

**Health Information and Quality Authority
Regulation Directorate**

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



Centre name:	Kenmare Nursing Home 'Tir na nOg'
Centre ID:	OSV-0000239
Centre address:	Killaha East, Kenmare, Kerry.
Telephone number:	064 664 1315
Email address:	nursinghome@eircom.net
Type of centre:	A Nursing Home as per Health (Nursing Homes) Act 1990
Registered provider:	Tim Harrington
Provider Nominee:	Tim Harrington
Lead inspector:	John Greaney
Support inspector(s):	None
Type of inspection	Unannounced
Number of residents on the date of inspection:	23
Number of vacancies on the date of inspection:	0

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 inform a registration decision. This monitoring inspection was un-announced and took place over 1 day(s).

The inspection took place over the following dates and times

From: 04 January 2018 07:30 To: 04 January 2018 11:30

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
Outcome 16: Residents' Rights, Dignity and Consultation	Compliant

Summary of findings from this inspection

Kenmare Nursing Home 'Tir na nOg' is a 23 bedded nursing home situated approximately two kilometres from Kenmare town. The centre had recently completed renovations and built an extension resulting in an increase of bed capacity 27. An application had been made to renew the registration, and as part of the renewal process, to increase the bed capacity from 23 to 27.

At the last inspection, carried out in September 2017, it was identified that breakfast for most residents commenced at 07.00hrs and a number of residents were awoken for their breakfast. The inspector formed the view that this practice was institutional in nature and did not support freedom of choice for all residents. In the response to the action plan following the inspection the inspector was not satisfied that the provider adequately addressed this issue and the Chief Inspector issued a Notice of Proposal to renew the registration, but not to increase the bed capacity. A condition was also attached to the registration that all renovations would be completed by 31 March 2018.

In response to the Notice of Proposal, the provider submitted a written representation outlining changes in practices to support residents have breakfast at a time of their choosing. The provider stated that these changes were now embedded in practice and were part of a culture change in the centre. It was also stated in the representation that there was no need for a condition in relation to renovations, as all building works were now complete. This inspection was carried out in response to the representation, in order to validate the claims made by the provider and to support the Chief Inspector make a decision in relation to whether bed capacity could be increased and to determine if the condition in relation to the renovations was still required.

On this inspection the inspector visited the centre at 07.45hrs and found that most residents were sleeping in their beds. Of the 22 residents present in the centre, five residents had eaten or were in the process of eating breakfast. When spoken to by the inspector, one resident confirmed that that she preferred to have breakfast at this time, while some of the other residents were unable to verbalise their preferences.

The inspector found that the renovations outlined in the representation had been completed. These included the creation of a visitors room where resident could meet with visitors in private. It also included repainting of walls and radiators and the replacement of disposable curtains with material ones.

An assessment of the two newly renovated twin bedrooms found that the size, design and layout of the bedrooms would not be suitable for two residents with high needs. There would be insufficient room for staff to manoeuvre assistive equipment such as hoists in the room, when the rooms were fully furnished, without causing disturbance to the other resident in the room. The rooms would be more suitable for one resident, or for two residents that were ambulatory and of low to medium dependency.

The Action Plan at the end of the report identifies what improvements are needed to meet the requirements of 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.

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 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:

Kenmare Nursing Home 'Tir na nOg' is a 27 bedded nursing home situated approximately two kilometres from Kenmare town. The centre had previously been a 23-bedded centre but following renovations and the building of an extension capacity, had been increased to 27. On this inspection the inspector assessed the new bedrooms to ensure they could meet the needs of potential residents and also verified that all renovations outlined in the representation document submitted by the provider were completed.

The inspector noted that a room formerly designated as a bedroom had been converted to a visitor's room. While the room was small, it contained a couch, table and chairs, and was suitable for its stated purpose. The walls on the corridors and bathrooms had been recently painted, as had a number of radiators. Disposable curtains had been removed and replaced with material curtains that extended all the way around the beds to support privacy during care provision. An extension to the sitting room was now complete and afforded more communal space for residents. The pre-existing sitting had a new floor covering and was repainted. In general the centre was clean and bright throughout. Some improvements, however, were required. For example, at least one armchair and a speciality cushion had torn upholstery. This did not allow for effective cleaning and was a potential source of cross contamination. Additionally, skirting boards and some bedroom doors required repainting as the paintwork was badly scuffed. There was also some adhesive residue on walls from where signage had been removed.

As part of the renovations, three smaller twin bedrooms had been decommissioned and converted into a corridor between the pre-existing building and the new extension, and the two twin bedrooms. These bedrooms were not fully complete at the previous inspection but were now ready for occupancy. Each of the rooms had two tall single

wardrobes and one four-drawer chest of drawers. There was one standard chair in one of the rooms and none in the other. The inspector, however, was not satisfied that the size, design and layout of the bedrooms were suitable for two residents with high needs. There would be insufficient room for staff to manoeuvre assistive equipment such as hoists in the room, when the rooms were fully furnished, without causing disturbance to the other resident in the room. The rooms would be more suitable for one resident, or for two residents that were ambulatory and of low to medium dependency.

Judgment:
Substantially Compliant

Outcome 16: Residents' Rights, Dignity and Consultation
Residents are consulted with and participate in the organisation of the centre. Each resident's privacy and dignity is respected, including receiving visitors in private. He/she is facilitated to communicate and enabled to exercise choice and control over his/her life and to maximise his/her independence. Each resident has opportunities to participate in meaningful activities, appropriate to his or her interests and preferences.

Theme:
Person-centred care and support

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

Findings:
At the last inspection it was identified that breakfast commenced at 07:00hrs and most residents had their breakfast at this time. The inspector had observed some residents being awoken from their sleep for breakfast. Following the inspection the provider communicated to HIQA that the staff roster would be amended to allow breakfast to be served at a later time and that all residents would be facilitated to have breakfast at a time of their choosing.

On this inspection the inspector visited the centre at 07.45hrs and found that most residents were sleeping in their beds. Of the 22 residents present in the centre, five residents had eaten or were in the process of eating breakfast. When spoken to by the inspector, one resident confirmed that that she preferred to have breakfast at this time, while some of the other residents were unable to verbalise their preferences. The inspector observed that day staff commenced duty at 08.30hrs and got report from night staff. Breakfast was then served from approximately 08.45hrs for those residents that were awake and some residents that were asleep were not disturbed.

As found at the last inspection, staff were seen to interact with residents in an appropriate and respectful manner. Residents were addressed by their preferred name and privacy and dignity was respected during care provision

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:

John Greaney
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:	Kenmare Nursing Home 'Tir na nOg'
Centre ID:	OSV-0000239
Date of inspection:	04/01/2018
Date of response:	15/01/2018

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 (Stakeholder) is failing to comply with a regulatory requirement in the following respect:

The newly configured twin bedrooms are not adequate in size, design and layout to meet the needs of two residents with high needs.

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:

The two rooms in question (Room 11 & 12) will only accommodate, two residents that are ambulatory and of low to medium dependency.

Proposed Timescale: 15/01/2018

Theme:

Effective care and support

The Registered Provider (Stakeholder) is failing to comply with a regulatory requirement in the following respect:

Some improvements, however, were required. For example, at least one armchair and a speciality cushion had torn upholstery. This did not allow for effective cleaning and was a potential source of cross contamination. Additionally, skirting boards and some bedroom doors required repainting as the paintwork was badly scuffed. There was also some adhesive residue on walls from where signage had been removed.

2. 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 designated centre.

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

1. Armchair and speciality cushion have been replaced
2. Skirting boards and bedrooms doors needing repainting will be repainted and adhesive residue removed.

Proposed Timescale:

1.05/01/2018

2.19/01/2018

Proposed Timescale: 19/01/2018