Áras Chois Fharraige

STATEMENT OF PURPOSE

Páirc, An Spidéal, Co. Na Gaillimhe
(091) 553194
care@thearas.com
www.thearas.com

(CENTRE ID 0382)
Áras Chois Fharraige

STATEMENT OF PURPOSE

Contents

Section 1: Registration Details 5
   The information set out in the Certificate of Registration

Section 2: Services and Facilities Provided in Áras Chois Fharraige 6
   2.1 Information regarding the following:
   (a) the aims and objectives of the designated centre; 6
   (b) the specific care needs that the designated centre is intended to meet; 7
   (c) the facilities which are to be provided by the registered provider to meet those care needs; 7
   (d) the services which are to be provided by the registered provider to meet those care needs; 9
   (e) criteria used for admission to the designated centre, including the designated centre’s policy and procedures for emergency admissions 11

   2.2 The age-range and sex of the residents for whom it is intended that accommodation should be provided 12

   2.3 A description (either in narrative form or a floor plan) of the rooms in the designated centre including their size and primary function 12

   2.4 Any separate facilities for day care 14
Áras Chois Fharraige

STATEMENT OF PURPOSE

Section 3: Management and Staffing
3.1 Total staffing complement, in whole time equivalents, for designated centre with management and nursing complements as required in Regs.14 and 15

3.3 Arrangements for the management of Áras Chois Fharraige where the person in charge is absent from the centre

3.2 The organisational structure of the designated centre

Section 4: Residents’ Wellbeing and Safety
4.1 The arrangements made for dealing with reviews of the resident’s care plan referred to in Regulation 5

4.2 Details of any specific therapeutic techniques used in Áras Chois Fharraige and arrangements made for their supervision

4.3 The arrangements made for respecting the privacy and dignity of residents

4.4 Arrangements for residents to engage in social activities, hobbies, leisure interests

4.5 The arrangements made for consultation with, and participation of, residents in the operation of the designated centre
4.6 The arrangements made for residents to attend religious services of their choice 19

4.7 The arrangements made for contact between residents and their relatives, friends and/or carers 19

4.8 The arrangements made for dealing with complaints. 20

4.9 Fire precautions and associated emergency procedures in Áras Chois Fharraige 22

Section 5: Arrangements for the Inspection of the Home 24

Section 6: Room Schedule 27

Section 7: Complaint Procedure 28

Section 8: Áras Chois Fharraige HIQA Registration Certificate 29
Section 1
Registration Details

Information set out in the Certificate of Registration: Áras Chois Pharraig Nursing Home was last registered as a designated centre by the Health Information and Quality Authority on the 17th January 2014 under registration number REG-0011121. Registration expires the 16th January 2017. Registration is subject to a number of conditions which are set out in the registration certificate (Appendix 1) and also displayed in reception. Registration under the Health Act 2007 is for 42 residents and the maximum number of residents that will be accommodated is 42.
Section 2
Services and Facilities Provided in the Designated Centre

2.1 (a) Aims and objectives of the designated centre: A Nursing Home was established at Park in 1972 to provide residential care facilities for physically and mentally dependent elderly of the Connemara area who could no longer be looked after in their own homes. In March 2009 this building was demolished and a new home, Áras Chois Fharraghe, opened in its place.

The purpose of the new home is to provide long term residential care for the elderly in a homely environment that promotes privacy, dignity and choice within a building that is safe and clean, comfortable and welcoming, with a design and facilities that will enable and promote independence. Our aim is to provide a place where one can feel at home and secure while still living in the local community, close to family and friends.

The home is located in the Irish speaking Cois Fharraghe area of the Connemara Gaeltacht and there is an emphasis on meeting personal and social care needs through the medium of the Irish language and creating an environment with which residents are familiar and at ease. Beidh Gaeilgeoirí líofa ón gcéantar máguaírd ag obair san áras chun freastal orthu siúd gurbh í an Ghaeilge a dteanga dúchais. A majority of residents, relatives and staff are fluent native speakers. At any given time many of the residents will already be familiar with or had a previous connection with the home and the care staff, either by way of repeat admission, relationship to previous residents/staff or indeed have been a past visitor to the home themselves.

We will continue this tradition of caring for our local Irish speaking elderly and employing people from the local community. In this way we aim to provide an Irish speaking environment that is ‘home-like … where the holistic needs of the residents take precedence over all other matters’ and that reflects the culture, customs and ethos with which they are most familiar. We acknowledge that we have a duty of care to our residents and aspire to bring continuity and
stability to their lives with staff willing to be directed in their work by the expressed needs and preferences of each individual resident. Our goal is to assist our residents in living as normal a life as possible in accordance with their express choice.

Staff will be encouraged at all times to follow the sentiments of Virginia Henderson who characterised the role of the nurse as - ‘doing for the patient what they would do for themselves if they could’.

(b) The specific care needs that the designated centre is intended to meet: The principal function of the home is to provide Long Term Residential Care Services to meet the physical and mental needs of those dependent elderly who can no longer live alone in their own homes with particular emphasis on the Social, Emotional and Cultural needs of Irish speaking elderly from the Connemara area. Convalescent and respite care may be provided subject to assessment, bed availability, and our ability to satisfy your needs. Nursing care covers a wide range of conditions such as Parkinson’s, diabetes, stroke and mild forms of Alzheimer’s. The home is not a dementia specific unit so we are unable to deal with residents suffering from severe forms of dementia, challenging or aggressive behaviour. Due to the age profile of our existing residents we feel the home is unsuitable for those under 65 years of age.

(c) The facilities which are to be provided by registered provider to meet these care needs: Facilities Internal – Áras Chois Fharraige Nursing Home is a modern purpose built unit designed in accordance with the principle of Universal Access and incorporating facilities that serve to maintain and enhance privacy, dignity and choice within a safe and secure environment where independence is promoted and people can move freely both within and outside the home without undue or unnecessary restrictions. The internal environment is warm and comfortable. To benefit from passive solar gain the windows on the South elevation are significantly larger than those on the North elevation. Thermostatically controlled heating utilising 50sqmtrs of solar panels, under-floor heating, a very high level of insulation and passive solar gain from the southern aspect provide maximum comfort to residents. Ventilation in the home
complies fully with the DoE Technical Document F. All areas of the home have natural ventilation supported by a heat recovery ventilation system that provides warm fresh, un-recycled air so you never need to open a window. In addition, three of the day rooms have air conditioning to alleviate the discomfort of very hot weather. This is supplemented by the large South facing windows which provide plenty of natural light and spectacular sea views giving a greater sense of wellbeing to residents and staff.

The home is creatively designed in a manner that safely accommodates residents’ mobility, audio and visual needs. The layout encourages and aids independence with colour contrast used to assist the visually impaired. The edges of the corridors and steps are highlighted in contrasting shades. Each floor is a different colour to assist in way-finding. Colour contrast has also been used for handles, grab rails, door frames and the handrails in the corridors. Many safety features have been incorporated in the design. All entrances have level access, including the internal courtyard and outdoor terraces creating easy wheelchair use throughout. All corridors are wide enough to allow two wheelchairs to pass easily or to turn. All door openings are wide enough for a wheelchair to pass through with ease and have automated door closers enabling those with mobility aids to go in and out safely. Handrails throughout the building make it easy for those with limited mobility to access all areas. Maintained 24hr lighting in the east, west and northern corridors ensures a high level of lighting throughout, ideal for those with failing eyesight. Windows are all equipped with retarders to prevent accidents and sensor automated lighting is provided in the stairwells. In addition there is secure access control to external doors and all areas posing a risk to the safety of residents. In keeping with the principle of Universal Access, all ensuites have level access and are wheelchair friendly. To safeguard against slips, trips and falls a wet room system is utilised with no steps or shower trays, nonslip flooring and colour contrasted grab rails. In the event of a fall the rubber material is much more forgiving than ceramic tiles.

Every effort has been made to ensure high levels of infection control throughout the building to reduce the risk of cross infection or of acquiring MRSA, winter vomiting bug or other hospital acquired infection. There is an en-suite off every bedroom to ensure personal toileting facilities. These have been designed as wet rooms with no tile grout joints to harbour bacteria with the shower area, sink and toilet easy to steam clean.

For hand hygiene purposes sinks with sensor activated taps and hand sanitisers are located along the corridors and just inside the front door. All bedding and curtains are made with a Drapilux ‘bio-activ’ anti-microbial fabric. The marmoleum floors have anti-microbial properties and coved skirting fitted in all communal areas for ease of cleaning.

Mains water is double filtered and then treated
using UV units which are able to deactivate microbiological pollutants such as bacteria, viruses, moulds, spores, yeasts and so on. UV disinfection is 99.99% effective and does not allow micro-bacteria such as Cryptosporidium or e-coli to get into the system. The Laundry is fitted with commercial machines with appropriate sluice and disinfection programs.

The kitchen walls are clad in ‘Altro Whiterock’. This is an hygienic alternative to tiles and is impact resistant, grout-free and easy to clean. It is made from a high-quality, food-safe PVCu polymer that can handle temperatures up to 60°C, and meets all current EU Directives on health and hygiene and is HACCP approved.

This makes it particularly suitable for use in food preparation areas as it is so easy to clean and maintain. In addition the kitchen has a stainless steel fit-out to a commercial standard making it easy to maintain and fittings are steam cleaned at regular intervals.

(d) The services which are to be provided by the registered provider to meet those care needs: For the avoidance of doubt the Long-term Residential Care Services provided by the home to meet the care needs of residents shall have the meaning assigned to it by the Nursing Home Support Scheme Act, 2009 and shall include - Bed and Board; Nursing and personal care needs appropriated to the level of care needs of the person; Bedding; Laundry Service and Basic aids & appliances necessary to assist a person with the activities of daily living. Twenty four hour nursing care will be provided by a team of nurses and care assistants.

The Registered Provider will also ensure that a
Doctor chosen by or acceptable to the Resident is available for medical treatment and advice and where medical treatment is recommended by a medical practitioner and agreed by the Resident such treatment is facilitated but for the avoidance of doubt the Proprietors shall not be responsible for payment for such treatment or the provision of specialist equipment. Therapies such as occupational; Speech and Language; Physio; Chiropody; Specialised wheelchairs, beds or equipment; Ophthamlic or Dental Services; Transport to appointments or hospital including care assistant costs; attendance of a personal health care assistant or one to one nursing will be subject to an additional charge. The above list is not exhaustive, however, if extra charges arise for these or any other additional services that are outside the scope of the Nursing Home Support Scheme Act, 2009 they will be explained to you and only applied with your consent and after full consultation with you.

Residents not covered by GMS scheme shall pay for GP attendance by separate arrangement with and a rate agreed by them with the GP. Residents not covered by GMS scheme shall pay for drugs/dressings by arrangement with and at a rate agreed by them with the pharmacist. Residents treated by their GP under GMS scheme will receive medical attention, drugs & dressings in accordance with rules of GMS scheme and will pay charges or levies by arrangement with GP or Pharmacist. The Proprietor shall ensure, insofar as is reasonably practicable, that a pharmacist of a resident’s choice or acceptable to the Resident is available to the resident. Continence wear is currently provided by HSE free of charge to all GMS residents.

At Áras Chois Fharraige we ensure that the Resident is provided with the option to avail of facilities for occupation and recreation available to all residents and it is acknowledged that in the case of
such services which may also involve group activities that additional Nursing Home Service charge may apply as set out in paragraph B of Schedule 1, – ‘Non Long-term Residential Care Services’.

We provide the Resident with information concerning current affairs, local matters and community resources while ensuring that they are provided with privacy, insofar as is reasonably practicable.

We provide residents with arrangements to facilitate, insofar as is reasonably practicable, the exercise of his/her civil, political and religious rights and ensure insofar as is reasonably practicable access to independent advocacy services.

We carefully consider any suggestion from residents or from their family or other relevant persons to maximise his comfort and care.

We ensure that residents are free to communicate at all times, having regard to his/her and other residents’ well-being, safety and health and ensure appropriate arrangements are made to receive visitors.

We ensure residents have access to a safe supply of fresh drinking water at all times and are provided with food & drink in quantities adequate for their needs.

We ensure that any dietary restrictions applying to a resident on medical or religious grounds shall be facilitated.

We ensure that all reasonable measures are taken to protect all residents from all forms of abuse; and ensure at all times the privacy, dignity & choice of the Resident shall be respected.

Our Activities/Recreation Coordinator arranges and runs the social care programme and activities to include various musicians and groups; Butterfly Company; animal therapy; hen run; ‘Imagination Gym’; bingo; card games; knitting; arts and crafts; birthday and special occasion parties; gardening; exercise class; film nights; multichannel flat screen TVs and radio in all bedrooms; varied selection of newspapers and magazines for general use, religious services; weekly physiotherapy session for general participation with individual assessments on admission and quarterly thereafter; special outings; hair/beauty therapy; etc. This list is not exhaustive and may change from time to time. At Áras Chois Fharraige we welcome suggestions/input from all residents and family members into the Social Programme.

(e) criteria used for admission to the designate centre, including the designated centres policy & procedure (if any) for emergency admissions: Admission is generally by referral from Doctor or Hospital subject to a prior nursing needs assessment being carried out. If admission is as a result of an emergency we will do everything possible to provide you with all the necessary information to enable you to make an informed decision as to what future course of action to take.
2.2 Age-range and sex of residents for whom it is intended accommodation should be provided: The age range of residents in Áras Chois Fharraige is from 65 upwards with the majority between 75 and 85 years of age. Both males and females are accommodated with an average mix of 40% male and 60% female.

Facilities External: There is path around the building with a continuous handrail for residents who enjoy a little outdoor exercise and to assist in accessing the grassed and planted areas that surround the building. The path leads to a raised circular patio overlooking the stream on the eastern boundary where one can sit and enjoy the sound of rippling water and the morning sun from the south east. On the first floor there is a large south facing roof terrace off the communal area with planting and seating areas as well as a smaller terrace off the east wing ideal for sitting out on warm summer days. There is a secure internal courtyard, complete with circles of interlocking paving, planting and a raised stone area featuring a pond where water trickles over the rocks. Two of the communal areas and six of the bedrooms have direct access to this area which is ideal for those who wish to indulge in a little gardening or just to sit out on sunny days. All entrances have level access, including the internal courtyard and outdoor terraces, allowing wheelchair users and those with mobility problems easy access to all the external facilities of the home.

2.3 A description (either in narrative form or of a floor plan) of the rooms in the designated centre including their size and primary function: Accommodation is provided on two levels in 34 single (minimum 17.5 sq.mtrs) and 4 sharing bed rooms (minimum 25 sq.mtrs), each
bedroom inclusive of wheelchair friendly en suite. All bedrooms benefit from the following features –

- User friendly automated door closers that only activate when the fire alarm goes off, making it easy for those with wheelchairs or walkers to get around the home
- Locking bedroom doors with your own door key (single rooms only)
- Under floor heating with individual room heating controls
- Automated Ventilation system with heat recovery creating a warm, odour and dust free environment - no need to open windows!!!
- Flat screen TV with 11 TV and radio channels (available on request).
- Light control by bed, dimming facility, 4 x double sockets & Emergency call bell.
- Electrically operated 3 way profiling beds.
- Window openers fitted with retarders to restrict opening.
- Pressure relieving mattresses
- Wheel Chair friendly en-suites with grab rails, rubberised flooring to avoid slips.
- Anti-Microbial and MRSA resistant floor finishes, curtains and bedding.
- Telephone point in all bedrooms (resident responsible for connection)

Áras Chois Fharraige Nursing Home provides facilities that promote privacy, dignity, choice and independence within a safe environment and we will work with you to make your bedroom your very own personal space. You can make it
more homely by bringing in some of your own belongings. If you would like to put up shelving, hang pictures or rearrange the room to your liking we will assist you in any way we can. There is a full time maintenance person on hand, who is more than happy to take instruction from you. If you don’t like the colour of the paintwork we will redecorate and change it for you. This is your space, your room, your home and we want you to be happy here. To this end, we will do, within reason, whatever it takes to help you put your own personal stamp on the room and create your very own home from home.

There is a large lift between the floors fitted with an alarm, handrails, mirror and Braille signage. There are 8 communal areas spread around the home. Two sitting rooms, the sun lounge, the boardroom and the two dining areas have South facing sea views. Another sitting area and a smoking room open onto the internal courtyard. The number of communal areas allow for various activities to take place simultaneously and groups to congregate. For example, a family group can have the private use of the Boardroom to celebrate a resident’s birthday or those who enjoy bingo or cards can meet in another. A room schedule is attached at the rear of this document detailing the area and orientation of the various rooms.

2.4 Any separate facilities for day care: There are no separate facilities for day care at Áras Chois Fharraige.
Section 3
Management and Staffing

3.1 The total staffing complement, in whole time equivalents, for the designated centre with the management and nursing complements as required in Regulations 14 and 15

The staffing complement is composed of 44 full and part time persons and is shown below in terms of full time equivalent staffing:

<table>
<thead>
<tr>
<th></th>
<th>Staff numbers</th>
<th>Full time equivalents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manager (Reg’d Provider)</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Person in Charge</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>CNMs (PPIs)</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Staff Nurses</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>Activities Co-Ordinator</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Care Assistants</td>
<td>25</td>
<td>18</td>
</tr>
<tr>
<td>Chefs</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Cleaning &amp; Maintenance</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total staff numbers</strong></td>
<td><strong>44</strong></td>
<td><strong>33</strong></td>
</tr>
</tbody>
</table>

Arrangements for the management of a designated centre where the person in charge is in charge of more than one centre or absent from the centre or centres concerned: Áras Chois Fharraige Nursing Home is a standalone nursing home, privately owned and not part of a group. As a result the Person in Charge is not involved in the management of more than this centre.

Where the Person in Charge of Áras Chois Fharraige proposes to be absent from the designated centre for a continuous period of 28 days or more, the Registered Provider will give notice in writing to the Authority of the proposed absence. Except in the case of an emergency, the Registered Provider will give this notice no later than one month before the proposed absence. In this notification the Registered Provider will
inform HIQA of: (a) the length or expected length of the absence; and (b) the expected dates of departure and return.

Where the Person in Charge is absent as the result of an emergency, the Registered Provider will, as soon as it becomes apparent that the absence concerned will be for a period of 28 days or more, give notice to HIQA. In all cases, the Registered Provider will notify the Authority of the return to duty of the Person in Charge not later than 3 working days after the date of his or her return.

In all cases, in the absence of the Person in Charge from the centre, one of the 2 CNMs will act up in her absence. After notifying the Authority of same the Registered Provider will ensure that he provides adequate support to the CNM while acting up in the role.

The organisational structure of the designated centre:

[Diagram of organisational structure]

Registered Provider — Support staff: HR, Finance, Admin, IT

Person in Charge

CNMs

Nurses

Maintenance — Senior Health Care Assistants — Activities coordinator — Chefs

Cleaner — Health Care Assistants

External contractors
Section 4
Residents’ Wellbeing and Safety

4.1 The arrangements made for dealing with reviews of resident’s care plan referred to in Reg. 5: It is our aim to provide person centred care and all residents have individualised care plans. Care plans will be reviewed at least 3 times a year by the Person in Charge or more frequently if necessary.

A resident is welcome to view or have input into their care plan any time and their input will form an important part of the review process. In addition the GP and Pharmacist do a quarterly review of medication and attend weekly at the home when you are free to raise matters of concern with them.

4.2 Details of any specific therapeutic techniques used in the designated centre and arrangements made for their supervision:
Various Beauty, Massage and other therapies are provided. These are generally provided in house by members of staff, all of whom have been recruited in accordance with current legislation and the National Quality Standards.

Where it is necessary to use outside providers other than HSE staff, they will be only engaged on presentation of satisfactory confirmation of identity, Garda vetting and verification of qualifications. They will be accompanied or supervised by a member of staff whenever it is deemed necessary by the Person in Charge.

4.3 The arrangements made for respecting the privacy and dignity of residents:
34 of the bedrooms are single with wheelchair accessible en-suites ensuring that the privacy and dignity of the resident is protected at all times. No more than two residents will be accommodated in each of the 4 twin rooms and only if both parties are agreeable to share. These are large rooms, fitted with rigid wall mounted partitioning or fixed privacy screening to provide each resident with their own space. These bedrooms also have fully accessible wheelchair friendly ensuites.

Áras Chois Fharraige provides facilities and a safe environment and we work with residents to make your bedroom your very own private space. You can make it more homely by taking in some of your own belongings if you want.

There is a full time maintenance person on hand to assist you. If you would like to put up shelving, redecorate or do within reason what it takes to put your own personal stamp on the room please ask and we will try to assist you in any way we can.

Staff are trained in delivering personal care and will always knock before entering your room. All residents of single rooms have the benefit of their own private room key should they request it.

All locking mechanisms are fail safe so there is no danger that you could be locked into your room.
4.4 The arrangements for residents to engage in social activities, hobbies and leisure interests: There is an active Committee of Residents & Relatives called ‘Cairde Chois Fharraige’ to promote social activities and interaction with the local community. An important function of this committee is to further the objectives of our social activities group ‘Cairde Chois Fharraige’ and facilitate outings and events with the help of people from the various local voluntary groups underlying principle extends to making the Áras available to support local cultural activities and promote involvement of residents in the on-going life of their community.

The committee also arrange for entertainers and groups to visit the home at regular intervals providing entertainment by way of music sessions, shows and animal therapy. Other arrangements for residents to engage in social activities, hobbies and leisure interests are varied and organised by our full time Social Activities Co-ordinator. Current activities include: bingo, card games, knitting, sing-alongs, parties, exercise class, ‘Imagination Gym’, An Siopa Beag, gardening, film nights, television, radio, newspapers and outings.

4.5 The arrangements made for consultation with, and participation of, residents in the operation of the designated centre: A Residents Committee underpins the right to privacy, dignity and choice and provides a forum where residents and relatives can play an active part in the operation of the home and voice comment or complaint about any aspect of the service. There is an active Management Committee made up of Residents & Relatives for consultation on all aspects of the home. The committee is organised by the Social Activities Coordinator and is chaired by a well-known and
respected independent person from the local community. The committee meets approximately 6 times a year and every effort is made by Management to encourage attendance. The Provider, Person in Charge and Social Activities Coordinator are available at all times to discuss operational matters relating to the home and all suggestions are welcomed and given due consideration.

4.6 The arrangements made for residents to attend religious services of their choice: Mass is celebrated once a month by arrangement with the parish priest and Eucharistic Ministers attend 1 morning every week. Most evenings there is Rosary recital in the sun porch after - 6pm Angelus, courtesy of two of our residents and recited as ‘Gaeilge’. There is also a dedicated religious channel available on the television.

Whereas the ethos of the home and the current residents are Roman Catholic, should the occasion arise we will be more than happy to support residents of different religions or no religion at all in the practice of their beliefs. We will facilitate this by provision of your own single room which you can personalise in any way you wish with religious iconography, pictures and statues reflecting your belief. In this regard we will be informed by the Health Services Intercultural Guide and will provide contact details, phone numbers and web addresses to assist you. All residents are encouraged to participate in civil and political matters and voting is facilitated in house for those who wish to participate.

4.7 Arrangements made for contact between residents and their relatives, friends and /or carers: There is an open visiting policy between 11am-8pm and we can facilitate you at other times by prior arrangement. The home is spacious and there are adequate facilities for residents to meet visitors privately and separately from the residents’ own private room or in any one of the various communal areas throughout the home.

Should you wish to reserve our Boardroom for a larger family group or private party this can be arranged by request and we will be more than happy to provide tea, coffee, sandwiches should you require. Well behaved family pets can also be brought along for a visit by prior arrangement with the Person in Charge. We have recently commenced a service involving SKYPE so
Residents can contact relatives abroad and enjoy face to face phone calls. You can also visit our new webpage www.thearas.com to keep up with all the goings on in the home.

4.8 The arrangements made for dealing with complaints: Áras Chois Frarraige Nursing Home is committed to creating an atmosphere where residents, relatives and staff should feel free to voice any Concerns or Complaints that they may have with regard to the care provided within the nursing home.

A copy of the Complaints Policy & Procedure is displayed in reception and is designed to cover comments, suggestions and complaints about any matter which gives cause for concern to residents or relatives. All incidents will be fully investigated, impartially and promptly. The aim is to satisfy the complainant, and anyone else concerned, that this has been done, and that the appropriate action has or will be taken.

Comments and suggestions affecting residents’ services shall be investigated promptly and a follow-up reply made to the person concerned. Complaints can be formal or informal. A formal complaint may be oral or written, and is a complaint which the complainant wishes to have investigated by senior staff, and on which he/she wishes to have an oral reply from a senior staff member, or a written reply from management.

If there is any doubt, the complainant should be asked if he/she wish to make a formal complaint. As soon as it has been established that a resident, or a relative or some other person acting on behalf of a resident, wishes to make a formal complaint, the nurse should report the matter to the Senior Nurse who will inform the Person in Charge. It should also be explained to the complainant they are to by-pass this process and complain directly to Person in Charge or Registered Provider.

Many of the matters that trouble residents can be dealt with informally when they arise. Any comments or misgivings voiced by residents or their relatives should be listened to sympathetically. An acceptable answer/explanation can often be provided on the spot.
When remedial action has been, or is to be taken on the matter in question, this should always be fully explained to the complainant. When a minor criticism has been dealt with in this way and the complainant is satisfied, a record of this is kept in the resident’s care plan, and recorded in the complaints log book. The Person in Charge is informed verbally of the occurrence, and will contact the complainant to confirm that they are satisfied with the outcome.

**Oral Complaints:** Oral complaints should be dealt with wherever possible at the time and they should be given the same attention as written complaints. If oral complaint proves to be more that a minor matter and cannot immediately be resolved, the member of staff complained to, should refer the matter to a senior member of staff. A written entry should be made in the residents care plan, and recorded in the complaints log book, by the person dealing with the matter, even if the complainant appears satisfied. The Person in Charge will contact the complainant to confirm that they are satisfied with the outcome.

**Written Complaints:** When the matter is potentially serious, or the complainant does not appear to be satisfied, a written record of the complaint should be made and given to the Person in Charge or a person not involved in the complaint for further investigation and action. An acknowledgement to a written complaint will be sent within 5 working days.

The complaint will be investigated and the complainant will be made aware of the results as soon as possible (a written response and invitation to a meeting will be sent within 28 working days).

A written record of the incident is completed by the Person in Charge. A person other than the person investigating the complaint will be nominated to maintain any records related to the complaint as specified under Regulation 34, (1)(f).
If the complainant is not satisfied with the outcome, they may appeal and request that the complaint be reviewed by our external independent reviewer: Mr. Aodan MacDonncha, Park, Spiddal, Co. Galway.

If you have made a complaint to the Management of Áras Chois Fharraige and if you are not satisfied with the decision in relation to your complaint it is now open to you to contact the Office of the Ombudsman.

The Ombudsman provides a free, impartial, independent service. The Ombudsman can by law examine complaints about any of our administrative actions or procedures as well as delays or inaction in our dealings with you.

The Ombudsman’s remit relates to complaints about actions which occur on or after 24 August 2015. The Ombudsman cannot examine complaints about actions which occurred before that date.

Contact details are as follows:
THE OFFICE OF THE OMBUDSMAN
18 Lower Leeson Street, Dublin 2.
Phone: LoCall 1890 22 30 30 or (01) 639 5600 Email: ombudsman@ombudsman.gov.ie
You can also make a complaint online using the online complaint form
www.ombudsman.gov.ie

A complainant may also make their concerns known to the Health Information and Quality Authority (HIQA) who inspect our services regularly to ensure that standards of care are being maintained. You can contact the Inspectorate by:
Calling the advice line 021 240 9660
Emailing inspections@hiqa.ie
Writing to the Office of the Chief Inspector, Health Information and Quality Authority, Social Services Inspectorate, 1301 City Gate, Mahon, Cork.

For the avoidance of doubt Part 10 of the 2013 Care and Welfare Regulations 2013 sets out the full statutory position with regard to the complaints process and the relevant extract is attached to the rear of this document.

4.9 Fire Safety precautions and associated emergency procedures: The home has been certified by our Architect as fully compliant with all Fire Safety legislation and the Building Control Acts 2000 – 2006. The Fire Safety File with relevant certificates and logs is available for inspection on request at reception. All staff are given Fire Safety Awareness Training on induction and regularly thereafter. To facilitate evacuation a “Fire Box” is maintained in reception with details of all residents, plans of the building and the fire safety files. Unannounced fire drills are conducted weekly and all Fire Safety equipment is maintained and serviced in accordance with the DoE Fire Safety Guidelines for Nursing Homes.

There is emergency lighting throughout the building with an addressable fire alarm system that identifies the exact location of the fire. All bedrooms have extra wide doors fitted with automated door closers that activate if the fire alarm sounds. All beds with non-ambulant residents are fitted with evacuation sheets. The flooring, furniture, mattresses, bedding and curtains are fire retardant.

There are 11 fire exits in total. The 1st floor is serviced by 3 exits by way of 1hr fire resistant stair wells. The ground floor has 5 main exits, 2 on the western elevation, 2 on the east and 1 to the front entrance. In addition there are an additional 3 dedicated fire exits, one each for the dining, sitting and sun porch areas. Fire integrity
between ground and first floor is by way of precast reinforced concrete slabs. The ventilation system is fire proofed by means of smoke activated dampers in the ducting to protect the fire integrity of individual compartments.

The building is divided into a number of one hour fire resistant compartments and each room has a half hour fire door with automated closer. In the event of fire residents will be evacuated into an adjoining compartment. The procedure to be followed in the event of fire is ‘Phased Evacuation’. The average compartment has 4 residents to enable easy management of the ‘phased evacuation’ process. Staff pager system gives advance warning before entire fire alarm system is activated. This gives staff a chance to assess the situation before any panic can arise. Dry risers, fire hose reels and fire extinguishers are provided throughout the nursing home together with emergency lighting. There are 3 alternating boilers to compensate in the event of one of the boilers breaking down. There is a Generator in place to protect against an electricity outage. Water storage of 20,000 litres is available in the event of disruption to the water supply. All water to the home passes through a sophisticated filtration system and Ultra Violet to ensure water is safe in the event that the local supply is affected by E.coli, Cryptosporidium or other contamination.

The building has a secure perimeter and all external doors are access controlled. However, in the event of a resident going missing from the building the ‘missing person’ drill is activated immediately. There is an emergency search and evacuation box in reception with high-vis vests, torches, space blankets, walkie talkies and a pre-programmed phone with emergency numbers on speed dial. To ensure continuity of heating an Emergency Action Plan is in place and an ERT (Emergency Response Team) has been formed to respond in the event of an emergency.
Section 5

Arrangements for the inspection of the home:
Page 2 of a typical inspection report gives a clear and concise outline of inspection arrangements and is copied here for your convenience.

The purpose of Inspection is to gather evidence on which to make judgements 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.’

Inspections are usually unannounced with the exception of that for Registration and are expected to take place twice a year. The Registration Inspection is usually scheduled because it involves a more thorough and in depth look at the nursing home operation and may require a team of up to three inspectors and take up to three days depending on the size and complexity of the designated centre. It is important to note that during inspections the residents, relatives and staff can all participate in and contribute to the inspection process. Interaction with the inspectors may be by way of questionnaire or interview. Generally inspection reports run to in excess of 25 pages and cover all aspects concerning the operation of the home.

Further information from HIQA can be obtained by writing to:
The Office of the Chief Inspector,
Health Information and Quality Authority,
Social Services Inspectorate,
1301 City Gate, Mahon, Cork
Advice Line: 021 240 9660
Emailing: inspections@hiqa.ie

Webpage: www.hiqa.ie/functions_ssi_inspect_rep.asp

Details of all inspection reports can be accessed on this site by going to the Nursing Home Inspection reports section.

HSE West no longer has the responsibility for Registration and Inspection of Nursing Homes. However, they do perform and process the medical and financial assessments required by those who wish to apply for the nursing home support scheme or Fair Deal.

Should you need further help or information in this regard their contact details are -

Nursing Home Support Office, Community Services, Western Area
Health Service Executive, Lá Nua,
Ballybane Neighbourhood Village
Castle Park Road, Galway
Telephone: (091) 741734
Terms & Conditions – pursuant to Art. 21 (b)(c)
The fees currently charged in the home are as follows:

**Private Residents:** €987 weekly

**‘Fair Deal’ Residents:** €889 weekly

The terms and conditions in respect of accommodation to be provided for residents is set out in our Standard Form of Contract for the provision of services and facilities by the Registered Provider to residents. A copy is attached for your attention.
Please note that a copy of this document has been made available to the Chief Inspector’s office. It will be kept under review and notification will issue to the Chief Inspector in writing with regard to any changes that are proposed to be made which could affect the Purpose and Function of the home.

Please find detailed below a number of useful contact numbers for organisations that may be able to provide information, advice and help across a range of issues.

<table>
<thead>
<tr>
<th>Advocacy Group</th>
<th>Phone Number</th>
<th>Fax Number</th>
<th>Email address</th>
<th>Postal address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age Action Ireland</td>
<td>01-4756989</td>
<td>01-4756011</td>
<td><a href="mailto:info@ageaction.ie">info@ageaction.ie</a></td>
<td>Age Action Ireland Ltd, 30/31 Lower Camden Street, Dublin 2</td>
</tr>
<tr>
<td>Citizens Information Board (formerly Comhairle)</td>
<td>01-6059000</td>
<td>01-6059099</td>
<td></td>
<td>Citizen’s Information Board, 7th Floor, Hume House, Ballsbridge D4</td>
</tr>
<tr>
<td>Irish Advocacy Network</td>
<td>047-38918</td>
<td>087-7540763</td>
<td>admin @irishadvocacy network.com</td>
<td>Irish AdvocacyNetwork Health Care Unit, Rooskey, Monaghan</td>
</tr>
<tr>
<td>Equality Authority <a href="http://www.equality.ie">www.equality.ie</a></td>
<td>1890245545</td>
<td>01-4173331</td>
<td><a href="mailto:info@equality.ie">info@equality.ie</a></td>
<td>The Equality Authority 2 Clonmel Street, Dublin 2</td>
</tr>
<tr>
<td>Irish Cancer Society <a href="http://www.cancer.ie">www.cancer.ie</a></td>
<td>01-2310500</td>
<td>01-2310555</td>
<td>helpline @irishcancer.ie</td>
<td>Irish Cancer Society, 43/45 Northumberland Road, Dublin 4</td>
</tr>
<tr>
<td>Irish HeartFoundation <a href="http://www.irishheart.ie">www.irishheart.ie</a></td>
<td>01-66850 01</td>
<td>01-6685896</td>
<td><a href="mailto:info@irishheart.ie">info@irishheart.ie</a></td>
<td>Irish Heart Foundation, 4 Clyde Road, Ballsbridge, Dublin 4</td>
</tr>
<tr>
<td>Irish Patients Association <a href="http://www.irishpatients.ie">www.irishpatients.ie</a></td>
<td>01-2722555</td>
<td>01-2722506</td>
<td><a href="mailto:info@irishpatients.ie">info@irishpatients.ie</a></td>
<td>Irish Patients Association Unit 2, 24 Church Road, Ballybrack, Co. Dublin</td>
</tr>
<tr>
<td>Mental Health Ireland <a href="http://www.mentalhealthireland.ie">www.mentalhealthireland.ie</a></td>
<td>01-2841166</td>
<td>01-2841736</td>
<td></td>
<td>Mental Health Ireland, Mensana House, 6 Adelaide Street, Dun Laoghaire Co Dublin</td>
</tr>
<tr>
<td>Patient Focus</td>
<td>01-8851611</td>
<td>01-8851617</td>
<td>support @patientfocus.ie</td>
<td>Patient Focus, Unit 9A Sky Business Centre, Plato Business Park, Damastown, Dublin 15</td>
</tr>
</tbody>
</table>
## Section 6

### Room Schedule

<table>
<thead>
<tr>
<th>Ground Floor Bedrooms</th>
<th>Single</th>
<th>Twin</th>
<th>Sq. Mtrs.</th>
<th>Ensuite</th>
<th>Total Area</th>
<th>Orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td></td>
<td>13.5</td>
<td>5.0</td>
<td>18.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>4</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>5</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>6</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>7</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>8</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>9</td>
<td>2</td>
<td></td>
<td>22.0</td>
<td>5.0</td>
<td>27.0</td>
<td>South - Courtyard</td>
</tr>
<tr>
<td>10</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South - Courtyard</td>
</tr>
<tr>
<td>11</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South - Courtyard</td>
</tr>
<tr>
<td>12</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South - Courtyard</td>
</tr>
<tr>
<td>13</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South East - Bay</td>
</tr>
<tr>
<td>14</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South East - Bay</td>
</tr>
<tr>
<td>15</td>
<td>2</td>
<td></td>
<td>21.0</td>
<td>5.0</td>
<td>26.0</td>
<td>South East - Bay</td>
</tr>
<tr>
<td>16</td>
<td>1</td>
<td></td>
<td>13.5</td>
<td>5.0</td>
<td>18.5</td>
<td>South - Bay</td>
</tr>
<tr>
<td>17</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>West - Courtyard</td>
</tr>
<tr>
<td>18</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>West - Courtyard</td>
</tr>
<tr>
<td><strong>1st Fl. Bedrooms</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>20</td>
<td>1</td>
<td></td>
<td>13.5</td>
<td>5.0</td>
<td>18.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>21</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>22</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>23</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>24</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>25</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>26</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>North - Rural</td>
</tr>
<tr>
<td>27</td>
<td>1</td>
<td></td>
<td>14.0</td>
<td>5.0</td>
<td>19.0</td>
<td>Dual Aspect</td>
</tr>
<tr>
<td>28</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South - Bay</td>
</tr>
<tr>
<td>29</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South - Bay</td>
</tr>
<tr>
<td>30</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South - Bay</td>
</tr>
<tr>
<td>31</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South - Bay</td>
</tr>
<tr>
<td>32</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>West - Bay</td>
</tr>
<tr>
<td>33</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>West - Bay</td>
</tr>
<tr>
<td>34</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>West - Bay</td>
</tr>
<tr>
<td>35</td>
<td>1</td>
<td></td>
<td>15.0</td>
<td>5.0</td>
<td>20.0</td>
<td>South - Bay</td>
</tr>
<tr>
<td>36</td>
<td>2</td>
<td></td>
<td>21.0</td>
<td>5.0</td>
<td>26.0</td>
<td>South East - Bay</td>
</tr>
<tr>
<td>37</td>
<td>1</td>
<td></td>
<td>12.5</td>
<td>5.0</td>
<td>17.5</td>
<td>South East - Bay</td>
</tr>
<tr>
<td>38</td>
<td>2</td>
<td></td>
<td>20.0</td>
<td>5.0</td>
<td>25.0</td>
<td>South East - Bay</td>
</tr>
</tbody>
</table>

| Ground Floor Communal | Sitting Room | 34.0 | South - Bay |
|                       | Dining Room  | 34.0 | South - Bay |
|                       | Sun Porch    | 20.0 | South - Bay |
|                       | Reception    | 20.0 | East - Courtyard |
|                       | Smoking Room | 10.0 | East - Courtyard |

### First Floor Communal

| Sitting Room | 1 |
| Dining Room  | 1 |
| Boardroom    | 20.0 | South - Bay |

Total Sitting & Dining Space: 8 * 180 = 1440 Sq Mtrs.

Sitting & Dining Per Bed space: 4.3 Sq Mtrs.
Section 7

Complaints Procedure:
1. The registered provider shall provide an accessible and effective complaints procedure which includes an appeals procedure, and shall:
   a) make each resident and their family aware of the complaints procedure as soon as is practicable after the admission of the resident to the designated centre concerned,
   b) display a copy of the complaints procedure in a prominent position in the designated centre,
   c) nominate a person who is not involved in the matter the subject of the complaint to deal with complaints,
   d) investigate all complaints promptly,
   e) a complainant to understand the complaints procedure,
   f) ensure that the nominated person maintains a record of all complaints including details of any investigation into the complaint, the outcome of the complaint and whether or not the resident was satisfied,
   g) inform the complainant promptly of the outcome of their complaint and details of the appeals process,
   h) put in place any measures required for improvement in response to a complaint.

2. The registered provider shall ensure that all complaints and the results of any investigations into the matters complained of and any actions taken on foot of a complaint are fully and properly recorded and that such records shall be in addition to and distinct from a resident’s individual care plan.

3. The registered provider shall nominate a person, other than the person nominated in paragraph (1)(c), to be available in a designated centre to ensure that:
   a) all complaints are appropriately responded to; and
   b) the person nominated under paragraph (1)(c) maintains the records specified under in paragraph (1)(f).

4. The registered provider shall ensure that any resident who has made a complaint is not adversely affected by reason of the complaint having been made.
Section 6
Áras Chois Fharrage HIQA Registration Certificate
COME STAY WITH US A WHILE

WWW.THEARAS.COM