

**Health Information and Quality Authority
Regulation Directorate**

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



Centre name:	New Ross Community Hospital
Centre ID:	OSV-0000602
Centre address:	Hospital Road, New Ross, Wexford.
Telephone number:	051 421 305
Email address:	don@newrosscommunityhospital.com
Type of centre:	Health Act 2004 Section 39 Assistance
Registered provider:	New Ross Community Hospital Limited
Provider Nominee:	Mark Walsh
Lead inspector:	Sheila Doyle
Support inspector(s):	None
Type of inspection	Announced
Number of residents on the date of inspection:	35
Number of vacancies on the date of inspection:	1

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 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: 10 May 2016 12:00 To: 10 May 2016 15:00

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

Outcome	Our Judgment
Outcome 12: Safe and Suitable Premises	Non Compliant - Moderate

Summary of findings from this inspection

It was identified at previous inspections that the premises 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.

The plans for a major renovation of the centre which included an extension were submitted to the Authority and formed part of the overall conditions of Registration. The centre has now applied to remove this condition while also increasing the occupancy from 36 to 37 residents.

The renovation project involved three phases and this inspection was carried out to review progress as phase one was nearing completion.

Phase 1: Construction of a new extension

Phase 2: Some residents transfer to the new extension to facilitate refurbishment of one part of the existing facility

Phase 3: Some residents transfer to the new extension to facilitate completion of the remaining areas in the older part of the facility.

The inspector was satisfied that the new extension will meet the needs of the residents. Systems were in place to communicate with and support residents during phases two and three and to ensure that the care and welfare of the residents were safeguarded during the necessary disruptions.

Phases two and three which include the refurbishment of parts of the existing premises are now underway and once completed, the environment will be 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 and included in the action plan at the end.

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):

Some action(s) required from the previous inspection were not satisfactorily implemented.

Findings:

The centre occupies the ground level floor of a two-storey facility built in the 1930s. It is located on Health Service Executive (HSE) grounds. The accommodation is divided into two wings. Male residents are allocated rooms in the left wing while female residents are accommodated in the right wing. There are two wards located at the end of each wing and one of which contains 9 beds. A bed has been removed from the other wing reducing its capacity to 8 residents. This was to allow renovations to continue.

Other bedroom accommodation includes four single bedrooms, two twin-bedded rooms, two three -bedded rooms and one four-bedded room.

An extension to the back of the main building in 2002 included a very bright dining and sitting room with an adjoining conservatory. The decking area with seating for residents can be accessed from the conservatory. During previous inspections, inspectors noted that there was evidence that the premises was well maintained with a good standard of décor and that efforts had been taken where possible in creating an atmosphere of comfort through the use of some suitable fittings and furnishings.

However, it was identified at previous inspections that the premises 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.

The plans for a major renovation of the centre which included an extension were submitted to the Authority and formed part of the overall conditions of Registration. With the renovation work progressing in line with agreed timelines, the centre has now applied to remove this condition while also increasing the occupancy from 36 to 37

residents.

This inspection was carried out to review progress as phase one of three phases was nearing completion. Phases two and three relate mainly to refurbishment of the existing premises.

Phase one of the project entailed the construction of a new extension which was finished to high standard. It consisted of eight large single rooms, each with en suite facilities. Call bell systems were in place. Some furniture including beds was being moved from the existing premises while additional fitted furniture was provided. Adequate storage facilities were in place.

Other accommodation included a multipurpose treatment room, a nurses' station, an office and a wheelchair accessible toilet. There was also a multipurpose communal room which may be used for activities. A kitchenette area was available at the end of this room.

Corridors were wide and hand rails were provided in all circulation areas. Grab rails were also available in all en suite bathroom and toilets.

As with the existing premises, contracts were in place for the maintenance and servicing of equipment. A secure garden area was available which could be accessed through three different doors. Sufficient parking was available.

During phase two and phase three of the project some residents will be accommodated in the new extension, while the existing facility is being refurbished. Plans were in place to ensure the welfare of the residents during this time. Additional staff were on standby to provide help with the move. Induction training had been provided to staff which included additional fire training to cover the new extension.

Resident and family meetings had been held to discuss the plans and progress and where possible residents were offered a choice of whether to remain in the existing refurbished building or move to the new area. Some residents told the inspector how much they were looking forward to the move while others said they preferred to stay put.

The inspector was satisfied that the new extension was completed to a high standard and suited the needs of the residents who were due to live there both during the refurbishment of the existing premises and afterwards.

A judgment of moderate non-compliance was made because the ongoing issues with the existing building would not be resolved until the refurbishment work in phase two and three was completed.

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:

Sheila Doyle
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:	New Ross Community Hospital
Centre ID:	OSV-0000602
Date of inspection:	10/05/2016
Date of response:	13/05/2016

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:

Continue with plans to ensure the physical environment is suitable for the purpose of achieving the aims and objectives as set out in the statement of purpose and meets the needs of residents.

1. Action Required:

Under Regulation 17(1) you are required to: Ensure that the premises of a designated centre are appropriate to the number and needs of the residents of that centre and in

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

accordance with the statement of purpose prepared under Regulation 3.

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

Phase 2 of the project will commence on Monday 16th May. This will consist of converting one of the nine bedded wards into three two bedded rooms and converting the four bedded room into a two bedded room and a single room. This phase is expected to take three weeks.

Once phase 2 is completed work will commence on the third phase of the project. This phase will consist of converting the other nine bedded ward into three two bedded rooms. Phase 3 works will also take three weeks approximately.

Completion of this project is expected on Thursday 30th June.

Proposed Timescale: 30/06/2016