

**Health Information and Quality Authority
Social Services Inspectorate**

**Inspection report
Designated centres for older people**



Centre name:	Oakdale Nursing Home
Centre ID:	0690
Centre address:	Tullamore Road
	Portarlinton
	Co Laois
Telephone number:	057 - 8645282
Fax number:	057 - 8636508
Email address:	life@oakdale.ie
Type of centre:	<input checked="" type="checkbox"/> Private <input type="checkbox"/> Voluntary <input type="checkbox"/> Public
Registered provider:	Valerie Moore
Person in charge:	Valerie Moore
Date of inspection:	21 April 2010
Time inspection took place:	Start: 10:00 hrs Completion: 13:15 hrs
Lead inspector:	Marian Delaney-Hynes
Support inspector:	N/A
Type of inspection:	<input checked="" type="checkbox"/> Follow up inspection <input checked="" type="checkbox"/> Announced <input type="checkbox"/> Unannounced

About inspection

The purpose of inspection is to gather evidence on which to make judgments about the fitness of the registered provider and to report on the quality of the service. This is to ensure that providers are complying with the requirements and conditions of their registration and meet the Standards, that they have systems in place to both safeguard the welfare of service users and to provide information and evidence of good and poor practice.

In assessing the overall quality of the service provided, inspectors examine how well the provider has met the requirements of the Health Act 2007, the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2009 and the *National Quality Standards for Residential Care Settings for Older People in Ireland*.

Additional inspections take place under the following circumstances:

- To follow up on specific matters arising from a previous inspection to ensure that the action required of the provider has been taken
- Following a change in circumstances; for example, following a notification to the Health Information and Quality Authority's Social Services Inspectorate that a provider has appointed a new person in charge
- Arising from a number of events including information received in relation to a concern/complaint or notification to the SSI of a significant event affecting the safety or well-being of residents
- To randomly "spot check" the service.

All inspections can be announced or unannounced, depending on the reason for the inspection and may take place at any time of day or night.

All inspection reports produced by the Health Information and Quality Authority will be published. However, in cases where legal or enforcement activity may arise from the findings of an inspection, the publication of a report will be delayed until that activity is resolved. The reason for this is that the publication of a report may prejudice any proceedings by putting evidence into the public domain.

About the centre

Description of services and premises

Oakdale Nursing Home is a two-storey residential centre for older people, some of whom have dementia. It has 58 places; 40 single rooms and 9 twin rooms, all with shower, toilet and wash basin en suite facilities. Each bedroom is furnished to a high standard with a call bell system, phone line, computer data point and a plasma screen television. The five twin rooms on the first floor which are currently vacant are accessed by a stairs and a lift.

Other facilities include a large activities room incorporating the dining room, a spacious kitchen, two separate sitting rooms, a meditation / multi-denominational room, hairdressing salon, visitors' room, a clinical therapy room, a smokers' room and multiple storage areas. There are two assisted bathrooms. The premises are very attractively decorated, well maintained and furnished.

There are internal and external gardens accessible to residents, which have been tastefully designed with a selection of flowerbeds, some of which are raised and contain a variety of fruit and vegetables. The garden has seating and pathways throughout. There is ample car parking space at the front of the building.

Location

Oakdale Nursing Home is situated in the town of Portarlington, Co Laois, just off the Tullamore Road and is within a ten minute walking distance of the town centre.

Date centre was first established:	9 February 2010
Number of residents on the date of inspection	42 (one in hospital)
Number of vacancies on the date of inspection	16

Dependency level of current residents	Max	High	Medium	Low
Number of residents	11	7	10	14

Management structure

The centre is owned by "Oakdale Partnership", a seven-person partnership which includes the Person in Charge, Valerie Moore, who is also identified as the named Provider. For clarity, she will be referred to as the Person in Charge throughout this report. The Person in Charge is supported by an Assistant Director of Nursing, staff nurses, a part-time physiotherapist, care assistants and kitchen, catering and laundry staff.

Staff designation	Person in Charge	Nurses	Care staff	Catering staff	Cleaning and laundry staff	Admin staff	Other staff
Number of staff on duty on day of inspection	1	4 including assistant director of nursing	5	3	3	2	1 gardener

Purpose of this inspection visit

- Follow up to previous inspection findings
- An application by the provider to vary conditions
- Notification of a significant incident or event
- Notification of a change in circumstance
- Information received in relation to complaint or concern
- Other _____

Background

Oakdale Nursing Home was first inspected by the Health Information and Quality Authority (the Authority) Social Services Inspectorate on 11 January and 12 January 2010. The inspection report is available on www.hiqa.ie.

At that time, the inspector found that the person in charge had an in-depth professional and personal knowledge of the residents and was fully committed to their welfare. She was competent and experienced and led a team of committed staff.

The inspector found that she continued to provide a high standard of person-centred care and met the requirements of the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) 2009 (as amended). The inspector was satisfied that residents were cared for in a safe, comfortable and stimulating environment. The nursing, medical and healthcare needs were seen to be adequately met at the time of this inspection.

The premises were clean, bright and well-maintained. The attractive gardens and grounds were safe, tidy and accessible to residents including residents with cognitive impairments, poor mobility and those in wheelchairs.

Improvements required at the last inspection included addressing the gaps in the complaints and medication policy and ensuring that Garda Síochána vetting procedure was compliant with regulation. All of these issues had been adequately addressed.

Summary of findings from the follow up inspection

This inspection was announced and focused on the areas where improvements were required as highlighted in the action plan in the inspection report of 11 and 12 January 2010.

During the inspection the inspector met with residents, the person in charge, provider, staff and read policies and documentation.

The inspector was satisfied that the provider had implemented all of the actions required following the inspection report within the agreed timeframes.

The key measures taken by the provider since the previous inspection were as follows:

- the medication policy had been updated to include a nurse transcribing policy
- the complaints policy had been updated to include an independent appeals person
- residents' meetings had recommenced
- personnel files contained all the required documentation
- the menu was displayed in the sitting room area.

Issues covered on inspection

1. Action required from previous inspection:

There was no policy in place to support the practice of nurses transcribing prescriptions.

The medication policy had been updated to include a nurse transcribing policy. The inspector read the policy, examined the prescription sheet and interviewed a staff nurse about the policy and practice of transcribing. The policy was clear and concise stating that two nurses must complete transcriptions, which is in line with best practice. The new prescribing sheet contained a designated space for the nurse to sign following transcription of medications.

The staff nurse who was interviewed said that the nurses have become even more accountable and knowledgeable about medication because of the knowledge base required in order to transcribe. For example, the policy states that the nurse must be knowledgeable about the drug in relation to its use, actions and adverse reactions. She further stated that the general practitioner (GP) generally writes up the medication charts but when a nurse transcribed a prescription, the GP signed the prescription sheet very promptly afterwards.

2. Action required from previous inspection:

The complaints policy did not meet all requirements of Article 39 of the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2009 and did not contain an independent appeals process.

The complaints policy had been updated and now contained the name and details on an independent appeals person. There was a copy of the complaints policy in each of the resident's bedrooms. The inspector interviewed a resident who had been recently admitted to the centre; she was familiar with the policy but said that she was very satisfied with the care provided.

The person in charge said that she hopes to incorporate the policy into a folder with the Residents' Guide, statement of purpose and other relevant information and place a folder in each of the resident's rooms.

3. Action required from previous inspection:

There was a residents meeting held in November 2009 but there were no plans for further meetings to provide feedback, consultation and improvements on matters affecting residents.

Residents' meetings are held on a monthly basis. The last three meetings were held on 28 January, 26 February and 29 March 2010. A care assistant facilitated the meetings. Residents were given the opportunity to raise issues and the information was fed back to the person in charge or other relevant personnel. Some of the topics discussed at these meetings included:

- having adequate notice in relation to the proposed meeting
- opportunities to assist with the gardening
- having to wait too long for assistance in the morning because staff are too busy
- satisfaction with the quality, quantity and variety of food
- satisfaction with the hairdressing facilities.

Residents expressed satisfaction in relation to the meetings that had taken place and how their issues and suggestions have been received.

4. Action required from previous inspection:

Personnel files did not contain all of the required documentation including Garda Síochána vetting, a birth certificate and evidence of mental and physical fitness.

Recruitment and human resource policies and procedures were based on current legislation and best practice. The inspector reviewed four staff files and found that all of the required documentation including Garda Síochána vetting, references, confirmation of identity, references and evidence of physical and mental health fitness were present.

Recommendation

The menu was not displayed.

The menu was displayed in the sitting room. The menu was colourful and pictures were used to describe food types. The print on the menu was large enough to ensure that residents with poor eyesight could see it. Residents were aware of what was for lunch and said that they are always consulted with about menu choices.

Report compiled by:

Marian Delaney-Hynes

Inspector of Social Services
Social Services Inspectorate
Health Information and Quality Authority

29 April 2010

Any comments the provider may wish to make:

Provider's response:

We are very committed to delivering high quality person-centred care in Oakdale Nursing Home. All recommendations from our initial inspection of 11 January 2010 have been taken on board and implemented.

The residents' meetings, in particular, have been very informative and interesting. They are often attended by relatives and as a result positive changes have been made. Residents have commented that they are happy with the meetings and satisfied that suggestions have been followed through. As before, Marion Delaney-Hynes chatted with the residents. They remembered her and were quite pleased that she remembered them also.

Provider's name: Valerie Moore

Date: 21 May 2010