

**Health Information and Quality Authority
Regulation Directorate**

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



Centre name:	Droimnin Nursing Home
Centre ID:	OSV-0000702
Centre address:	Brockley Park, Stradbally, Laois.
Telephone number:	057 864 1002
Email address:	Gearoid@brookhaven.ie
Type of centre:	A Nursing Home as per Health (Nursing Homes) Act 1990
Registered provider:	Droimnin Nursing Home Limited
Provider Nominee:	Gearoid (Gerard) Brennan
Lead inspector:	Conor Brady
Support inspector(s):	None
Type of inspection	Unannounced
Number of residents on the date of inspection:	65
Number of vacancies on the date of inspection:	0

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.

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.

This inspection report sets out the findings of a monitoring inspection, the purpose of which was to monitor compliance with specific outcomes as part of a thematic inspection. This monitoring inspection was un-announced and took place over 1 day(s).

The inspection took place over the following dates and times

From:

14 August 2014 07:30

To:

14 August 2014 14:30

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

Outcome 14: End of Life Care
Outcome 15: Food and Nutrition

Summary of findings from this inspection

This inspection report sets out the findings of a thematic inspection which focused on two specific outcomes, End of Life Care and Food and Nutrition. In preparation for this thematic inspection providers were invited to attend an information seminar, received evidence-based guidance and undertook a self-assessment in relation to both outcomes.

The inspector analysed surveys which relatives submitted to the Health Information and Quality Authority (the Authority) prior to the inspection. The inspector met residents and staff and observed practice on inspection. Documents were also reviewed such as policies, procedures, training records, staff rosters, resident information and resident care plans. The inspector met and spoke with a number of residents over the course of the inspection to discuss the areas of End of Life Care and Food and Nutrition.

The person in charge who completed the provider self-assessment tools identified a minor non compliance regarding End of Life Care and compliance under Food and Nutrition. The person in charge had identified timely actions within the self-assessment questionnaire to ensure that the designated centre continued to move towards full compliance in End of Life Care. These actions predominantly related to policy development and implementation.

On the day of inspection, the inspector found the centre to be compliant under both of the outcomes inspected against (End of Life Care and Food and Nutrition) with the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013 (as amended) and the National Quality Standards for Residential Care Settings for Older People in Ireland. There were 65 residents present on inspection day and two residents were in hospital.

Further details regarding these outcomes are discussed in the main body of the report.

Section 41(1)(c) of the Health Act 2007. 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.

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.

Theme:

Person-centred care and support

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

No actions were required from the previous inspection.

Findings:

Overall, the inspector was satisfied that residents received a good standard of end-of-life care which was meeting individuals physical, emotional, social and spiritual needs and was very respectful of residents autonomy. The inspector was informed that one resident was at end-of-life stage at time of inspection and the inspector reviewed this resident's care plan.

The inspector was satisfied that end-of-life care was delivered in a person-centred manner and respected the values and preferences of each individual resident. There was a policy in place regarding end of life care which was operational and met the requirements of the Regulations. All staff spoken to were appropriately knowledgeable regarding this policy and demonstrated a good understanding of the delivery of quality end-of-life care. The person in charge was very familiar with best practice guidelines regarding end-of-life care and clearly articulated the importance of delivering quality care to residents and families at end of life stage.

The inspector reviewed a number of end of life care plans on resident's files. The person in charge highlighted that basic information pertaining to end of life wishes and preferences was captured on admission and this information was supplemented as the professional relationship developed with residents. The inspector noted evidence of the incremental detail gathering for end of life care planning by staff and the appropriate recording of same. For example, as residents approached end of life the level of detail in residents care plans was more comprehensive and robust and gave clear guidelines to staff as to residents and family wishes. The inspector found evidence that the designated centre have appropriate end-of-life resources in terms of end of life material such as altar material, religious material, candles and access to local religious faiths. The person in charge highlighted the importance of sensitivity for the end of life needs of all residents irrespective of religious faith. Staff members spoken to highlighted good knowledge of professional responsibility and sensitivity when residents were at end of life stage. The inspector found that single occupancy rooms were available for residents and saw evidence whereby family members were supported to stay with residents overnight. The inspector also saw that the provider had appropriate procedures and

bags for the respectful return of resident's personal possessions.

The inspector found that staff demonstrated good awareness of best practice guidance regarding end-of-life care, symptom management and facilitating residents to plan for the future regarding their end-of-life care. The inspector noted continuous engagement and liaising with GP and palliative care services regarding symptom control and pain management. Staff spoke to the inspector about the importance of continuous pain management assessment. The inspector noted two staff nurses had recently completed European Certification in Palliative Care training.

The inspector reviewed relative feedback who had experienced a family member/friend pass away within the designated centre. This feedback was very positive and in particular commended the professionalism and sensitive support provided by the staff within the designated centre. Relatives stated they were made feel welcome and felt very well supported by staff during their bereavement. The inspector noted information on professional support offered/available to families (e.g. bereavement information, death registration information) and was informed that the designated centre also provided a funeral cortège when a residents remains were leaving. The person in charge showed a detailed leaflet compiled that offered assistance to family members when dealing with a bereavement. The inspector noted a high number of compliments left by families regarding the high standard of care delivered to their family members at end of life stage. In particular staff attention to detail was highlighted by recently bereaved families.

The inspector spoke with a number of residents throughout the inspection about the subject of their end-of-life care. Many residents chose not to speak to the inspector about this. However a number of residents highlighted it was important that they had their 'affairs in order' and highlighted that staff were very approachable and they had no issues speaking to staff about this when required. Over the past two years the majority of residents who died chose to receive end-of-life care within the centre as opposed to transfer to an acute hospital. The person in charge spoke about the efforts to ensure residents were supported fully to end their lives at a location whereby residents had chosen. In reviewing the care planning information of a recently deceased resident the inspector found good evidence of ongoing review and updating of end-of-life care planning up to the point of death. In addition, the inspector saw evidence of the implementation and facilitation of residents wishes following end of life. For example, funeral arrangements and family involvement.

The inspector found staff training records and the person in charge highlighted that while all staff had not undergone end of life training there was a training plan in place to address this. Staff spoken with had a good understanding of the policy on end of life care and related practices. The person in charge demonstrated a strong understanding and commitment to ensuring continued quality service delivery regarding end of life care.

Judgment:
Compliant

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 discrete and sensitive manner.

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 inspector found that residents received a varied and nutritious diet that was tailored to meet individual needs and preferences. There was a nutritional status and management policy (2014) in place which was centre specific and provided detailed guidance to staff. The inspector observed food that was properly prepared, cooked and served by staff members that was wholesome and nutritious. The inspector noted assistance was offered to residents who required it in a discrete and sensitive manner. Residents informed the inspector throughout the inspection that they were very happy with the food in the designated centre.

The inspector noted residents had appropriate access to speech and language therapy (SALT) assessment and a comprehensive dietician/nurse led programme that was operational regarding residents nutritional and hydration assessment. The inspector noted appropriate access to G.P., dietician, dental, diabetic and diagnostic services where/when required.

The inspector found a chef employed within the centre who was continuously consulting with the residents, staff and specialist professionals (SALT and dietician) to ensure a suitable and varied menu was available to all residents. The inspector found the chef to be appropriately aware of residents needs and observed good practice within the kitchen. The inspector noted appropriate stocks of fresh produce, meats, vegetables and dried and baked goods. The chef was preparing vegetable soup at inspection time and the inspector noted all foods and drinks readily available for residents were appropriate to residents needs.

All residents dietary and nutritional support needs were compiled as part of the residents' care plan. Resident's weights were closely monitored with appropriate assessments conducted to ensure residents nutritional and hydration needs were met. The inspector found that the person in charge and staff were very aware regarding the review of residents on special diets and with special dietary/assistance requirements. For example residents on supplements and residents requiring fortification. The inspector noted fresh drinking water, cordial drinks and fresh fruit available throughout the designated centre.

The inspector observed breakfast and lunch and found nursing and care staff monitored and supported the meal times appropriately. Breakfast was a relaxed experience whereby residents received breakfast in their rooms. The inspector noted that breakfast

was always provided in resident's rooms and examined resident choice in this area. The inspector was informed that if residents specifically chose to eat breakfast in a dining room this could be facilitated. However all of the residents spoken to informed the inspector that they preferred breakfast in their rooms. The inspector noted a good choice and each resident was facilitated on an individual basis to choose the food they wanted. The inspector noted staff demonstrated a good knowledge of individual resident's preferences. For example, whether a resident liked particular cereal or breads. There was a good choice of porridge, cereals, breads and drinks freely available. There was sufficient staff support available at meal-times and the inspector noted the staff supporting residents who required same (as per residents care plans) were very professional and sensitive to residents needs at all times. The inspector observed staff continually checking their individual updated lists of all residents dietary needs to ensure care planning was adhered to at all times during dining periods.

Lunchtime was unhurried, and was a very social dining experience for residents. The inspector joined a number of residents for lunch who were very complimentary about the food, the menu and the staff. The dining rooms were clean and well presented with tables set thoughtfully with adequate cutlery, and a choice of water/milk served throughout the meal. There was choice available to all residents including those on soft or specialised diets. The residents informed the inspector that the food was always very good in the centre and that all special requests were facilitated. All residents spoken to were highly complimentary about the food they received and the staff members who supported them.

Drinks and snacks including plates of sandwiches and soup were available throughout the day and night if required. Homemade scones were also available for residents. One resident informed the inspector that she did baking within the designated centre as an activity and they would eat whatever was baked. The inspector noted the chef kept a record of resident's birthdays and special requests. For example, the chef told the inspector that a fresh cake would be prepared to celebrate resident's birthdays. Residents with diabetes and/or specific dietary needs, wishes and preferences were carefully recorded and communicated with the chef. The inspector found good staff attention to detail in terms of resident individual wishes and preferences. The inspector noted tea and coffee making facilities were available in the designated centre and residents and families were supported with same if required. The inspector saw that a summer barbeque for residents and families was taking place within the designated centre the day following inspection and the inspector saw preparation for same. A lot of the residents highlighted they were looking forward to this event to the inspector stating they enjoyed the food, music and dancing.

Food and Nutrition training had occurred in the centre for a number of staff who demonstrated and articulated good knowledge of how to provide quality care to residents regarding food and nutrition. The person in charge demonstrated a strong commitment to the continual management of this area.

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:

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