

**Health Information and Quality Authority
Regulation Directorate**

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



Centre name:	Beechlawn House Nursing Home
Centre ID:	OSV-0000115
Centre address:	Beechlawn House Campus, High Park, Gracepark Road, Drumcondra, Dublin 9.
Telephone number:	01 836 9622
Email address:	catherine.condon@olc.ie
Type of centre:	A Nursing Home as per Health (Nursing Homes) Act 1990
Registered provider:	Sisters of Our Lady of Charity
Provider Nominee:	Catherine Condon
Lead inspector:	Sheila McKeivitt
Support inspector(s):	Shane Walsh
Type of inspection	Announced
Number of residents on the date of inspection:	37
Number of vacancies on the date of inspection:	3

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 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 monitor ongoing regulatory compliance. This monitoring inspection was announced and took place over 1 day(s).

The inspection took place over the following dates and times

From: 21 February 2017 14:00 To: 21 February 2017 15:30

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

Outcome	Our Judgment
Outcome 08: Health and Safety and Risk Management	Compliant
Outcome 12: Safe and Suitable Premises	Substantially Compliant

Summary of findings from this inspection

The provider informed the Authority that phase two of a three phase re-development project was complete. Phase two included the redevelopment and refurbishment of a section of the existing nursing home. This included the change of purpose and function of a number of the rooms. This inspection was carried out to inspect this refurbished section of the centre to determine if it met the legislative requirements. The provider planned to transfer 18 residents from another section of the existing building into this refurbished area. Phase three involved the redevelopment of another section of the existing nursing home building and on its completion increasing bed numbers from 40 to 58.

Inspectors found that the refurbished section would meet the needs of the 18 residents' which were going to occupy the newly refurbished bedrooms. The two, five bedded high dependency rooms had been redeveloped into single ensuite bedrooms and a dining room. The section also included, two assisted bathrooms, an assisted toilet and a dirty utility. Inspectors followed-up on two non compliances identified on the last inspection in September 2016, in relation to the premises and fire practices, both actions had been addressed in full.

The action plan at the end of this report reflects the one action plan which needed to be addressed.

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 Standards for Residential Care Settings for Older People in Ireland.

Outcome 08: Health and Safety and Risk Management
The health and safety of residents, visitors and staff is promoted and protected.

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 following action plan from the inspection of September 2016 was followed up upon:
Fire drills had not been practiced by staff in the new extension at the time of the inspection.

Findings:
Fire drills had been practiced with staff each week, records of these fire drills were available for review and they included the new extension which was now occupied by residents.

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

Findings:
The actions identified on the previous inspection report stated:
Space around beds in the high dependency unit was restrictive and does not allow free movement around all furniture and equipment.
The signage throughout the centre did not meet the needs of residents with dementia.

The colour schemes, fixture and fittings in toilet and bathrooms did not enable residents with dementia identify the toilet, wash hand basin or shower/ bath.
All wash hand basins did not have hand wash and dry facilities in place at the time of this inspection.

Findings:

The Authority had been informed that phase two of a three phase redevelopment project was complete. Phase one included the construction of a two-storey extension which included 19 single ensuite bedrooms, it was inspected on completion in September 2016. The residents who had occupied phase two of the nursing home, now occupied the new extension. Phase two included a section of the nursing home where a 10 high dependency unit was situated. Inspectors saw that this section of the nursing home had now been redeveloped and refurbished as part of phase two of the project. Phase three of the project would begin once residents were transferred into the completed phase two section.

Inspectors saw the newly redeveloped and refurbished section met the needs of 18 residents. The high dependency unit had been converted into single ensuite bedrooms. The refurbished area now included 18 single ensuite bedrooms, a dining room, an assisted toilet, two assisted bathrooms and a dirty utility. The dining room included a kitchenette area with table and chairs suitable to meet the needs of 20 residents. Each of the existing bedrooms had been refurbished to include new floor covering, furniture, fittings and redecoration to the same standard as the newly constructed bedrooms. The existing ensuite rooms which included an assisted shower, toilet and wash-hand basin were being refurbished at a later stage. Wash-hand basins had wash hand and dry facilities above them. There were privacy locks on both bedroom and ensuite doors. However, those on a number of existing ensuite doors were not functioning properly.

Judgment:

Substantially Compliant

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:

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Regulation Directorate
Health Information and Quality Authority

Health Information and Quality Authority Regulation Directorate

Action Plan



Provider's response to inspection report¹

Centre name:	Beechlawn House Nursing Home
Centre ID:	OSV-0000115
Date of inspection:	21/02/2017
Date of response:	20/03/2017

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:

Privacy locks on a number of ensuite doors were not all functioning properly and required repair.

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:

The locks on the ensuite doors that were not working properly on the day of inspection have either been repaired or replaced at the time of submitting this action plan.

Proposed Timescale: 03/03/2017