<table>
<thead>
<tr>
<th>Centre name:</th>
<th>Padre Pio Nursing Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centre ID:</td>
<td>OSV-0000268</td>
</tr>
<tr>
<td>Centre address:</td>
<td>Sunnyside, Upper Rochestown, Cork.</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>021 484 1595</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:padrepiorochestown@eircom.net">padrepiorochestown@eircom.net</a></td>
</tr>
<tr>
<td>Type of centre:</td>
<td>A Nursing Home as per Health (Nursing Homes) Act 1990</td>
</tr>
<tr>
<td>Registered provider:</td>
<td>Eileen McCarthy</td>
</tr>
<tr>
<td>Provider Nominee:</td>
<td>Eileen McCarthy</td>
</tr>
<tr>
<td>Lead inspector:</td>
<td>Breeda Desmond</td>
</tr>
<tr>
<td>Support inspector(s):</td>
<td>Aoife Fleming;</td>
</tr>
<tr>
<td>Type of inspection</td>
<td>Unannounced</td>
</tr>
<tr>
<td>Number of residents on the date of inspection:</td>
<td>24</td>
</tr>
<tr>
<td>Number of vacancies on the date of inspection:</td>
<td>1</td>
</tr>
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</table>
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, Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2015 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 inform a registration renewal decision. This monitoring inspection was un-announced and took place over 1 day(s).

The inspection took place over the following dates and times
From: 12 February 2015 10:00
To: 12 February 2015 12:00

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

Outcome 12: Safe and Suitable Premises

Summary of findings from this inspection
This report sets out the findings of an unannounced single outcome inspection. It was the eleventh inspection undertaken by the Authority. This single outcome inspection was undertaken to inform the registration renewal inspection as many of the premises issues identified since commencement (2009) had not been remedied. A registration renewal inspection was completed on 8 and 9 September 2014 with a follow up inspection completed on 3 December 2014.

The provider/person in charge and manager displayed adequate knowledge of the regulatory requirements and they were found to be committed to providing person-centred evidence-based care for the residents. The inspectors viewed a number of improvements since the registration renewal inspection and follow up inspection, however, all issues were not completely remedied.

These improvements included:

Premises:
1) privacy curtains in one twin bedroom were inadequate
2) some furniture required upgrading
3) lack of comfortable chairs in bedrooms
4) the televisions in two twin bedrooms required adjustment to ensure both residents had full view
5) removal of old floor piping following upgrading of heating system was necessary
6) external grounds to the side and rear of centre were unsightly with rubble and rubbish.

The action plan at the end of this report sets out the actions necessary 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 2009.
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:
All previous monitoring inspections since 2009 identified issues regarding the decor, layout and space of this premises and many of these have been remedied.

Refurbishment since the registration renewal inspection on 8 and 9 September 2014 and the follow up inspection on 3 December 2014 included:

1) communal areas were repainted including woodwork, walls and ceilings
2) fifteen beds were replaced with either high-low or low-low beds
3) there were new wardrobes, new hand wash sink and vanity unit in room 2
4) a new flat screen television was in place and fixed to the wall in room 4
5) room 1 was decluttered; the shower en suite was now wheelchair accessible
6) rooms 4 and 5 were completely refurbished; the television in room 4 was relocated and was accessible to both residents
7) heating pipes in many of the bedrooms were now encased
8) the layout in twin bedrooms rooms 7 and 8 was changed. This created extra space for residents. These rooms were redecorated also. Radiators were moved to better accommodate the new layout of beds and furniture. Call bells and over head lights were relocated alongside beds to ensure easy access by residents. Privacy curtains were now in place between beds.
9) other bedrooms were repainted and new vanity units with hand-wash sink were in place
10) window curtains and rails were replaced in all bedrooms
11) the shelving unit in the main bathroom was replaced by a purpose-built large mirrored lockable unit
12) there was a new visitors’ room at the main entrance with views of the garden; it contained a table and comfortable seating
13) alongside the new private visitors’ room was a new wheelchair accessible toilet which was easily accessible to communal space.

However, areas which require further attention included:

1) there was inadequate number of bedpans available  
2) removal of old floor piping following upgrading of heating system was required  
3) comfortable seating to be made available in bedrooms  
4) remainder of piping of the new heating system to be encased  
5) existing secure storage (safes) to be relocated to a more accessible location for residents as many of them were too low to be easily assessable  
6) while the front garden was well maintained, the remainder of the external surroundings of the centre was not, and the views from many bedroom windows was unsightly with rubble, rubbish and waste bins.

Overall, there was significant improvement in the physical environment to ensure residents lived in a homely and comfortable environment.

Judgment:
Non Compliant - Moderate

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:

Breeda Desmond  
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 report**

<table>
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<tr>
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</tr>
<tr>
<td>Date of inspection:</td>
<td>12/02/2015</td>
</tr>
<tr>
<td>Date of response:</td>
<td>16/03/2015</td>
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**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 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:**

Areas which require further attention included:

1) there was inadequate number of bedpans available  
2) removal of old floor piping following upgrading of heating system was necessary  
3) comfortable seating to be provided in bedrooms  
4) remainder of piping of the new heating system to be encased  
5) secure storage (safes) to be relocated to a more accessible location for residents as

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1 The Authority reserves the right to edit responses received for reasons including: clarity; completeness; and, compliance with legal norms.
many of them were too low to be easily assessable
6) while the front garden was well maintained, the remainder of the external
surroundings of the centre was not, and the views from many bedroom windows was
unsightly.

**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:**
We have got new extra bedpans, including solid and disposable.
The piping has been removed as the second part of the new heating system-link has
been completed. The piping of this new system has been encased.
Seating has been provided as required in the refurbished bedrooms.
Safes have been relocated to make them more accessible.

Regarding the remainder of the surrounding external area, the new heating system is
completely finished and we intend to work on this aspect next. We hope to have this
completed by 31st July 2015.

**Proposed Timescale:** 31/07/2015