Health Information and Quality Authority Regulation Directorate

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



agus Cáilíocht Sláinte

Centre name:	Dromcollogher and District Respite Care Centre
Centre ID:	OSV-0000415
Centre address:	Coolaboy, Dromcollogher, Limerick.
Telephone number:	063 83934 Mob: 086 3438258
Email address:	dromrespitecentre@eircom.net
Type of centre:	A Nursing Home as per Health (Nursing Homes) Act 1990
Registered provider:	Dromcollogher & District Respite Care Centre Ltd
Provider Nominee:	Breda O'Keeffe
Lead inspector:	Margaret O'Regan
Support inspector(s):	None
Type of inspection	Unannounced
Number of residents on the date of inspection:	19
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 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 notification of a change in person in charge. This monitoring inspection was un-announced and took place over 1 day(s).

The inspection took place over the following dates and timesFrom:To:03 February 2015 15:4003 February 2015 17:30

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

Outcome 02: Governance and Management	
Outcome 04: Suitable Person in Charge	
Outcome 06: Absence of the Person in charge	

Summary of findings from this inspection

Dromcollogher and District Respite centre provides short term care, usually of one, two or three weeks duration, to the communities of Limerick and North Cork. The majority of residents are admitted from their homes and return to living in their own homes. It is a voluntary organisation which has charitable status. This single issue inspection was announced and took place over one day following notification that there was a change of person in charge and provider nominee. The inspector met with the person in charge and a member of the board of directors. The inspector discussed with the new post holder her plans for the centre, the management structure, her dual role of both person in charge and provider nominee and her previous work experience.

The provider nominee/person in charge was respectful and mindful of the ethos, culture and demands of the service. She had extensive experience in nursing care of the older person and extensive management experience. She had met with all staff, had established a working relationship with the board of directors and was actively involved in recruiting a person to augment the activities programme and support her in the delivery of a high quality service.

Three outcomes were examined on this inspection. They were;

- * governance
- * person in charge
- * deputy person in charge.

These outcomes were found to be in compliance with regulations.

Section 41(1)(c) of the Health Act 2007. 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.

Outcome 02: Governance and Management

The quality of care and experience of the residents are monitored and developed on an ongoing basis. Effective management systems and sufficient resources are in place to ensure the delivery of safe, quality care services. There is a clearly defined management structure that identifies the lines of authority and accountability.

Theme:

Governance, Leadership and Management

Outstanding requirement(s) from previous inspection(s):

No actions were required from the previous inspection.

Findings:

Since the last inspection there was a change to the person in charge. This post holder also took on the responsibilities of provider nominee; the person nominated by the board of directors of Dromcollogher and District respite centre to act on their behalf. To ensure the board was informed and kept up to date with operational matters as they pertained to their responsibilities, the provider nominee planned to have regular meeting with the board. The first of these was set for 24 February 2015.

Securing of funding to operate the centre was an ongoing process. Progress had been made in this regards in 2014 and other avenues were also being pursued at the time of inspection. The provider nominee was satisfied there were sufficient resources to ensure the effective delivery of care in accordance with the statement of purpose.

The management structure was clearly defined. Staff reported to the person in charge and the person in charge reported to the board of directors. The person in charge/provider nominee had the authority and accountability for the day to day running of the service.

Management systems were in place to ensure that the service provided was safe, appropriate to residents' needs, consistent and effectively monitored. Meetings were regularly carried to illicit residents' views on the service provided. An annual questionnaire was sent to residents and their families requesting information about the quality of the service. To augment what is already in place, the provider nominee plans to focus on the following areas to further enhance the service provided;

- * the risk register and risk assessments
- * the mealtime experience
- * the feedback about the service from residents, relatives and staff
- * the care plans and medication management systems.

Judgment:

Compliant

Outcome 04: Suitable Person in Charge

The designated centre is managed by a suitably qualified and experienced person with authority, accountability and responsibility for the provision of the service.

Theme:

Governance, Leadership and Management

Outstanding requirement(s) from previous inspection(s):

No actions were required from the previous inspection.

Findings:

The post of person in charge was full time and the person in the post was a nurse with experience in the area of nursing of the older person. The person in charge demonstrated clinical knowledge to ensure suitable and safe care. For example, attention was given to continuous improvements initiatives, respect for residents and respect for the ethos of the centre, ensuring residents had a satisfactory diet and that end of life care was provided with dignity. The person in charge also demonstrated knowledge of the legislation and of her statutory responsibilities. She was engaged in the governance, operational management and administration of this centre on a regular and consistent basis. The person in charge had a dual role. She also held the post of provider nominee on behalf of the board of directors.

Judgment:

Compliant

Outcome 06: Absence of the Person in charge

The Chief Inspector is notified of the proposed absence of the person in charge from the designed centre and the arrangements in place for the management of the designated centre during his/her absence.

Theme:

Governance, Leadership and Management

Outstanding requirement(s) from previous inspection(s):

No actions were required from the previous inspection.

Findings:

The deputising arrangements to cover the post of person in charge were unchanged since the last inspection. It was covered by two part time qualified nurses who had experience in the care of older persons. At the time of inspection plans were underway to recruit a community service programme coordinator. This post was supported by Pobal. Its purpose was to ensure an efficient and high quality individualised service. This post holder would support the person in charge and take a lead role in the provision of meaningful activities for residents.

Judgment:

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:

Margaret O'Regan Inspector of Social Services Regulation Directorate Health Information and Quality Authority