

**Health Information and Quality Authority  
Regulation Directorate**

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



<b>Centre name:</b>	Carna Nursing and Retirement Home
<b>Centre ID:</b>	ORG-0000398
<b>Centre address:</b>	Carna, Connemara, Galway.
<b>Telephone number:</b>	095 32854/ 32855/ 32739
<b>Email address:</b>	info@carnanursinghome.ie
<b>Type of centre:</b>	A Nursing Home as per Health (Nursing Homes) Act 1990
<b>Registered provider:</b>	Michael Casey and Sally Casey Partnership T/A Carna Nursing Home
<b>Provider Nominee:</b>	Michael Casey
<b>Person in charge:</b>	Imelda Julia Alexander
<b>Lead inspector:</b>	Jackie Warren
<b>Support inspector(s):</b>	None
<b>Type of inspection</b>	Unannounced
<b>Number of residents on the date of inspection:</b>	45
<b>Number of vacancies on the date of inspection:</b>	11

## **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 Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2009 (as amended) 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 following receipt of unsolicited information. This monitoring inspection was un-announced and took place over 1 day(s).

**The inspection took place over the following dates and times**

From: 20 May 2014 13:00 To: 20 May 2014 17:00

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

Outcome 09: Notification of Incidents
Outcome 11: Health and Social Care Needs
Outcome 13: Complaints procedures

**Summary of findings from this inspection**

The purpose of this monitoring inspection was to follow-up on information received by the authority in relation to management of behaviour that is challenging and complaints. The inspector also reviewed the management of incidents in the centre. During the inspection the inspector spoke with the provider and person in charge, residents and staff and reviewed practice and records in relation to management of behaviour that is challenging, complaints and incidents.

The inspector was satisfied that behavioural issues were well assessed and managed and that measures were in place to protect the safety and comfort of these and other residents. However, there was some improvement required to the recording of complaints and incidents.

**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 2009 (as amended) and the National Quality Standards for Residential Care Settings for Older People in Ireland.**

***Outcome 09: Notification of Incidents***

*A record of all incidents occurring in the designated centre is maintained and, where required, notified to the Chief Inspector.*

**Theme:**  
Safe Care and Support

**Outstanding requirement(s) from previous inspection:**  
No actions were required from the previous inspection.

**Findings:**

The recording of incidents required improvement. The inspector discussed the occurrence and notification of incidents with the person in charge and reviewed the incident record book. The person in charge could clearly describe details of incidents/events which had occurred and how they had been managed. However, one incident which the person in charge described had not been recorded in the incident record book as required.

**Judgement:**

Non Compliant - Moderate

**Outcome 11: Health and Social Care Needs**

*Each residents wellbeing and welfare is maintained by a high standard of evidence-based nursing care and appropriate medical and allied health care. Each resident has opportunities to participate in meaningful activities, appropriate to his or her interests and preferences. The arrangements to meet each residents assessed needs are set out in an individual care plan, that reflect his/her needs, interests and capacities, are drawn up with the involvement of the resident and reflect his/her changing needs and circumstances.*

**Theme:**

Effective Care and Support

**Findings:**

All aspects of health care were not reviewed on this inspection. The inspector reviewed the management of behaviours that were challenging and found that they were generally well managed.

Staff who spoke with the inspector could outline how they managed behavioural issues and described specific interventions which had been developed for individual residents. Occurrences of behavioural incidents were being recorded, although in different formats, in the sample of files viewed. Behavioural charts were in place for some residents to identify trends and triggers, while for other residents this information was recorded in narrative form in care plans. This information was used to develop calming strategies as required. Care plans viewed by the inspector contained guidance on techniques which could be used to calm a resident and events which triggered these behaviours. Staff told the inspector that the use of formal behavioural charts had commenced and was being introduced for all residents with behaviour that is challenging.

The inspector viewed the care plan of a resident with behaviour that was challenging. The resident's care plan had recently been reviewed in response to the resident's assessed needs and suitable medical review had been arranged. The person in charge had arranged a consultation with the psychiatry of later life team whose recommendations had also been used to inform the care plan.

Since the last inspection the provider and person in charge had arranged for training in

challenging behaviour for staff. Staff confirmed that they had attended this training and stated that it was informative and that they found the learning beneficial.

**Judgement:**

Compliant

***Outcome 13: Complaints procedures***

*The complaints of each resident, his/her family, advocate or representative, and visitors are listened to and acted upon and there is an effective appeals procedure.*

**Theme:**

Person-centred care and support

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

No actions were required from the previous inspection.

**Findings:**

The recording of complaints required some improvement. The person in charge told the inspector of a complaint which had been made to the management team and how it was investigated and managed. However, the complaint had not been recorded in the complaints register as required by the Regulations.

The inspector noted that complaints were generally well recorded with details of complaints, outcomes and satisfaction of complainants being recorded. The person in charge stated that she would ensure that any future complaints would be suitably recorded.

**Judgement:**

Non Compliant - Minor

**Closing the Visit**

At the close of the inspection a feedback meeting was held to report on the inspection findings, which highlighted both good practice and where improvements were required.

**Acknowledgements**

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

***Report Compiled by:***

Jackie Warren  
Inspector of Social Services  
Regulation Directorate

**Health Information and Quality Authority  
Regulation Directorate**

**Action Plan**



**Provider's response to inspection report<sup>1</sup>**

<b>Centre name:</b>	Carna Nursing and Retirement Home
<b>Centre ID:</b>	ORG-0000398
<b>Date of inspection:</b>	20/05/2014
<b>Date of response:</b>	13/08/2014

**Requirements**

This section sets out the actions that must be taken by the provider or person in charge to ensure Compliance with Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2009 (as amended) and the National Quality Standards for Residential Care Settings for Older People in Ireland.

**Outcome 09: Notification of Incidents**

**Theme:**

Safe Care and Support

**The Person in Charge (PIC) is failing to comply with a regulatory requirement in the following respect:**

An incident which had occurred in the centre had not been recorded in the incident record book.

**Action Required:**

Under Regulation 36 (1) you are required to: Maintain a record of all incidents occurring in the designated centre.

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

All staff informed that all incidents have to be recorded in the incident record book.

The Person in charge will ensure that all incident details are recorded in the incident book which is audited once a week by PIC

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

**Proposed Timescale:** 28/07/2014

**Outcome 13: Complaints procedures**

**Theme:**

Person-centred care and support

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

Details of a complaint which had been made to the management team had not been recorded in the complaints register as required by the Regulations.

**Action Required:**

Under Regulation 39 (7) you are required to: Maintain a record of all complaints detailing the investigation and outcome of the complaint and whether or not the resident was satisfied.

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

All staff have been informed that they have to inform Management of any complaints raised.

Management will ensure that these are all recorded in the Complaints book. The matter is investigated, the outcome is recorded and Management will ensure that measures are put in place to safeguard all residents and that the complainant is satisfied with outcome.

**Proposed Timescale:** 28/07/2014