<table>
<thead>
<tr>
<th>Centre name:</th>
<th>Parke House Nursing Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centre ID:</td>
<td>OSV-0000083</td>
</tr>
<tr>
<td>Centre address:</td>
<td>Boycetown, Kilcock, Kildare.</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>01 610 3585</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:parkehousenh@gmail.com">parkehousenh@gmail.com</a></td>
</tr>
<tr>
<td>Type of centre:</td>
<td>A Nursing Home as per Health (Nursing Homes)</td>
</tr>
<tr>
<td></td>
<td>Act 1990</td>
</tr>
<tr>
<td>Registered provider:</td>
<td>Parke House Nursing Home Limited</td>
</tr>
<tr>
<td>Provider Nominee:</td>
<td>Alan Shaw</td>
</tr>
<tr>
<td>Lead inspector:</td>
<td>Sheila McKevitt</td>
</tr>
<tr>
<td>Support inspector(s):</td>
<td>None</td>
</tr>
<tr>
<td>Type of inspection</td>
<td>Announced</td>
</tr>
<tr>
<td>Number of residents on the date of inspection:</td>
<td>125</td>
</tr>
<tr>
<td>Number of vacancies on the date of inspection:</td>
<td>10</td>
</tr>
</tbody>
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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.
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: 21 July 2016 10:00
To: 21 July 2016 14:00

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

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Our Judgment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcome 09: Medication Management</td>
<td>Compliant</td>
</tr>
<tr>
<td>Outcome 11: Health and Social Care Needs</td>
<td>Compliant</td>
</tr>
<tr>
<td>Outcome 12: Safe and Suitable Premises</td>
<td>Compliant</td>
</tr>
</tbody>
</table>

Summary of findings from this inspection
This was an announced inspection by the Health Information and Quality Authority (the Authority) in response to an application to vary by Parke House Nursing Home Limited (the registered provider). The application was to vary condition 7 of the registration of Parke House Nursing Home under the Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2015. The inspection assessed the level of compliance with the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013.

The application to vary condition 7 submitted by the provider was to increase the centres bed capacity from a maximum of 135 to 141 adults.

Prior to the inspection, the inspector reviewed the updated statement of purpose which reflected the centres current status. The five newly developed bedrooms were found to meet the legislative requirements. They were decorated and furnished to a high standard and were dementia friendly.

The inspector followed up on the three action plans from the last inspection. The inspector also followed up on notifications and information received by the Authority since the last inspection. The centre was found to be compliant with the Regulations inspected against and as a result there are no actions required in the action plan at the end of this report.
**Outcome 09: Medication Management**

*Each resident is protected by the designated centre’s policies and procedures for medication management.*

**Theme:**
Safe care and support

**Outstanding requirement(s) from previous inspection(s):**
The action(s) required from the previous inspection were satisfactorily implemented.

**Findings:**
The inspector was satisfied that residents were protected by safe medicines management practices.

The inspector reviewed a sample of resident prescription charts and saw that they were in line with best practice guidelines and with the centres policy on medicines management. Residents’ who required their medications to be crushed had them individually prescribed as crushed.

**Judgment:**
Compliant

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

*Each resident’s wellbeing and welfare is maintained by a high standard of evidence-based nursing care and appropriate medical and allied health care. The arrangements to meet each resident’s 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

**Outstanding requirement(s) from previous inspection(s):**
The action(s) required from the previous inspection were satisfactorily implemented.

**Findings:**
The inspector was satisfied that residents healthcare needs were met to a good standard.
A sample of files of residents who had recently returned from hospital were reviewed. There was evidence that each resident had their assessments and care plans updated on their return from a hospital stay.

Risk assessments were completed and kept updated and alternatives which had been trialled, tested and failed were now clearly recorded on the resident bedrail assessment form. Residents with restraint in use had a care plan in place to reflect their use.

**Judgment:**
Compliant

**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):**
No actions were required from the previous inspection.

**Findings:**
The five newly developed ensuite bedrooms were inspected. The space originally used for a mortuary was re-configured to develop the five new bedrooms. The size of all five bedrooms met the standard for usable floor space for extensions outlined in the National Standards for Residential Care Settings for Older People in Ireland 2016.

The four single and one twin bedroom were fitted out with fixtures and fittings of a high standard, and decorated in a tasteful and homely manner. Bright colours and signage had been used to enhance the environment for residents with dementia. Each bedroom and ensuite door had been painted with these bright colours and the main bedroom door was attached to the fire alarm system. There was a call bell accessible by the bed in each room and an over bed light. Each room contained adequate storage facilities for personal items including a lockable storage area.

The large ensuite bathrooms each contained a shower at floor level, toilet and wash hand basin with hand washing and drying facilities above. There were assisted handrails installed beside each piece of white wear and a call bell accessible to residents’. The black toilet seat enabled residents’ living with dementia to identify the toilet without delay. There was an assisted bathroom close to these newly developed bedrooms.

There was spacious and comfortable sitting, recreational and dining space, located close to these bedrooms. Residents’ could independently access to an internal courtyard from
the corridor outside these bedroom doors.

The reception area was presented in a similar way to a hotel foyer, complete with a reservations area at which residents may book appointments at the spa or salon.

It was evident that consideration had been given to the needs of the type of residents identified in the Statement of Purpose.

**Judgment:**
Compliant

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**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:**

Sheila McKevitt
Inspector of Social Services
Regulation Directorate
Health Information and Quality Authority