed did not have access to a television in this room.

When using this room, consideration needs to be given to the number of residents that can be accommodated while ensuring that the ethos of the centre and the privacy and dignity of residents is respected, as stated in the Statement of Purpose.

Judgment:

Non Compliant - Moderate

Outcome 17: Residents' clothing and personal property and possessions
Adequate space is provided for residents' personal possessions. Residents can appropriately use and store their own clothes. There are arrangements in place for regular laundering of linen and clothing, and the safe return of clothes to residents.

Theme:

Person-centred care and support

Outstanding requirement(s) from previous inspection(s):

The action(s) required from the previous inspection were satisfactorily implemented.

Findings:

The provider representative has reviewed the arrangements in the centre with regard to managing residents' finances.

The provider representative manages one resident's finances and transparent procedures are in place regarding these residents' finances, with receipts available for any monies spent and two signatures required for all transactions. The resident is provided with the surplus funds for personal use on a weekly basis. No monies are kept by the provider.

Judgment: Compliant

Closing the Visit

At the close of the inspection a feedback meeting was held to report on the inspection findings.

Acknowledgements

The inspector wishes to acknowledge the cooperation and assistance of all the people who participated in the inspection.

Report Compiled by:

Mary McCann
Inspector of Social Services
Regulation Directorate
Health Information and Quality Authority

Health Information and Quality Authority Regulation Directorate

Action Plan



Provider's response to inspection report¹

Centre name:	Ballinamore House Nursing Home
Centre ID:	OSV-0000317
Date of inspection:	24/05/2017
Date of response:	07/09/2017

Requirements

This section sets out the actions that must be taken by the provider or person in charge to ensure compliance with the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013 and the National Quality Standards for Residential Care Settings for Older People in Ireland.

All registered providers should take note that failure to fulfil your legal obligations and/or failure to implement appropriate and timely action to address the non-compliances identified in this action plan may result in enforcement action and/or prosecution, pursuant to the Health Act 2007, as amended, and Regulations made thereunder.

Outcome 01: Statement of Purpose

Theme:

Governance, Leadership and Management

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

The centre's Statement of Purpose dated April 2017 requires review to detail the current configuration of the centre and ensure that it contains all of the information contained in schedule 1 of the regulations.

1. Action Required:

Under Regulation 03(1) you are required to: Prepare a statement of purpose containing

¹ The Authority reserves the right to edit responses received for reasons including: clarity; completeness; and, compliance with legal norms.

the information set out in Schedule 1 of the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013.

Please state the actions you have taken or are planning to take:

We have renumbered the previous VHI area and this area is now part of the bottom corridor and is listed this way now in our statement of purpose.

Proposed Timescale: 07/09/2017

Outcome 08: Health and Safety and Risk Management

Theme:

Safe care and support

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

The current configuration and close proximity of some of the beds raises concern from an infection control perspective.

2. Action Required:

Under Regulation 27 you are required to: Ensure that procedures, consistent with the standards for the prevention and control of healthcare associated infections published by the Authority are implemented by staff.

Please state the actions you have taken or are planning to take:

All staff have attended training in infection control. The action plan submitted by the provider, for this action was not acceptable to HIQA, as it did not satisfactorily address all of the failings identified in this outcome of the report.

Proposed Timescale: 07/09/2017

Theme:

Safe care and support

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

One zone on the first floor has a capacity to accommodate 14 residents. No simulated night time fire drill had been completed for this zone.

3. Action Required:

Under Regulation 28(1)(e) you are required to: Ensure, by means of fire safety management and fire drills at suitable intervals, that the persons working at the designated centre and residents are aware of the procedure to be followed in the case of fire.

Please state the actions you have taken or are planning to take:

All necessary paperwork has been forwarded to HIQA regarding both a night time

evacuation carried out in this area and a day time training session with all staff with an outside agent in this same area was completed on the 20th of June 2017. The registered provider can confirm that in our ongoing fire drill practises within the building that this area will continue to be addressed.

Proposed Timescale: 17/07/2017

Outcome 12: Safe and Suitable Premises

Theme:

Effective care and support

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

The location of the toilets, shower and bathroom on the ground floor pose a challenge to protecting the privacy and dignity of dependent residents residing in some rooms.

There is confined access to the shower and toilet near room 1t as the external door to the shower and toilets is 28 inches wide.

There was a sink available in the room to the left on entry; however, if a resident is using a specialist chair or a mobility aid and if the curtains were drawn around the beds, this would be difficult to access due to the location of two beds.

Two of the four-bedded multi-occupancy rooms on the first floor are located approximately 15 metres away from the nearest shower and four metres to the nearest toilet. The other four-bedded multi occupancy room was located 11.5 metres to the nearest shower and toilet.

Bedroom seven provides an insufficient amount of private space for three residents.

Screening around the bed on the right on entry provided inadequate space to maintain the residents' privacy and dignity as staff would not have enough space to assist the resident with personal hygiene needs. The resident also does not have enough space behind their privacy screening to sit on a chair in private, which would assist the resident in dressing and, therefore, maintain their independence.

There was a sink available in this room; however, this was difficult for one of the residents to access if the other two residents had their privacy curtains drawn. The room was well lit, with two windows providing natural light. All three residents had access to a call bell above their bed and an over bed light.

4. Action Required:

Under Regulation 17(2) you are required to: Provide premises which conform to the matters set out in Schedule 6, having regard to the needs of the residents of the designated centre.

Please state the actions you have taken or are planning to take:

An application to vary Condition 9 of the registration of this centre is in process. The action plan submitted by the provider, for this action was not acceptable to HIQA, as it did not satisfactorily address all of the failings identified in this outcome of the report.

Proposed Timescale:

Outcome 16: Residents' Rights, Dignity and Consultation

Theme:

Person-centred care and support

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

Some residents who may spend long periods of time in bed did not have access to a television in this room.

5. Action Required:

Under Regulation 09(3)(c)(ii) you are required to: Ensure that each resident has access to radio, television, newspapers and other media.

Please state the actions you have taken or are planning to take:

All residents have access to radio, television, newspaper and other media in the Nursing Home in the sitting rooms.

Some aspects of the action plan submitted by the provider, for this action was not acceptable to HIQA, as it did not satisfactorily address all of the failings identified in this outcome of the report.

Proposed Timescale: 07/09/2017

Theme:

Person-centred care and support

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

Bedroom seven provides an insufficient amount of private space for three residents. Each bed had screening in place which extended completely around the bed spaces. However, the screening around the bed on the right on entry provided inadequate space to maintain the residents' privacy and dignity as staff would not have enough space to assist the resident with personal hygiene needs.

6. Action Required:

Under Regulation 09(3)(b) you are required to: Ensure that each resident may undertake personal activities in private.

Please state the actions you have taken or are planning to take:

An application to vary Condition 9 of the registration of this centre is in process. The action plan submitted by the provider, for this action was not acceptable to HIQA, as it did not satisfactorily address all of the failings identified in this outcome of the report.

Proposed Timescale:

Theme:

Person-centred care and support

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

There was insufficient space for a resident in this room to receive a resident by their bed and have a private conversation.

7. Action Required:

Under Regulation 11(1) you are required to: Make arrangements for a resident to receive visitors.

Please state the actions you have taken or are planning to take:

An application to vary Condition 9 of the registration of this centre is in process. The action plan submitted by the provider, for this action was not acceptable to HIQA, as it did not satisfactorily address all of the failings identified in this outcome of the report.

Proposed Timescale: