

**Health Information and Quality Authority
Regulation Directorate**

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



Centre name:	St Joseph's Unit, Bantry General Hospital
Centre ID:	OSV-0000597
Centre address:	Bantry General Hospital, Bantry, Cork.
Telephone number:	027 52904
Email address:	stjosephsward.bgh@hse.ie
Type of centre:	The Health Service Executive
Registered provider:	Health Service Executive
Provider Nominee:	James A McNamara
Lead inspector:	Noel Sheehan
Support inspector(s):	None
Type of inspection	Announced
Number of residents on the date of inspection:	18
Number of vacancies on the date of inspection:	6

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 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 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 November 2016 09:00 To: 24 November 2016 13:00

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

Outcome	Our Judgment
Outcome 12: Safe and Suitable Premises	Substantially Compliant

Summary of findings from this inspection

This report sets out the findings of an announced inspection to monitor compliance with the Regulations set out by the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013 and National Quality Standards for Residential Care Settings for Older People in Ireland.

St Joseph’s unit at Bantry General Hospital was developed to provide residential, palliative and respite care to older adults. St Joseph’s Unit is registered for 24 places. Previous inspections had identified that the premises at St Joseph’s Unit consisted mainly of ward-type accommodation and the physical environment was not suitable for the purpose of achieving the aims and objectives as set out in the statement of purpose and was not conducive to meeting the needs of residents. St Joseph’s Unit is located on the campus of Bantry General Hospital and shared some of the facilities available on-site such as pharmacy and laundry services. On the day of inspection there were 18 residents in the centre and six vacancies.

The inspector met with the person in charge and members of management including the hospital manager and the assistant director of nursing, as well as other members of staff and residents. Documentation was reviewed by the inspector on-site and included meeting minutes and policies and related protocols. During the inspection there was evidence of good practice in relation to the delivery of care. Staffing levels were adequate and residents spoken with reported that they were well looked after and satisfied with the care they received.

HIQA had received an application to vary the conditions of registration in relation to a new layout of the premises. An updated statement of purpose and function was also submitted. The purpose of this inspection was to inspect the premises renovations. Significant work had been done to support residents to plan ahead for their future care. There was evidence that residents and their relatives were involved

in the development and good consultation had occurred.

Issues relating to lack of privacy and dignity for residents in multi-occupancy rooms had been addressed with the relocation of most residents from the four bedded rooms to single rooms and increased wardrobe space for residents' clothing and possessions. Each of the new bedrooms was finished to a high standard. All bedrooms had en suite facilities. The design and layout of the renovated unit was suitable for the residents. The facility was located on one level and had 12 single and three four bedded rooms on the day of inspection. Residents will have access to a pleasant secure roof garden and more day and dining space on completion of the renovations.

The renovated unit, when fully complete, will provide an environment which was suitable for the purpose of achieving the aims and objectives as set out in the statement of purpose and will meet the needs of residents. This is discussed further in the 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 Quality Standards for Residential Care Settings for Older People in Ireland.

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):

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

Findings:

The centre was located on the first floor of Bantry General Hospital on the edge of the town. There was ample car parking facilities for both visitors and staff. The premises and the grounds were adequately maintained with suitable heating, lighting and ventilation.

The previous inspection, in January 2016, had identified that the centre's accommodation included five four-bedded rooms and that the size and layout of these rooms were adequate. Residents had access to an adequate number of toilets, bathrooms and showers. There were wash-hand basins in each room. Privacy for personal care was provided by means of curtained screening. There were also four spacious single en suite bedrooms.

The registered provider had made an application to HIQA to vary conditions of registration regarding the changed layout of the premises. On full completion of the project, these changes will address the non-compliances identified previously with a completion date scheduled for January 2017. Phase one of the project involved the development of a new surgical day ward for the general hospital to allow for existing day ward space to be returned to St. Joseph's Unit and allowed for the creation of a flow corridor between the existing and new build. Phase two involved the development of the new first storey extension to the south of the existing block. This created 8 new single rooms with en suite facilities, extra office space, sluice, utility room and day room. Phase three will consist of the upgrading of bathroom facilities, two twin bedded rooms, the dining room and the roof garden.

Bedroom accommodation now comprises 12 single and three four bedded rooms. The bedrooms are all spacious, with a large en suite with a wheelchair accessible shower, a

toilet with contrasting grab rails and a wash hand basin. The lighting in the en suite is automated and a second hand basin in each bedroom has automated taps. The hydraulic beds have integrated divided bedrails that can be used to promote safety and mobility without restricting the resident's freedom to get into or out of bed. All the rooms have a functioning call bell and accessible lighting. Wall mounted television sets were in the process of being installed in each of the single rooms. There is adequate wardrobe and personal lockable storage space in each bedroom. All bedrooms had a view of the outdoors and a wall mounted clock. The doors to the single room had a viewing panel, which can be closed for privacy. On completion of the project 12 single, en suite, two twin bedded, en suite and two four bedded en suite will be available. The palliative care suite consists of single room with adjacent space for use by relatives incorporating a small kitchenette and seating area.

The centre had three sluice rooms, wheelchair accessible toilets and showers, a clinical room and a small seating area adjacent to the lift entrance. There was a nurses' station and separate office space for the person in charge. A quiet room provided a snoezelen facility for residents' relaxation where residents could also meet visitors in private.

Main meals were prepared on the main hospital campus and delivered to the centre. There was also a separate kitchen area with cooking facilities which supported residents with snacks and refreshments. Residents who could were also supported to access the hospital canteen on the ground floor. A lift facility was in place to aid residents' movement between floors. There was satisfactory provision of hand rails and grab rails throughout the centre. Staff changing rooms were provided and were incorporated as part of the larger campus.

Additional staffing to reflect the new layout of the building was in place as follows; an increase of 84 hours per week for two registered nurses on night duty, an increase of 2.5 whole time equivalent per week non nursing staff.

There was evidence of extensive consultation with residents and/or families to facilitate the transfer to new single rooms in St Joseph's unit. The person in charge had discussed the option of moving to one of the single rooms and the possibility of return to the shared bedrooms if they wished. There was evidence that the person in charge had identified the concerns of residents regarding change of staff, change of environment, personal belongings and continuity of care. Concerns such as maintaining friendships were also discussed. The date of transfer was planned in conjunction with the resident and residents were helped to orientate in the new accommodation. Health and safety and care matters were discussed as appropriate.

There was evidence of plans to minimise disruption to residents during the building and renovation phases and to minimise noise and dust. Areas under renovation were noted to be physically segregated from the designated centre, while access by builders was from the exterior of the building only.

The inspector was satisfied that the new unit had been completed to a high standard and suited the needs of the residents who were due to live there. The rooms had been painted and some residents had started to personalise their bed space with photographs and pictures.

<p>Judgment: Substantially Compliant</p>

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:

Noel Sheehan
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:	St Joseph's Unit, Bantry General Hospital
Centre ID:	OSV-0000597
Date of inspection:	24/11/2016
Date of response:	19/12/2016

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:

Upgrade of bathroom facilities, two twin bedded rooms, the dining room and the roof garden as set out in phase 3 of the project plan..

1. 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

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

designated centre.

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

- 2 x Twin rooms commenced upgrade due to be completed 31st January 2017
- Upgrade of Bathroom facilities due to be completed by 31st January 2017
- Provision of Dining room by conversion of existing room by 31st January 2017
- Extension to roof top garden to be completed by 31st January 2017.

Proposed Timescale: 31/01/2017