

NHI NEWS

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NHI 
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SUMMER 2017

STAGNATION

**NUMBERS FINANCIALLY SUPPORTED
BY FAIR DEAL**

HEALTH & WELLNESS

NURSING HOMES BENEFITS FOR
WIDER COMMUNITY

END OF LIFE CARE

COMFORT & REASSURANCE
ON FINAL JOURNEY

PROVIDING LEADERSHIP

SUPPORTING MEMBERS

PROMOTING EXCELLENCE

Stats point to older persons with higher complex care needs presenting for nursing home care



Tadhg Daly,
Chief Executive Officer,
Nursing Homes Ireland

"There is a trend emerging that people are applying for the scheme later in life than in previous years and consequently average lengths of stay are decreasing. In 2015, 68.1% of applicants were aged 80 years and over whereas in 2012, 66.6% of all applicants were aged 80 years and over," Health Service Performance Report December 2015, Performance Report Supplementary Commentary

"This is a comprehensive process and has been put in place to ensure that there is no doubt surrounding whether a person has a requirement for long-term nursing home care or not," Minister of State for Older Persons Helen McEntee speaking in Dáil Éireann regarding the Common Summary Assessment Report and Local Placement Forum processes that assess a person's eligibility for financial support under the Nursing Home Support (Fair Deal) Scheme.

An analysis of the Fair Deal scheme informs over the three-year period 2013 to 2016 there has been relative stagnation in the numbers financially supported by the scheme. Given the growth in numbers growing older, this data would likely surprise many.

Early April the CSO published its Census 2016 Summary Results. These informed the number of persons most dependent upon nursing home care – persons aged 85+ - increased by approximately 18.1% over the period 2011 to 2016. The growth in numbers availing of the Fair Deal scheme over the corresponding period was 11% and over the past three years the numbers availing of the financial support have increased by 0.58%.

At year-end 2013, 23,007 persons were financially supported by Fair Deal. By year end 2016, 23,142 persons were availing of the financial support. Over the 12 month period 2015 to 2016, net 69 additional persons were supported by the scheme.

The relative stagnation in overall numbers availing of Fair Deal is reflective of the aforementioned 'trend' of people applying for the scheme later in life. Persons are entering nursing home care with increasingly complex care needs and average length of stay is decreasing.

This data is removed from the narrative being advanced within some of the discussion concerning home care that

people are being 'admitted' into nursing home care unnecessarily. It is disappointing that the home care discussion can, at times, move into a 'home care' v 'nursing home care' narrative. This disappointingly leads to polarisation within health discussion. The real issue is ensuring the appropriate care within the community, that is most appropriate to the older persons care needs, is readily available and resourced to meet their requirements. This is imperative to ensure people can avail of care within their community, removed from acute health settings. By year-end 2016, 436 persons were within our acute hospitals classified as 'delayed discharged'. By contrast, in October 2014, the number affected was almost double – at 832 persons. It was a €74 million investment in April 2015 that enabled the high number of persons requiring nursing home care to avail of it when required that provided the lead to enable the State tackle delayed discharge numbers.

The HSE statistics inform of the critical and lead role nursing home care is fulfilling in this regard. 2016 saw a 64% increase, year-on-year, in the number of persons transferring from acute hospital to private nursing home care under the transitional care initiative. 7,342 persons, an average 612 per month, transferred from acute hospitals to private and voluntary nursing home care under the transitional care bed initiative.

Almost three times as many persons moved to private and voluntary nursing home care in 2016 by comparison with HSE nursing homes. 6,430 availed of Fair Deal to move to move to private or voluntary nursing home care; 1,691 persons moved to HSE care. Net 448 additional persons were Fair Deal supported in 2016 in private and voluntary nursing homes. This contrasts with a 1,100 net increase the preceding year, with 2016 reflecting further the slowdown in number of persons being supported by Fair Deal.

Last year, net 148 fewer persons were Fair Deal supported in HSE nursing homes. This is reflective of an overall decrease in numbers receiving care in such nursing homes. In 2011, 5,397 persons were Fair Deal supported in HSE nursing homes and by year-end 2016 the number was 4,767, a 630 person or 11% decrease.

As stated by Minister with Responsibility for Older Persons Helen McEntee within Dáil Éireann in February, and informed of within this newsletter, the process to ascertain a person's eligibility and suitability to avail of Fair Deal financial support leaves "no doubt" surrounding the person's requirement for nursing home care.

NHI representations brought before politicians, health and older person stakeholders have emphasised dilution of the Fair Deal budget would bring into effect a practice that would discriminate against older persons requiring particular specialist 24/7 care. Furthermore, the co-payment scheme operated by Fair Deal cannot be replicated for people requiring home care, a point now widely acknowledged. The Department of Health and older person representative organisations have now acknowledged taking from Fair Deal is not workable, would be counterproductive and would

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READ ALL ABOUT US

A Co Kildare nursing home boosted its Wi-Fi to enable 92-year-old Doreen Thew continue using Skype, Snapchat, shop online and search the world-wide-web. Doreen was recently crowned Silver Surfer of the Year. Blessings at a Dún Laoghaire nursing home to mark the opening of its new extension are featured within this issue, and a Co Tipperary nursing home hosted a Strictly Come Dancing event to raise valuable funds for mental health services. And in Co Louth, 33 pieces of art by nursing home residents went on display.

NHI UPDATES

NHI meeting with Minister for Public Expenditure and Reform Paschal Donohoe, planned use of prefabs for acute hospitals, Census 2016 and a Seanad Éireann debate re geriatricians in nursing homes all feature within NHI Updates.

NEWS UPDATE

2016 saw a 64% increase in the number of transitional care discharges from acute to nursing home care, this edition's News Update informs. Also within News Update, HSE Director General Tony O'Brien has stated many HSE nursing homes have changed little from when they were workhouses. Minister for Older Persons Helen McEntee TD has informed Dáil Éireann the comprehensive process to assess a persons eligibility for Fair Deal financial support leaves "no doubt" surrounding whether a person has a requirement for nursing home care or not. An Taoiseach Enda Kenny has stated home care funding cannot be integrated into the Nursing Home Support Scheme. The European Health Consumer Index informs Ireland is ranked 22nd of 34 countries with regard to nursing home and elderly care bed availability by comparison with other countries surveyed. Read further within our News Update section.

SELECT NHI MEMBER SERVICES

Read of selected NHI Member services. Within this edition we inform of our ongoing analysis of Fair Deal fees, the appointment of Ms Ciara Carty as NHI HR Advisor, our Garda Vetting service, regular news bulletins, and our partnered recruitment agencies for 2017.

DATES FOR YOUR DIARY 2017

Key NHI dates for your diary.

FAIR DEAL NUMBERS SUPPORTED

The numbers financially supported by the Fair Deal scheme remained relatively stagnant over the three-year period 2013 to 2016, an analysis of the HSE Performance reports informs.

MY NURSING HOME LIFE

25-year-old Philip Archbold fulfils the role of carer at AnovoCare Nursing Home, Swords, Co. Dublin. Philip describes initiatives he has undertaken within the nursing home to support residents wellbeing, the important attributes for a carer within a nursing home, and what his role entails.

BEST PRACTICE

A health and wellness centre has been developed at a Co Clare nursing home to provide a wide range of services that provide health and wellbeing benefits to older people in the local community. The concept opens the nursing home to the wider community. Last April the centre became a hub within the county for a programme of talks and activities surrounding older person wellbeing.

END OF LIFE CARE

The ethos surrounding end-of-life-care at a Co Tipperary nursing home is based upon openness and dialogue. A comprehensive training programme has enabled staff to deter unnecessary admissions to hospital for end-of-life care and enabled them be comfortable and competent in planning and coping with the emotional demands of meeting expectations and providing this specialist care. The article explains the journey staff have undertaken to create an environment that embraces end-of-life care and ensures a reassured and comforting approach is in place to support residents making their final journey and to support their family and friends.

present considerable problems for care delivery. An Taoiseach Enda Kenny has stated: "The Department [of Health] will build on the success of the Fair Deal scheme but we cannot simply copy it or integrate it into a home care scheme."

The success has been relative. The enormous gulf in fees payable continue to present a discriminatory practice. The State is entering into yet another review of its nursing home costs, with it committing to a value for money review when before the Oireachtas Public Accounts Committee in March. It has committed to undertake and complete the review this year.

Yet while the State reviews its costs, the fees paid to private and voluntary nursing homes continue to be half those payable to the HSE. Providers are now being tasked with sustaining increases in commercial rates that are, in some instances, 60% above those previously payable. Wage levels for the years 2017 and 2018 are projected to increase by 2.8% by the Central Bank. The Review of the Fair Deal pricing mechanism (undertaken following the original review of the scheme) has been informed by DKM Economic Consultants of a procurer of care that fails to acknowledge regulator costs. Almost two years post publication of the originally delayed Fair Deal review, this critical undertaking remains outstanding.

Our Oireachtas Open Day 2017 will again be hosted as part of our annual national focus upon nursing home care – Nursing Homes Week. It will present Members with prime opportunity to impress upon our legislators the steep rise in dependency levels for persons presenting for nursing home care, the escalating business costs, and the continuing discriminatory practice by the State to not acknowledge the reality of costs being entailed. I urge Members to embrace the opportunity this presents.

Tadhg Daly
NHI CEO

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READ ALL ABOUT US!

What activities are taking place in your home? How are residents fulfilling their lives? What celebrations are taking place? Read all about us! offers NHI Nursing Homes the opportunity to publicise the wide-ranging activities that are taking place in homes across the country. It provides an excellent opportunity to publicise nursing home life in the positive light it should be seen in and members are encouraged to make us aware of what is going on. You can send any articles or pictures of interest to michael@nhi.ie.

Nursing Home resident wins Silver Surfer Award



Doreen Thew, a 92-year-old nursing home resident from Maynooth, Co Kildare, was this year's overall winner of the 2017 open air Silver Surfer Awards.

She was presented with her award at a ceremony that was hosted in March by well-known TV and radio personality Baz Ashmawy and his mum Nancy. The ceremony was officially opened by Minister of State for Mental Health and Older People Helen McEntee TD.

Doreen lives in the TLC Nursing Home in Maynooth, which had to install a wifi booster for her on arrival as there was no way Doreen was going to be separated from her beloved iPad.

After winning the award, Doreen gave her reaction: "I was absolutely thrilled. To be honest, I was delighted to have been shortlisted and to win was beyond my dreams. I really got a huge buzz out of the whole day and I was actually quiet emotional when it was announced I had won."

Doreen is originally from London and was a wireless operator during World War II before working as an accounts clerk. She has two sons, Derek and Peter. In 2013, Doreen moved to Ireland to be near Peter, her five grandchildren and seven great-grandchildren following the death of her husband two years earlier.

She received a record number of nominations from staff and residents in the nursing home as well as family and friends across Britain and Ireland. She keeps in touch with her family using Skype and Snapchat while also shopping online and googling pictures of birds to identify the feathered visitors to her garden just outside her bedroom window.

Asked if she would recommend older people learn how to use the internet, Doreen said: "You have to give it a try and do remember you can't break it! If I can do it then anyone should be able to do it. I used to have a PC but now I have an iPad and I find it much easier to use. If you're starting out the touch technology might be the best way to learn."

She uses the technology to identify birds in the TLC garden. "I found a couple of websites a few years ago and when the birds appear in the garden outside my bedroom that I don't recognise I go on the websites to try and identify them. I used to use a book of birds but now I use the website and it's much easier."

Eamon Timmins, CEO of Age Action, said: "Doreen is an amazing woman, inspiring all of us to know that age is no barrier to taking advantage of the thrilling opportunities presented by the internet and new technology."

Carolann Lennon, Managing Director, open air said: "What a worthy winner Doreen is. She's a great example to all of us and certainly shows that age is not an issue when it comes to using technology. We are thrilled to support this great initiative which recognises, celebrates and rewards all of the great things Silver Surfers across Ireland are doing."

"When you see the amazing activities that Doreen and the rest of today's winners are doing online – whether it's running a business, discovering a new hobby or staying in touch with family and friends it really demonstrates the power of being online and the very positive difference it can make to everyday life."

"Going online can have enormous benefits for older people and I would encourage everyone to embrace technology," said Minister of State for Mental Health and Older People Helen McEntee TD.

"If we do it can open up a whole new world of opportunity, helping to reduce social isolation, allowing us to develop and pursue new hobbies and interests, as well as making new friends."

"Our later years can be a time of continued learning, of new experiences and adventures, of challenging ourselves to gain new skills and follow new pursuits. We all need to break down those stereotypes of older people as vulnerable, sick, and dependent."

Doreen spoke of her work as a wireless operator during the war. "I was stationed in a place called Knockholt Pound in Kent. I would do 12 hour shifts there and it was our job to intercept German radio transmissions which we turned into teletype and then sent to Bletchley Park where they were decoded. Of course, we didn't know this at the time because it was all secret. It was only after the war when I visited Bletchley Park with my husband some years ago that we saw Knockholt Pound was listed as one of the places where the codes came from. I only realised then the role my fellow wireless operators and I had been playing."



Blessing upon Ashford House

On Thursday 23rd March 2017 Ashford House celebrated in style. Fr Martin Daly celebrated Mass followed by a wonderful ceremony to bless the site of the new extension to Ashford House Nursing Home in Dun Laoghaire, Co Dublin. The day continued with speeches and champagne toasts, musical entertainment and a finger food buffet.

Ashford House was started in 1972 and will be 45-years young this September. Their new build will enable them to provide care for another 45-years in a state of the art facility. ●



Staff & residents of Millbrae step out for line dancing

The wonderful folk at Millbrae Lodge Nursing Home in Newport, Co Tipperary, hosted their very own Strictly Come Dancing in March. The show was organised by their activity coordinator to promote wellness in the home and create an intergenerational programme. And it presented opportunity to raise money to support mental health services for older adults in the Tipperary community. The event raised a huge amount of funding and created great awareness about requirement for better support services for persons with mental health issues in the community. Residents provided great support to the event, with one choreographing a line dance for all the participants ●



Vision of Colour at Dealgan House

14 residents displayed their artworks at Dealgan House Nursing Home's Visions of Colour exhibition that was hosted in March. 33 pieces were on display and were created by the nursing home art group that is tutored by well-known local artist Carol Wallace, who engages with the residents one day a week as they create their excellent works. ●



Saint Joseph's Shankill launch day care garden in memory of Dr Bill

A huge crowd gathered in Saint Joseph's Shankill to attend the official opening of the new Saint Joseph's Shankill Day Care Garden.

The garden is dedicated to the memory of Dr Bill Brosnan, who had attended the day care service at Saint Joseph's after he was diagnosed with dementia some five years ago. Bill passed away in 2014.

Bill's wife Monica, who sponsored the garden's creation, performed the official ribbon cutting and the unveiling of a plaque in Dr Bill's honour.

Thanks were extended by Monica to staff for their care of Bill and for the continued passion they bring to providing care every day to people living with dementia.

Geraldine Ennis, Day Care Manager, thanked Monica for her generosity for sponsoring for the new garden. She also thanked the hard work of Jimmy Sunderland and his team who created the garden for the day care attendees to enjoy. Geraldine credited all the Saint Joseph's 'family' which includes residents, attendees, staff and families for making Saint Joseph's such a special place ●



Left:

Geraldine Ennis,
Day Care Manager.

Right:

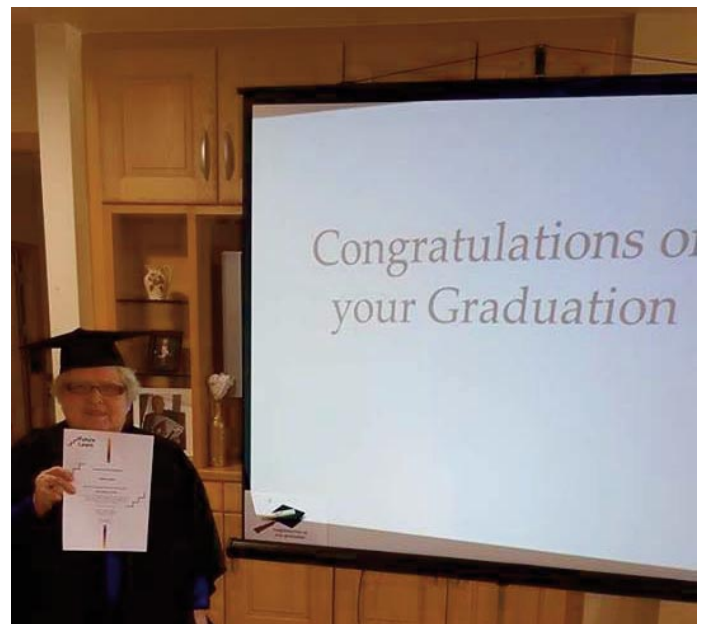
Top - The blessing of the garden.
Bottom - Mrs Monica Brosnan,
cutting ribbon to launch the new
Garden in memory of her
husband Dr Bill Brosnan



Resident graduation after course focus on life circumstances

Residents of Millbrae Lodge recently graduated from a course titled The Lottery of Birth. It examined the inequalities that can become associated with the birth of a child, and how their life circumstances can affect them. The course was undertaken over a six-week period, two hours a week. It entailed class discussion, written 'homework' and concluded with a small essay.

Millbrae Social Care Coordinator Roisín Quinn was the class coordinator. The participating residents graduated at a celebratory ceremony. The residents who graduated were Christina Hayes, Mary Quinlan, Mary Smith, Mary Lewis, Peter Ryan, Tess Mc Mahon, Margaret Mulcahy, Eithne Larkin, Kathleen Kennedy, Evelyn Fennessy, Nora Coleman ●



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Date prepared: October 2015. 2015/ADV/GLO/096

Ref 1: Schwartz: 40% of American adults reporting swallowing difficulties



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NHI UPDATES

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NHI meets with Minister Donohoe

Seamus Brady, Dublin North Director, and Tadhg Daly, CEO, met with Minister for Public Expenditure and Reform Paschal Donohoe on Friday 10th February. At the meeting, the NHI representatives impressed upon Minister Donohoe the extent of the discrimination in expenditure in provision of nursing home care.

They presented the huge gulf in fees payable for care in HSE nursing homes by comparison with private and voluntary counterparts. Stark findings within the DKM Economic Consultants Analysis, *Potential Measures to Encourage the Provision of Nursing Home and Community Nursing Unit Facilities*, were presented to Minister Donohoe, with it informing the Fair Deal funding model is not fit-for-purpose and is threatening the sustainability of private and voluntary providers. The NHI representatives also utilised the opportunity to present the NHI analysis undertaken by BDO that informs of the cost implications of increase to minimum / living wage for private and voluntary nursing homes.

It was impressed upon Minister Donohoe increases in public expenditure have a direct impact upon the private and voluntary nursing home sector. He was informed private and voluntary nursing homes operate within unique circumstances, being dependent upon State payments through Fair Deal for survival. Increases within health expenditure, particularly around the areas of staffing, have a significant impact upon wage levels and the cost base for nursing homes, Minister Donohoe was informed. It was impressed upon him increasing public expenditure within the health sector must be acknowledged within the resourcing of the Fair Deal scheme and fees paid to private and voluntary nursing homes.



Minister for Public Expenditure and Reform Paschal Donohoe pictured, centre, with Tadhg Daly, NHI CEO, left, and Seamus Brady, NHI Dublin North Director, right.

Planned use of prefabs for acute hospitals questioned by NHI

NHI has called upon Minister for Health Simon Harris to ensure options to avail of care within our local communities are fully realised prior to embarking upon a plan to build prefab accommodation on the grounds of acute hospitals. Minister Harris has been quoted as stating such measures are required to break the “vicious cycle” of hospital overcrowding. Referring to NHI’s February bed availability survey, Tadhg Daly, NHI CEO stated: “Around 500 people are awaiting discharge from our acute hospitals on a consistent basis and around two-thirds of these are awaiting long-term nursing care. NHI’s latest bed availability survey [February 2017] has informed of 834 beds being available within 201 nursing homes. These beds are spread across the country and are available to meet step-down, rehabilitative, respite, transitional and long term care needs of persons awaiting discharge from our acute hospitals. The Minister must ensure his eyes are wide open. There are hundreds of beds in nursing homes across the country that offer potential to considerably increase capacity within our acute hospitals.”

National Primary Care Partnership Conference Presentation

NHI CEO Tadhg Daly delivered a presentation at the National Primary Care Partnership Conference that was delivered in Croke Park in April. The presentation impressed upon those in attendance the role of nursing home care in alleviating pressures upon acute hospitals and in meeting peoples care needs within their local communities. Other speakers included Minister for Health Simon Harris, HSE Director General Tony O’Brien, the Chairman of the National Association of Primary Care (UK) Dr Nav Chana, Dr Kevin Grumbach, School of Medicine at the University of California.

Census 2016: State cannot continue to turn a blind eye to 'older old' populations healthcare needs

The Census 2016 Summary Results, published April 2017, present further evidence and urgent impetus for the State to properly plan for our older population, particularly those dependent upon continuous healthcare support to live fulfilling lives, NHI has stated.

The results highlighted the 'older-old' population – the people most dependent upon healthcare support, are growing to the same extent as the traditionally classified 'older' population. The number of people traditionally classified as 'old' – aged 65+ - increased by 19.1% over the period 2011 to 2016. For the population aged over 85 for the same period, the male population increased by 24.8 per cent to 23,062 while the female population increased by 11.4 per cent to 44,493, an approximate percentage growth of 18.1%.

Tadhg Daly, NHI CEO stated: "Advances in living standards and supports mean the traditional classification of an 'older person' is being reclassified. This is hugely positive for society. The State cannot turn a blind eye to its own 'evidence'. Somebody once said that making the same mistake over and over was the definition of madness. A particularly Irish phenomenon is to get all the warning data and do nothing about it.

"We must formally plan for the healthcare supports of our 'older old' population. The considerable and continuous growth of this population cohort is presenting huge requirement for specialist care within the settings appropriate for their care needs, including at home, nursing homes, and within acute hospitals. Despite this 'in-your-face' evidence, this Government and that

preceding it have not brought stakeholders around the table to map and plan for our ageing population's healthcare needs.

"An intensive focus must be initiated by the State. One in five persons aged 85+ require the continuous clinical, health and social care provided by nursing homes to enable them live secure and fulfilling lives. The HSE has informed of the increasing numbers entering nursing home care at later stages in their lives. Planning must be undertaken to ensure nursing homes are appropriately staffed, equipped and resourced to meet these 24/7 high dependency care needs and the growing numbers requiring this specialist care. Let us not continue to turn a blind eye to the stark statistics presented before us."

Severe underfunding of care criticised by Five Nations alliance of care providers

The Five Nations Care Forum is an alliance of representative independent sector care organisations across England, Northern Ireland, the Republic of Ireland, Scotland and Wales. NHI is the Republic of Ireland representative organisation on the Forum, which in Edinburgh in April. Following its meeting, the Forum issued a statement to media within the relevant countries calling for remedial action to the severe underfunding of the social care sector.

While people are living longer with more complex needs and demand for care is increasing, the funding of social care across the five nations remains wholly inadequate, the Forum stated. This has resulted in serious constraints on the delivery of social care services to individuals who need state support.

"We know that these people want reliable, sustainable services, delivered consistently by people known to them who understand their needs, preferences and aspirations," it stated. "The current funding shortage has a number of negative impacts:

- State funded support being delivered too little, too late, meaning that opportunities are missed to support people in a way that anticipates their current and future care needs and prevents them receiving inappropriate support
- People being admitted to hospital unnecessarily and

remaining there too long, resulting in negative impacts on individuals' health and wellbeing, delays for those who do require hospital support and additional costs being incurred by health services

- Staff shortages resulting from low salaries and poor terms and conditions
- Providers of social care withdrawing from the market, causing changes in or complete removal of support to individuals who require it
- More individuals and their families having to bear the cost burdens and physical, emotional and time outlays of providing care, which will stack up problems for the future.

This is not acceptable for a civilised society - it does not adequately support people's rights and interests, and undermines the dignity, value and worth of people who need care and support.

Social care is a sector of national strategic importance; being a major employer, providing essential support to individuals and families, and enabling family carers to remain economically active.

The Five Nations Care Forum calls on the five governments to take urgent corrective action to protect people's rights and to ensure a sustainable social care sector now and for the future."

NHI Strategic Plan 2017 - 2021

NHI Strategic Plan for the period 2017 to 2021 will be presented before NHI Membership at the AGM on Wednesday 17th May. In October 2016, the NHI Board of Directors commissioned a strategic review of NHI and the challenges facing its Members. All Members were asked to participate in the consultation process to inform the review. Over 100 participated in a detailed online survey to feed into the review and regional focus groups were hosted in NHI's ten Member regions to further explore the views of Members. The Strategic Plan has been developed by business advisory firm Crowe Horwath. The plan will be presented to Membership at the AGM. Thank you to all NHI Members who inputted to this vital body of work.

Seanad Éireann debate – Geriatricians in Nursing Homes & NHI

NHI previous representations regarding the role of geriatricians visiting nursing homes to deter transfers to hospitals was referenced in a Seanad Éireann debate with Minister for Health Simon Harris on 25th January. Senator Gabrielle McFadden, Fine Gael, stated there is requirement for more “joined up thinking within the HSE in terms of the development of an effective community geriatric service model”. “These services should also be available on a 24/7 basis because patients, and elderly patients in particular, do not choose when to get sick,” she said. Senator McFadden referred to the policy within Connolly Hospital, whereby geriatricians visit all nursing homes within its catchment area. She said: “In November 2013 Ms Mary Burke of Nursing Homes Ireland, in a statement to the Joint Oireachtas Committee on Health and Children, said she believed that the Connolly Hospital approach should be rolled out nationwide. She said that it would prevent readmission to acute hospitals. People might argue, rightly, that Connolly Hospital has patients on trolleys at the moment but it has definitely reduced the number of frail, elderly patients on trolleys.”

Read online – NHI Irish Independent supplement Private & Voluntary Nursing Homes: An Essential Element of Our Health Services

Private & Voluntary Nursing Homes: An Essential Element of Our Health Services is an NHI publication produced in partnership with the *Irish Independent*. The supplement, published within the paper at the end of 2016, informed regarding what nursing home care entails and provided testimonials from nursing home residents informing of the life they live within nursing homes. The supplement also outlined the very significant challenges facing Ireland's private and voluntary nursing home sector in care provision. It detailed the discriminatory practice that operates within Ireland's nursing home sector in fees payable to HSE homes by comparison with private and voluntary counterparts. The supplement also pushed the imperative requirement for the State to appropriately resource to ensure true costs of nursing home care are recognised in fees payable and the career of nursing in a nursing home was promoted. Read the supplement online by visiting the publications section of the NHI website – www.nhi.ie – and scrolling down to the NHI Newsletter subsection.

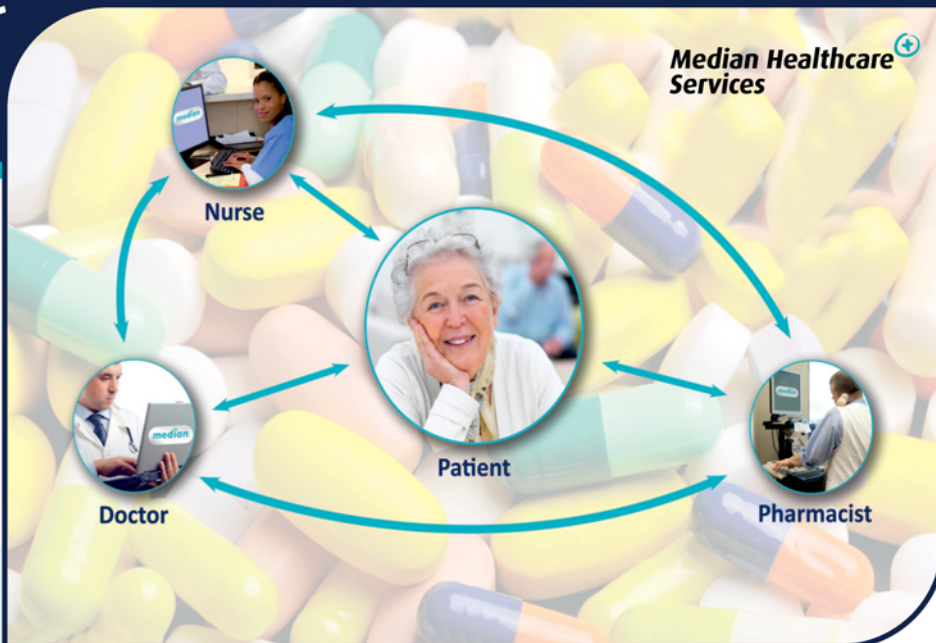
DATES FOR YOUR DIARY

NHI & Other upcoming events of interest

May – June 29-5	Nursing Homes Week 2017 The annual celebration and promotion of Nursing Home Care will once again see NHI Members in communities across Ireland host celebrations. Residents, their family and friends, staff and people from the communities will gather to enjoy entertaining activity and raise a toast to staff enhancing the lives of the older people entrusted in their care.
May 17	NHI Annual General Meeting 2017 The Independent Nursing Homes Ireland Limited AGM will be hosted at the Clarion Hotel, Liffey Valley, Co Dublin. Details will be circulated in advance.
September 20	NHI Webinar - Meeting the Nutritional Needs of Dementia Residents NHI will host a webinar, Meeting the Nutritional Needs of Dementia Residents, with Fresenius Kabi sponsoring. Details re the presentation and the accreditation will be circulated in advance.
November 16	NHI Annual Conference Nursing home care and policy surrounding it will again be the focus for the NHI Annual Conference that will be taking place in Citywest Hotel, Co Dublin.
November 16	NHI Annual Care Awards Again our celebration of the outstanding care provided by NHI Members across Ireland will be hosted post the annual conference in Citywest Hotel

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Furthermore, in order to properly exercise our professional pharmacy obligations with respect to patient counselling and overall patient care, we commit that our pharmacist will attend on the individual residents in the home, on a frequency appropriate to their individual needs.

Median: Meds on the Internet for Admin by Nursing Homes:

Median is our own complimentary software package designed with, and by, Director's of Nursing, Nurses, Care Staff, GP's and Pharmacists to facilitate the medication management process between the Nursing Home or Care Centre, the GP's surgery and The Pharmacy. Median produces up-to-date Kardex records and Mar charts in the home.

Median Mar uses Bar Code technology to ensure that the 5 rights of administration are accurate at all times:

✓ Right Drug ✓ Right Person ✓ Right Time ✓ Right Route ✓ Right Dose



Median Mar uses wireless tablet PC's & touch screen technology.



64% increase in transitional care discharges to private nursing homes

The number of transitional care discharges to private nursing homes increased by 64% last year. A reply provided by the HSE to a question tabled in Dáil Éireann by Deputy Billy Kelleher, Fianna Fáil, informed: "In 2016 a total of 7,342 patients were approved for funding to discharge to private nursing homes under this [transitional care] initiative." It added: "During the winter months, 3rd October up to close of business Friday 17th February, a total of 3,367 patients were approved for transitional care funding."

In 2015, 4,470 persons were discharged to private nursing homes under the transitional care initiative. NHI public affairs activity continues to impress upon stakeholders the importance of nursing homes in facilitating discharges from acute hospitals back into the community.

In September last year the HSE announced funding would be available to fund an additional 58 transitional care beds on top of the 109 that were already being funded.

The HSE committed to Deputy Kelleher transitional care funding would support 152 discharges on a weekly basis in 2017.

PICTURED:

Deputy Billy Kelleher questioned the number of persons funded in 2016 under the Transitional Care Initiative



HSE comparison between public nursing homes and workhouses

People presenting for nursing home care older & closer to end of life

Also at the PAC meeting, HSE Director General Tony O'Brien said many public nursing homes have changed little from their workhouse days. He was commenting before the Committee regarding the public nursing home infrastructure deficit. Deputy David Cullinane, Sinn Féin, put to Mr O'Brien he had commented earlier at the meeting "when comparing public service provision with the private sector in terms of nursing home settings and infrastructure, the quality of the buildings was not as good in the public sector". Mr O'Brien stated in response: "That is correct. That is the very reason for the investment programme [in public nursing homes]. It is to bring that stock up to date. There are many present day nursing homes which are operating in facilities which are little changed, in truth, from when they were workhouses."

Separately Pat Healy, HSE National Director of Social Care, informed Committee Members people presenting for nursing home care are older and closer to end-of-life than residents that moved to nursing home care previously. "The new scheme [Fair Deal], which came in in 2009, includes a care needs assessment and a financial assessment. When one does the care needs assessment, one also has a local placement forum which would generally have a geriatrician and a multidisciplinary team. That is a good protector or oversight to ensure that only those who require it will go into long-stay care. The figures bear out the fact that the number of years for which people are staying in long-stay care is reducing. That means that they are older and closer to end-of-life care as they go into nursing homes."

Number of Nursing Home Beds in Ireland - European Health Consumer Index 2016

The European Health Consumer Index compares the health performance of national healthcare systems in 35 countries. Its 2016 report was published the end of January. The report assesses level of nursing home and elderly care beds within 34 of the countries analysed. It informs Ireland is ranked 22nd of 34 countries with regard to bed availability, with 4,971 beds available per 100,000 of the population.

European counterparts Germany (5,233), France (5,479), Finland (5,751), the Netherlands (5,922), Sweden (6,415), Switzerland (6,456), Belgium (6,745) and Luxemburg (6,907) are ranked higher. The data was compiled from the World Health Organization. The UK has 19th highest level of availability, with 4,715 beds.

Clarity regarding valuation of property under Fair Deal

Clarification regarding the valuation of property under the Fair Deal scheme was provided in Dáil Éireann by Minister with Responsibility for Older People Helen McEntee. Deputy Róisín Shortall, Social Democrats, had queried on 7th February whether "the valuation is at the time of the application or if there are circumstances under which a later valuation would be used in a means assessment". Within her reply, Minister McEntee stated: "In cases where an applicant owns his/her principal private residence, the value of that residence for the purposes of the financial assessment element of the Scheme must be the price that the property would fetch on the open market on the date on which the application for State support is first made. However, under Section 10 of the legislation, the HSE does not have to accept a valuation submitted by an applicant and may seek its own independent valuation of a particular asset. If a review of a person's financial assessment is requested at any stage during their time in a nursing home, the value of their principal residence remains at the amount of the valuation as at the time of the initial application. Importantly, the person's principal residence is only included in the financial assessment for the first three years that an individual receives care services."

Minister recognises role of nursing homes in alleviating delayed discharged numbers

Speaking before the Oireachtas Health Committee meeting 2nd March, Minister for Health Simon Harris acknowledged the role of nursing homes in bringing the numbers delayed discharged to their lowest level since first recorded. Speaking in the context of the 2016 Winter initiative, he informed the Committee: "There has been significant progress on the issue of delayed discharges, the number of which has been reduced to its lowest level since they were first recorded. There is a direct correlation with the level of investment in providing additional home care packages and transitional care beds and with the utilisation of capacity in nursing homes, both public and private." 7,342 patients were approved for discharge to private nursing home care in 2016. The HSE Performance Report for December 2016 informs 448 more persons were funded by Fair Deal within private nursing homes by year end.

Comprehensive process for Fair Deal approval leaves “no doubt” as to suitability or not: Minister McEntee

Minister for Older Persons Helen McEntee has stated the process to ascertain a person's eligibility and suitability to avail of State support to receive nursing home care is in place to ensure there is “no doubt” regarding their requirement or non-requirement for nursing home care. Minister McEntee informed Dáil Éireann 14th February of the “comprehensive process” undertaken by Fair Deal applicants to become Fair Deal approved. She also said nursing homes fulfil a vital role in providing older persons with high quality care at a vulnerable stage of their lives.

Deputy Billy Kelleher, Fianna Fáil Health Spokesperson, asked the Minister for Health his views on the fact that the 23,000 plus persons funded by Fair Deal have undertaken the Common Summary Assessment Report (CSAR), as required for every applicant applying for the scheme, and by consequence have all been assessed as requiring nursing home care. He also asked the Minister views on the specialised care that is provided by nursing homes on a 24/7 basis in dedicated healthcare settings with specialist equipment and highly skilled staff.

Responding on the Minister for Health's behalf, Minister McEntee informed of the CSAR assessment that is undertaken to ascertain suitability for State support to avail of nursing

home care. She added: “On completion of the assessment, the healthcare professionals involved will summarise their findings in the CSAR and submit this to the Local Placement Forum (LPF). The LPF will then consider the CSAR and make a determination as to whether the applicant requires care services, and also whether the applicant is likely to require care services for the remainder of their life. This is a comprehensive process and has been put in place to ensure that there is no doubt surrounding whether a person has a requirement for long-term nursing home care or not. The LPF in all locations consists of a multidisciplinary team and in general is supported by a Consultant Geriatrician where they are available. The comprehensive care needs assessment conducted as part of the NHSS application process, together with the fact that older people are entering residential care facilities later in life, mean that those entering long-term residential care will have reasonably high levels of dependency.”

She further stated: “Nursing homes provide an important resource in the range of care services available to older people in Ireland. They play a vital role in ensuring that older people have access to the high quality of care and support they deserve at a vulnerable stage in their lives.”



Minister Helen McEntee informed of the “comprehensive care needs assessment” undertaken to determine a person's eligibility for the Fair Deal scheme.

HSE Service Plan 2017

The HSE Service Plan 2017 plan commits to fund 23,603 people under the Fair Deal scheme at year-end 2017. By comparison the 2016 Service Plan originally committed to fund 23,450, but due to lower than anticipated activity, the ‘target’ was revised to 23,107. The Fair Deal budget allocation for 2017 is €940m, excluding resident contributions. The 2017 plan anticipates 7,820 persons in acute hospitals will be approved for transitional care from acute hospitals to alternative settings by year end 2016. The original “expected activity” within the 2016 Service Plan was 5,450 persons, signifying an increase in provision of transitional care packages.

Taoiseach states Fair Deal not to encompass home care

An Taoiseach Enda Kenny has stated integrating home care into the Fair Deal scheme is not workable. He indicated Government preference is introduction of a scheme similar to Fair Deal but more specifically designed for home care. Deputy Michael Healy Rae, Independent, asked 25th January in Dáil Éireann, would the Government consider extending Fair Deal to encompass home care.

An Taoiseach stated in his reply: “The Department of Health has commenced examination of options to bring a greater consistency, nationally, to the regulation and financing of home care, which is a very important and sensitive issue, as the Deputy noted. It is considered that the best option for the future might well be a statutory home care scheme but not to have regulations and rulings governing the informal care given by families in their own homes. This scheme would be somewhat similar to the nursing home support scheme but it would be more specifically designed for the home care market. That is under way.

“Establishing what kind of scheme would work is a complicated process. The Department will build on the success of the fair deal scheme but we cannot simply copy it or integrate it into a home care scheme... There will be a public consultation process over the coming months to be launched by the Minister of State, Deputy McEntee.”



An Taoiseach Enda Kenny: Statutory support for home care cannot deviate from the Fair Deal budget

Income tax relief claimed for nursing home investment & from nursing home fees

Provisional data for 2015 estimates the cost of tax relief claimed from nursing home investments to be €3.4 million from 130 claims, Minister for Finance Michael Noonan informed Dáil Éireann 9th February. He further stated income tax relief to the value of €102.6 million was claimed by individuals receiving nursing home care between the years 2011 – 2014. The relief was claimed in 22,500 cases. Data for 2015 and 2016 was not yet available.

Irish Association of Emergency Medicine President advances greater geriatrician involvement in nursing homes and greater onus upon enabling people die in nursing homes

Dr Emily O'Connor, President of the Irish Association of Emergency Medicine has advanced enabling geriatricians to spend more time in nursing homes could deter admissions to hospitals by nursing home residents nearing the end of their life. And she has said as a society we need to be comfortable with enabling very debilitated persons nearing the end of the life pass away in nursing homes. Dr O'Connor was speaking at a Oireachtas Joint Committee on Health debate regarding emergency department overcrowding that took place on 25th January.

Dr O'Connor said: "Yes, the elderly in nursing homes come to emergency departments out of hours. More advance planning led by consultant geriatricians and palliative care teams in nursing homes might prevent some of that. Nursing homes need to know there will not be adverse reporting and family expectations because the loved one has not been transported and has subsequently died. We as a society need to be mature about this. I see very debilitated patients transferred to emergency departments for a blocked catheter etc. at night. We could do better. In addition, we need to be able to die in nursing homes."

Earlier in the debate, Dr O'Connor advanced a greater role for geriatricians in nursing home care. She said: "At the moment it is hard for nursing homes to hold on to patients. All nursing home deaths are reportable to the coroner. HIQA has strong statutory reporting responsibilities for nursing homes, so the paperwork must be correct. There is really good practice out there. We have an example in my hospital with what is called a nursing home liaison geriatrician who spends half the time in the hospital and the other half seeing patients in nursing homes. It is a fantastic model. I can send someone to a nursing home and say: "It might be a risky discharge. Could you see them in 48 hours in the nursing home?" They will say: "Yes. We'll call in and make sure everything is okay." If we could expand that model it would really help."

Deputy Billy Kelleher, Fianna Fáil Health spokesperson, also advanced within the debate the requirement to improve geriatric services provided to nursing homes to deter hospital admissions

2% to 3% of Emergency admissions are from nursing homes

Also at the afore-reported Joint Committee on Health meeting, Committee Members were informed admissions to emergency departments from nursing homes account for 2% to 3% of all admissions. Damien McCallion, HSE national director of the National Ambulance Service and emergency management, informed the debate: "With regard to older people from nursing homes presenting in emergency departments, they represent approximately 2% to 3% of all admissions." He stated 11 Community Intervention Teams are operating around the country and a further four are coming through the winter initiative are in the formation stage. "There is still further scope for this," he said. "Some of the teams work very well and some are trying to expand the geographical areas they cover for patients."



313% increase in overseas nurse applications

The NMBI has reported a 313% increase in nurse applications when the year 2016 is compared with 2014. Minister for Health Simon Harris informed of the increase responding to a question tabled in Dáil Éireann by Sinn Féin Leader Gerry Adams 14th February. He stated in 2014, there were 1,045 applications and in 2016 4,323 were received.

Minister Harris said improvements in the processing of applications have arisen because of a review carried out by an external company of NMBI, with a number of recommendations implemented. A number of recommendations arising from the review have been implemented he said. "The NMBI continues to engage with and update Stakeholders including the Department, HSE and Nursing Homes Ireland on these initiatives," Minister Harris added.

Number of Nursing Home Beds in Ireland - European Health Consumer Index 2016

The European Health Consumer Index compares the health performance of national healthcare systems in 35 countries. Its 2016 report was published the end of January. The report assesses level of nursing home and elderly care beds within 34 of the countries analysed. It informs Ireland is ranked 22nd of 34 countries with regard to bed availability, with 4,971 beds available per 100,000 of the population.

European counterparts Germany (5,233), France (5,479), Finland (5,751), the Netherlands (5,922), Sweden (6,415), Switzerland (6,456), Belgium (6,745) and Luxembourg (6,907) are ranked higher. The data was compiled from the World Health Organization. The UK has 19th highest level of availability, with 4,715 beds.

Fair Deal resident contribution to the State

The average weekly contribution to the State by persons supported in private nursing homes by the co-payment Nursing Home Support Scheme (Fair Deal) is €304 per week. Further to such contribution, the total income from contributions from people residing in public nursing homes was €65.9m in 2016.

Deputy Fergus O'Dowd, Fine Gael, asked the Minister for Health the total financial contributions by residents of nursing homes of all types made under the Fair Deal in 2016. The Minister referred his reply to the HSE. Within its reply, the Executive stated: "The HSE receives contributions from people residing in public long stay facilities and the total amount of income raised in 2016 amounted to €65.9m. Under the scheme, people living in private nursing homes pay their contribution directly to the nursing home and the HSE is not made aware of the amount of contributions received by private nursing homes under the scheme. During November 2016, a total of 17,717 people were in receipt of State Support under the nursing homes support scheme. The average weekly contribution for people residing in private nursing homes under the scheme is €304 per week."

In accordance with the Nursing Homes Support Scheme Act 2009, the HSE undertakes a financial assessment which includes a person's income and assets in order to calculate his/her contribution to care. A person's contribution is based on 80% of his/her assessable income and 7.5% of the value of any assets. It should also be noted that the first €36,000 or €72,000 for a member of a couple, of the value of the person's cash and non-cash assets are disregarded as part of the financial assessment. In cases where the person is a member of a couple, the assessment must be based on half of the couple's combined assessable income and assets. The value of the person's principal private residence is only included in the financial assessment for the first three years that the person receives care services in a nursing home.

HIQA advances regulation of home care services

A first step in the regulation of home care should be extending regulation to large companies and the many large commercial companies and public and voluntary organisations that provide homecare services, HIQA CEO Phelim Quinn has stated. Mr Quinn was speaking before the Oireachtas Future of Healthcare Committee on 2nd February. He said HIQA is concerned about vulnerabilities of people in receipt of home care and commented: "We must extend statutory regulation to cover all domiciliary care services and other community-based social services in order to ensure that vulnerable people are safe and receiving the best possible support." He added the regulation would encompass the care provider, not the person's home. "In some instances you will not be able to capture every form of home care when it is provided on an informal basis. When there is public expenditure, that might be one of the elements that enters into the definition of what is in the regulations," he added.

BELOW: Phelim Quinn, HIQA: "We must extend statutory regulation to cover all domiciliary care services and other community-based social services in order to ensure that vulnerable people are safe and receiving the best possible support."



HSE value for money assessment of public nursing homes to be undertaken this year

As part of the review of the Fair Deal scheme, a value for money assessment of public nursing homes will be undertaken this year, the HSE informed the Oireachtas Public Accounts Committee Members at its meeting 9th March. The meeting assessed the Fair Deal budget for 2017 and nursing home costs. Pat Healy, HSE National Director of Social Care, said a value for money assessment of public nursing homes is expected to be undertaken and fulfilled in 2017. Greg Dempsey, Assistant Secretary at the Department of Health, added: "It will be undertaken by the Department [of Health]. We have not actually started yet. In the next couple of months we will scope it out. At this stage, we are not sure of its exact form. It will follow DPER [Department of Public Expenditure and Reform] guidelines but we will be consulting. The aim is to understand the drivers behind the differential pricing between public and private. I think our expectation is that we would get it completed in 2017." Deputy Mary Lou McDonald, Sinn Féin, asked if NHI would be consulted. "The format and content of the value-for-money process is set out in the Department of Public Expenditure and Reform Guidelines," Mr Dempsey said. "As they are topic-specific, the initial approach to data gathering would be different for each of them. Part of the process would involve scoping the data, who we need to involve and so forth. We have not started that in the Department."

- ▶ 60% reduction in agitation and aggression
- ▶ 70% reduction in slips, trips and falls
- ▶ 90% challenging behaviour is caused by people and the environment
- ▶ 79% reduction of sedentary behaviour by residents in nursing homes

For Residents

- Better quality of life with less weight loss & improved appetite
- Improved orientation and way finding
- Reduction in drug use and medication
- Longer life expectancy

For Staff

- Less task orientated role with more quality time spent with residents
- Job satisfaction & less absence

For the Business

- Reduction of costs with less wastage of resources
- Positive feedback should ensure full occupancy and a waiting list
- More referrals
- Fewer GP call outs with less pressure on the ambulance service
- Reduced pressure on hospital beds/re-admittances and nursing levels
- Reduced stress and pressure on relatives and friends



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HIQA: Stakeholders must be brought together to address challenges that face health & social care

NHI has reiterated its call for Government to lead in bringing stakeholders around the table to plan for the challenges in meeting the health and social care needs of our older population.

It follows HIQA acknowledgement that improvements within Ireland's health and social care services can only come about through collaborative effort between all relevant stakeholders. HIQA made the statement within its report *Overview of 2016 HIQA regulation of social care and healthcare services*, published May.

The report informed of positive feedback from nursing home residents regarding the care they received, cited kindness displayed to residents by staff, and provided positive comment regarding the range of activities offered to residents. The report found the culture of regulation is embedded in nursing homes and is influencing improvements in hospitals, disability and children's services.

HIQA stated: "Our findings in 2016 show a generally good level of compliance across the nursing home sector. Residents who speak to our inspection teams are mostly complimentary about staff and the manner in which they are cared for. However, we continue to encounter challenges in key areas such as maintaining residents' privacy and dignity, non-compliance with the National Vetting Bureau Act 2012, inappropriate arrangements to manage residents' finances and contracts of care."

The Authority said challenges face service providers in recruiting staff and in the requirement for increased resources and capital investment. It stated: "We believe that improvements within Ireland's health and social care services can only come about through collaborative effort between all relevant stakeholders. HIQA recognises that there are many challenges facing service providers. For example, the difficulties in recruiting staff and the need for increased resources and capital investment."

Tadhg Daly, NHI CEO stated: "NHI welcomes HIQA recognition of significant challenges facing service providers. This is further evidence of State requirement to enable providers to meet these challenges and not turn a blind eye to them."

"Now the regulator of health services is identifying a policy deficit, it must serve as a further wake-up call for the State. HIQA, which has overseen regulation of the nursing home sector since 2009, has recognised necessity for clear national policy direction. For many years NHI has been advancing requirement for the State to bring stakeholders around the table through a forum that would input to the planning and policy development to enable and support provision of older person care. The Department of Health must lead in bringing policy stakeholders together to support it in addressing the significant challenges being presented in meeting older persons healthcare needs. Headline challenges include policy, workforce planning, and resourcing."

The report informed of good practice within the nursing home sector, specifically highlighting enhanced physical environments for residents with dementia, the kindness displayed by staff, the range of activities provided.

Mr Daly added: "The report notes nursing home providers are focussed on achieving regulatory compliance that is above and beyond minimum requirements, with it referring to a "culture of regulation". Furthermore, it notes nursing homes have taken a lead with regard to regulation and are influencing improvements in hospitals, disability and children's services. Nursing homes must be enabled to build upon the high standards being achieved in provision of care. In this regard it is critical the costs of meeting regulatory compliance are recognised within fees payable for provision of care. It should be noted an independent analysis of the nursing home sector presented to the Department of Health has highlighted costs incurred for the provision of care by the regulator, HIQA, are not recognised by the State commissioner, the NTPF, in the fees it pays*."

"The report highlights positive feedback from residents regarding the care they are receiving within nursing homes and emphasises the kindness of staff. This is important recognition by the regulator of the positive care culture within our nursing homes. It provides rewarding and necessary feedback for staff regarding their commitment to meet residents care needs and ensure they are comforted and reassured living within the nursing home. The positivity observed by the regulator is reflective of the hard work, commitment and dedication of providers and staff."

HIQA stated it continues to "encounter difficulties" with regard to outdated nursing home buildings and their impact upon residents' privacy, dignity and safety. It said it is working with all nursing home providers that have "substandard premises" to ensure that they are developing plans which will address these shortcomings in advance of the revised 2021 deadline.

Mr Daly said: "The report further highlights the two-tier system that continues to operate within our nursing home sector. It highlights "difficulties with outdated nursing home buildings impacting on residents' privacy and dignity, and their right to be safe while in long-term residential care". Under huge pressure from the regulator at significant cost, private nursing homes stepped-up-to-the-mark to meet the physical environment standards within a very tight timeframe that was subsequently extended by a five-year period to enable HSE nursing homes significantly delay the works required on their units."

*DKM Economic Consultants report *Potential Measures to Encourage the Provision of Nursing Home & Community Nursing Unit Facilities* commissioned by the Department of Health, extract: "In short, it is untenable that the State quality regulator can assess differentiated dependency levels and in doing so impose costs on nursing homes, while the State price regulator claims it is unable to reflect the same factor in its pricing decisions."

REPORT EXTRACTS

Dementia Environment

“A number of nursing homes had enhanced the physical environment for residents with dementia through improved design principles. These initiatives recognised the need to personalise space, provide more homely environments and promote discussion and reminiscence through art, objects, music and activities.”

Staffing

“Other important issues were the number of staff available to assist residents during the day and at night. During the 2016 inspections, several residents spoke of the kindness shown to them by staff, with one resident summing this up by stating that “they can’t do enough for you”. Other residents commented on staff being over-worked and residents having to wait on occasion to receive care.”

Activities

“Several residents spoke about the range of activities provided in the nursing homes, including gardening, baking, arts and crafts, exercise and music sessions, and the benefit of having pets in the centre. However, some residents and their relatives expressed a desire for more outings, activities and engagement with the local community. HIQA will continue to prioritise meeting with residents to hear their feedback as we believe their views are a rich source of information on how well a service is being run. Additionally, HIQA is committed to reviewing our inspection reports to increasingly reflect the views and experiences of residents.”

Physical Environment

“We continue to encounter difficulties in terms of how outdated nursing home buildings impact on residents’ privacy and dignity, and their right to be safe

while in long-term residential care. During the year, the deadline for compliance with the relevant physical environment standards was extended by the Minister for Health to the end of 2021. HIQA is working with all nursing home providers that have substandard premises to ensure that they are developing plans which will address these shortcomings in advance of the deadline.”

Garda Vetting

“It is now an offence to employ somebody to care for vulnerable people, or to commence such employment after the date of commencement of the Vetting Act [29 April 2016], without a vetting disclosure from the National Vetting Bureau of An Garda Síochána. This means that as part of the recruitment process to determine if a potential new member of staff or volunteer is suitable to work in a centre, Garda vetting disclosures must be received and a judgment made on them prior to finalising the recruitment of new staff and before new volunteers start. HIQA’s regulation of nursing homes since the enactment of this legislation identified that some registered providers have allowed staff or volunteers to start work after 29 April 2016 without the necessary vetting disclosures in place. The Chief Inspector considers any non-compliance with respect to Garda vetting of staff to be unacceptable and a poor reflection on the service provider’s governance arrangements. The failure of a service provider to have in place safe recruitment and staffing arrangements places an already vulnerable group of residents at increased risk of harm. The enactment of the Vetting Act means that registered providers have until 31 December 2017 to ensure that vetting disclosures are in place for all volunteers and staff

employed in their service prior to 29 April 2016.”

Submissions

“In total, there were 13 submissions received from service providers who were not satisfied with HIQA’s inspection findings or regulatory judgments. Of the 13, five were resolved on review by the relevant inspector manager at Stage 1 of our submissions process. The remaining eight were appealed to Stage 2 of our submissions process, which involved review by managers from outside of the Regulation Directorate. Aside from submissions, HIQA received three complaints relating to its nursing home inspections. These were all processed according to our complaints policy.”

Contract for Care

“In 2016, we received a small number of queries and concerns from residents and their families regarding the fees that they were being charged in nursing homes...Registered providers must ensure that contracts of care are clear, unambiguous and contain full details of the services to be provided to the resident. It should also detail additional fees (if any) to be charged for these services.”

Asking the Correct Audit Questions?

Audit 1: Rights, Privacy and Dignity - Theme 1: Person Centred Care

Auditor: An Other

Date of Audit: 01st April 2017

% Audit Complete	100%
% Audit Incomplete	0%

Audit 1.1 Residents Rights, Development, Review, Approval and Communication

No.	Code	Question	Judgement	Compliance Classification	Comments/Evidence
29	M	The residents are encouraged to contribute ideas to, and participate in, the day-to-day activities of the service.	Non Compliant	Substantially Compliant	Residents are currently only consulted on a quarterly basis. More frequent consultation is recommended in line with resident involvement requirements.
30	M	The residents are provided with opportunities to participate in activities in accordance with their interests and capacities.	Non Compliant	Moderate	The activities available do not reflect the capabilities and interests of all individual residents.

Compliance Total of Answers %: 62%

Classification	Count	Percentage
Substantially Compliant	5	17%
Moderate	3	10%
Major	3	10%
Total Non Compliance of Answers	11	38%

Non-Compliance Results

62% Compliant, 17% Substantially Compliant, 10% Moderate, 10% Major

Rec. No.	Audit Quest.	Actions Arising from the Audit	Date for completion	Responsibility	Status
R1	29	Regular meetings are to be formally scheduled, an agenda created and required attendees identified.	15th April 2017	Director of Nursing	In progress - Status update to be provided at next Management Team Meeting.
R2	30	Activity programmes require review to reflect residents' life stories or any dementia specific or orientated activities for those with advanced dementia and/or limited physical abilities.	30th April 2017	Director of Nursing	In progress - Status update to be provided at next Management Team Meeting.

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HCI have developed an evidence based Audit Tool Kit incorporating the 8 themes covered in the HIQA National Standards for Residential Care Settings. The HCI Audit Tool kit helps users to:

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- Save audit preparation and post audit analysis time
- Ensure that all audits conducted are in line with the 2016 HIQA Standards
- Benchmark audit results through the implementation of a scoring method
- Identify aspects of your service that require further development
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Fair Deal rates

NHI monitors the HSE's published register of agreed Fair Deal rates, including details of movements. On a monthly basis we inform of agreed prices and changes arising on a monthly or annual basis. The information within this mailing is provided exclusively to NHI Members and can be utilised in assisting them in negotiating Fair Deal rates.

Our pricing adjustment model 2016 is also available to assist Members in determining the appropriate reimbursement rate adjustment required to cover any changes in cost base. The model uses the nursing home's existing financial position as the basis for projecting its future costs and ultimately to calculate the reimbursement rate adjustment. The model is featured on the Members section of the NHI website.

NHI HR Advisor & Employment Relations Specialist

Ms Ciara Carty has been appointed to the position of NHI HR Advisor & Employment Relations Specialist. This new position within NHI arises from a Board of Directors decision to provide Members with in-house, sector specific HR advice, that is tailored to the needs of Members.

Ciara will work closely with Helena Gleeson, NHI Project Officer Nurse Recruitment, to progress recruitment issues.

The service provided by Ciara will aim to guide members through their obligations as employers, taking a best practice approach to relations with employees and will be mindful of the specific challenges facing nursing homes in the current climate.

Ciara will provide sector specific advice and updates, with templates, advice sheets and updates on current issues to be provided to Members.

Ciara has obtained an LLB in Law and European Studies as well as a MA in Dispute Resolution. She is a qualified Mediator and a member of CIPD Ireland. Ciara worked with the Law Society of Ireland for 2.5 years before moving to Peninsula Ireland, where she spent 3 years in the Legal Services Department dealing with Employment Law cases. She has first-hand knowledge of the Workplace Relations Commission and preparing cases for hearing, both at WRC and Labour Court stage. Ciara has represented employers in the Workplace Relations Commission both under the Industrial Relations function and the Adjudication Function. She has experience advising employers through complex employment relations and employment law queries.

Garda Vetting

On the 29th April 2016 the National Vetting Bureau Act 2012 to 2016 came into force. The Act put Vetting on a statutory basis for all people being engaged by a relevant organisation to carry out relevant work, (before commencing that work). NHI has transitioned to the E-Vetting system and application periods have been reduced from 7 weeks to 2 weeks.

Processes in NHI were streamlined to deal with the large volume of applications and additional staffing were allocated to ensure NHI completes its part of the vetting process and resolves nursing home queries as quickly as possible. These measures are retained to ensure nursing homes are provided with an efficient and timely service that is responsive to their needs. Members can avail of a reduced rate for the processing of their vetting applications.

NHI's Clinical Matters mailings

NHI's Clinical Matters mailings provides information that is specific for Directors of Nursing / Persons in Charge in nursing homes. The PIC mailing informs of clinical updates, reports and publications pertinent to nursing home care, provides templates, and informs of upcoming education events of interest for clinical staff. If your PIC or DON changes please notify NHI so we can ensure your new PIC or DON is moved onto the new listing. If you wish to subscribe to the update you are asked to email your email address to michael@nhi.ie

Training Requirements in Nursing Homes: Guidance for Providers and Persons in Charge

NHI has circulated a new guidance document to Members – *Training Requirements in Nursing Homes: Guidance for Providers and Persons in Charge*. The training guide sets out the rationale for training as highlighted in legislation and statutory guidance documents relevant to the sector. It has been produced by the NHI Practice Development Facilitator and reviewed and ratified by the NHI Nursing Committee. This guidance is exclusively for NHI Membership.

NHI partner recruitment agencies 2017

NHI has partnered with six preferred recruitment agencies to support Members in the recruitment of nurses in 2017. The recruitment agencies and the main geographical areas that they cover are as follows:

- Oliver Placement – India
- PCQ – Europe – Poland, Romania, Hungary, Portugal, Spain, Italy. The agency is exploring the Philippines market
- Adaptive – Philippines
- Go Global – Philippines
- UTS – Croatia
- Nurse Ireland – Philippines

The agencies want to hear from NHI Members regarding their nurse recruitment requirements. Contact details are available from NHI Project Officer Nurse Recruitment Helena Gleeson.

NHI's Members Update

On an ongoing basis, NHI provides Members with a Members Update. These extensive briefings inform Members of news of relevance to the nursing home sector. Featured within the Updates are:

- Details of NHI representation, public affairs, education activity
- Nursing Home related news including emanating from health and older person stakeholders, both statutory and non-statutory, within the media and elsewhere
- NTPF and HIQA updates
- Updates from Leinster House, monitoring of debates and questions regarding nursing home care
- Membership briefings and analysis regarding reports, research and statistics pertinent to nursing home care
- Planning and development updates from the nursing home sector
- Details of bed availability derived from NHI ongoing monitoring of bed availability within Member homes
- Nurse Recruitment updates
- HR advice available from NHI
- Details of upcoming conferences and education events of interest for NHI Membership
- News from the UK care home sector

The Updates are exclusive to NHI Membership. Anyone not receiving them can contact:

Michael McGlynn,
NHI Communications and Research Executive
at 01 4699800 or by email at michael@nhi.ie.

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Increase in numbers financially supported by Fair Deal in private nursing homes but overall relative stagnation over three-year period

The numbers financially supported by the Fair Deal scheme remained relatively stagnant over the three-year period 2013 to 2016, an analysis of the HSE Performance reports informs. At year-end 2016, 23,142 persons were in receipt of Fair Deal financial support. This is informed of within the HSE December 2016 Performance Report. By comparison, 23,007 persons were financially supported at the end of 2013, highlighting a very modest increase over the three-year period – an increase of 135 persons, an average 45 additional persons per annum.

During 2016, net 69 more persons were financially supported by Fair Deal. The relatively modest increase is arrived at when the number of additional persons financially supported by Fair Deal in private nursing homes is offset by the reduced numbers supported in HSE nursing homes and the number of contract bed, subvention and section 39 saver residents that left the scheme.

In 2016 private nursing homes saw a net increase of 448 additional persons financially supported by Fair Deal. 6,430 new persons entered private nursing home care supported by Fair Deal and 5,982 persons supported by the scheme left these nursing homes.

Furthermore in 2016, 231 contract bed, subvention and section 39 saver residents left the scheme. During the year, 1,691 persons entered public nursing home care supported by Fair Deal. 1,839 persons supported by the scheme left these nursing homes.

The net reduction in persons supported by Fair Deal in HSE nursing homes – 148 persons - is reflective of a longer-term trend. There has been a significant reduction the past five years in Fair Deal supported persons in HSE nursing homes, with numbers within HSE nursing homes availing of Fair Deal reducing on an annual basis. At year-end 2016, 4,767 persons were financially supported by the scheme in HSE nursing homes. At the end of 2011 5,397 people funded by Fair Deal were residing within HSE nursing homes. Therefore, the number of people Fair Deal funded have decreased by 630 over the five-year period, an average reduction of 126 persons per annum.

Fair Deal Budget

The Fair Deal budget allocation for 2016, excluding resident contributions towards the cost of their care, was €908.37m – €19.415m below the allocated €888.955m. “The surplus arising within the Nursing Home Support Scheme is reflective of lower than anticipated number of clients in receipt of support that was originally forecast,” the December performance report stated.

New entrants to the scheme

There was a 328 person reduction in the number of Fair Deal entrants year-on-year. In total, 8,121 new persons entered Fair Deal in 2016. 6,430 persons entered private nursing homes supported by the scheme. This was fewer than the numbers that entered in 2015, when 6,663 people entered. 1,691 persons entered HSE nursing homes under the scheme last year. The year previous, 1,836 new persons entered.

Numbers leaving the scheme

The HSE Performance Report year end 2015 noted: ““There is a trend emerging that people are applying for the scheme [Fair Deal] later in life than in previous years and consequently average lengths of stay are decreasing.”

The higher dependency levels of persons presenting for nursing home care are a likely reflection upon the higher numbers leaving the scheme. This is evident when you assess the 2016 and 2015 data. 7,821 persons left Fair Deal in 2016. The comparative number in 2015 was 7,442; therefore, 2016 saw 379 more persons leave the scheme year-on-year, a 4.8% reduction. Within private nursing homes, 5,982 Fair Deal persons left the scheme in 2016 by comparison with 5,563 in 2015. Within HSE nursing homes, 1,839 left by comparison with 1,691 in 2015.

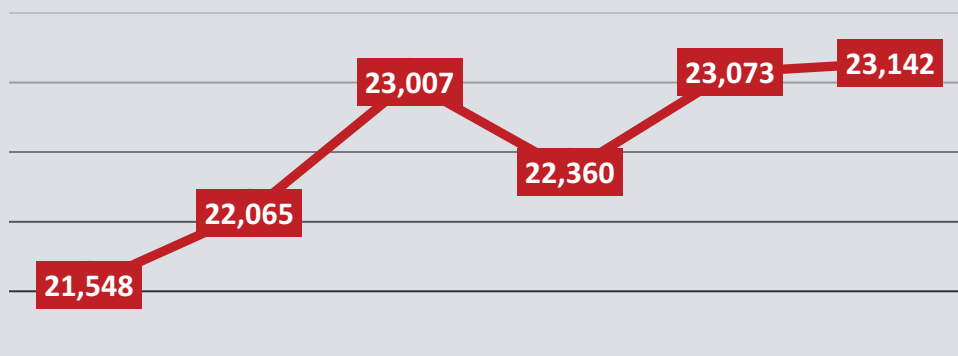
Delayed discharges

As of 27th December 2016, 436 persons were classified as clinically fit for discharge but still availing of a bed within an acute hospital – classified as delayed discharges. By comparison on 29th December 2015, 509 persons were delayed discharged, representing a 14% decrease year-on-year.

Of those delayed discharged 27th December, 71% (312 of 436 persons) were awaiting long-term nursing care. 11% (49 persons) were awaiting home care. At the end of 2014 830 persons were delayed discharged.

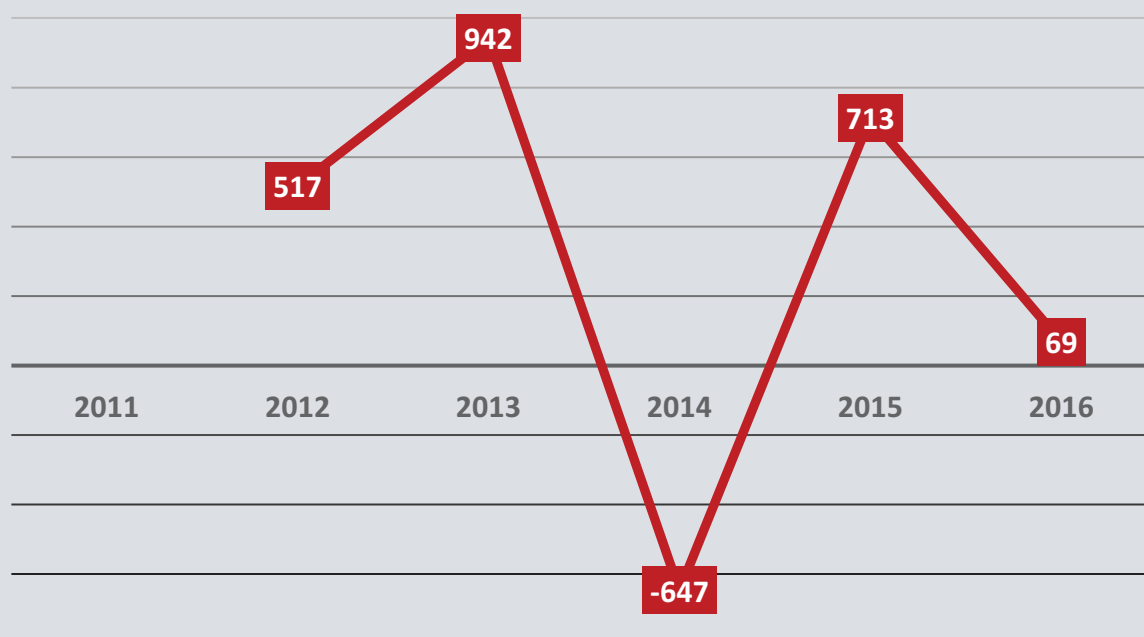
7,342 transitional care placements were funded in 2016 to enable persons within acute care transfer to nursing home care while awaiting Fair Deal. By comparison, 4,470 were funded in 2015. Therefore the 2016 level represented a 64% increase year-on-year.

Year end number of persons funded by Fair Deal

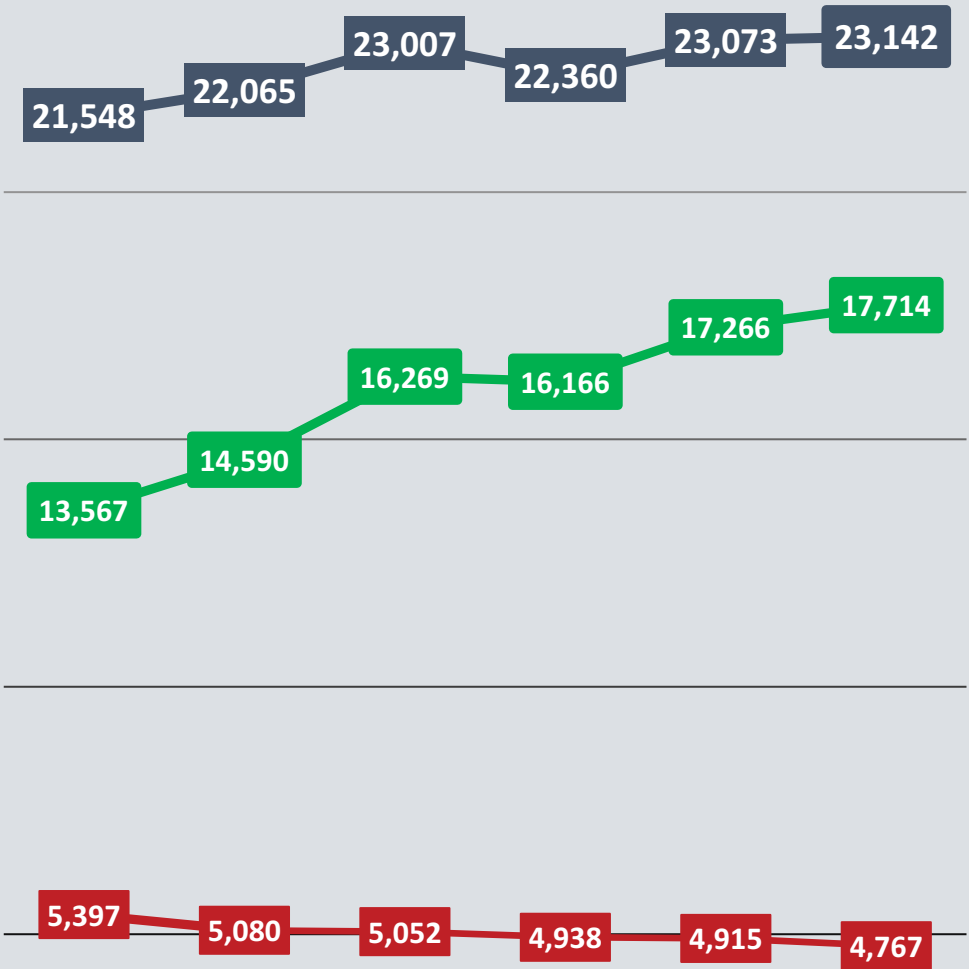


	DECEMBER 2011	DECEMBER 2012	DECEMBER 2013	DECEMBER 2014	DECEMBER 2015	DECEMBER 2016
Series1	21,548	22,065	23,007	22,360	23,073	23,142

Fair Deal net increase / decrease in persons funded by scheme



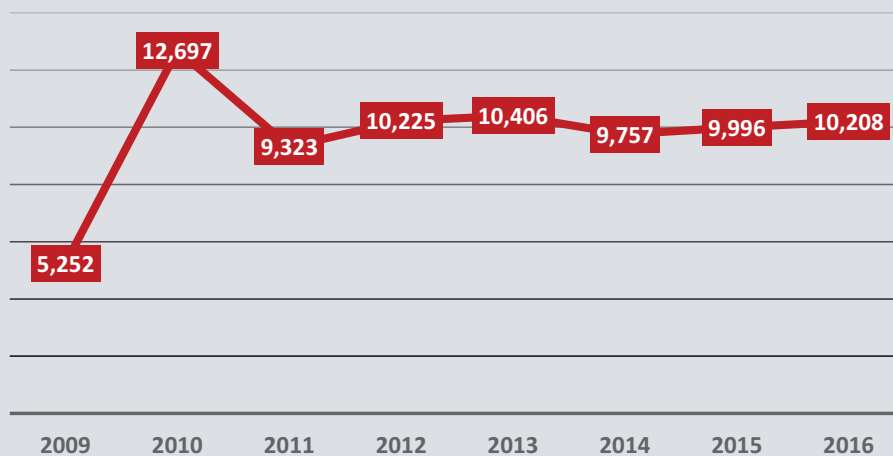
Number of persons Fair Deal funded year ends



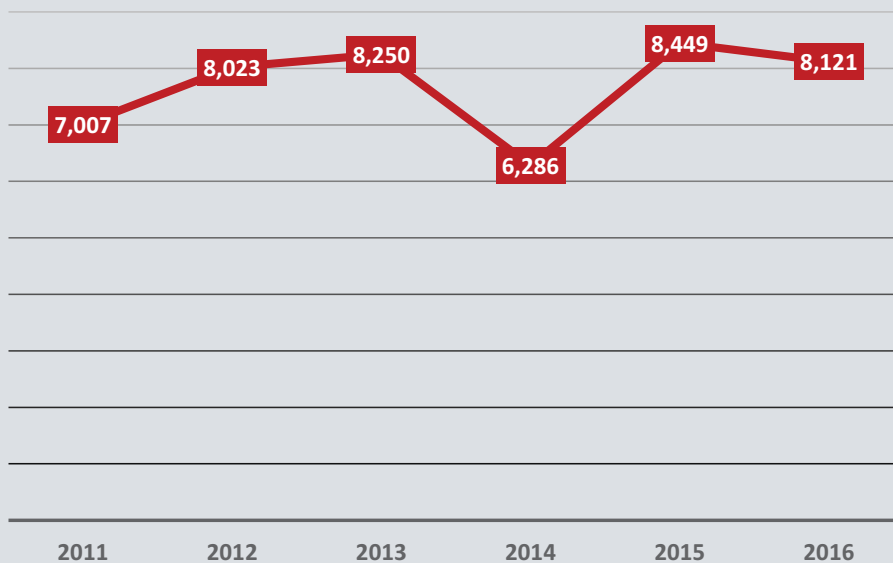
	2011	2012	2013	2014	2015	2016
Total	21,548	22,065	23,007	22,360	23,073	23,142
Public	5,397	5,080	5,052	4,938	4,915	4,767
Private	13,567	14,590	16,269	16,166	17,266	17,714

Total Public Private

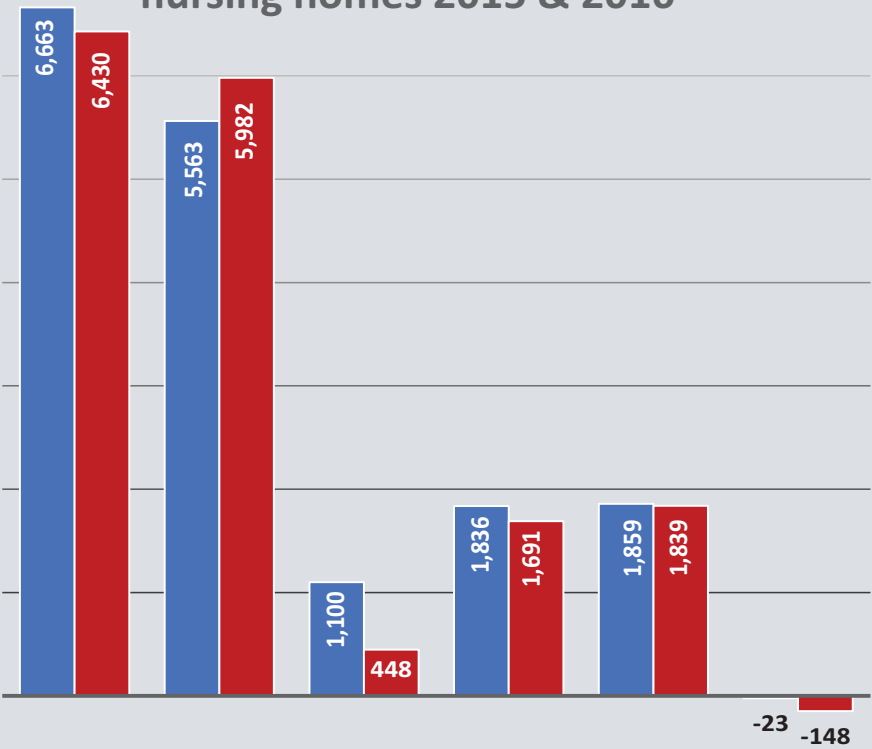
Fair Deal applications per annum



Fair Deal new 'entrants'



Fair Deal new entrants & leavers private & HSE nursing homes 2015 & 2016

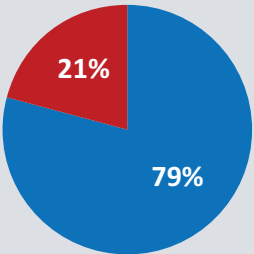


	PRIVATE new persons	PRIVATE no of leavers	PRIVATE net increase / decrease	PUBLIC new persons funded	PUBLIC no of leavers	PUBLIC Net increase / decrease
2015	6,663	5,563	1,100	1,836	1,859	-23
2016	6,430	5,982	448	1,691	1,839	-148

2015 2016

Fair Deal New Entrants 2016 & 2015

- Private
- HSE



Fair Deal new entrants	2015	2016	Total entrants 2015 & 2016	% Total
HSE	1,836	1,691	3,527	21.2%
Private Nursing Homes	6,663	6,430	13,093	78.8%
Total	8,529	8,121	16,620	100%

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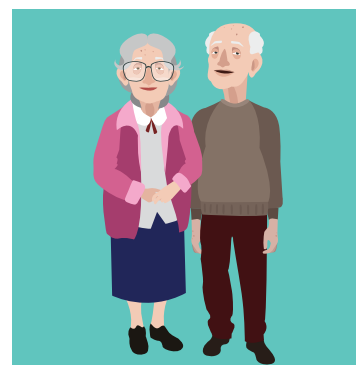
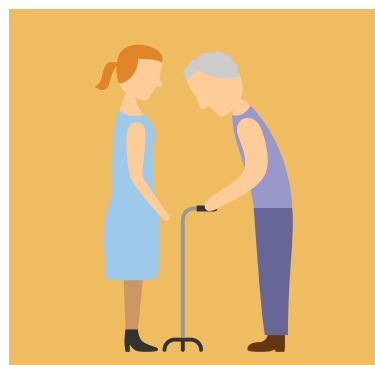
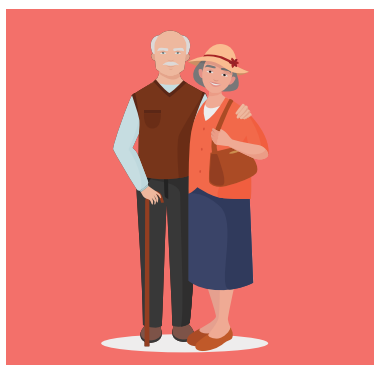
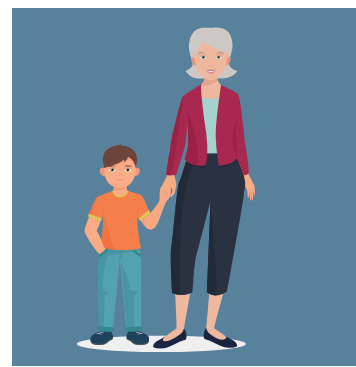
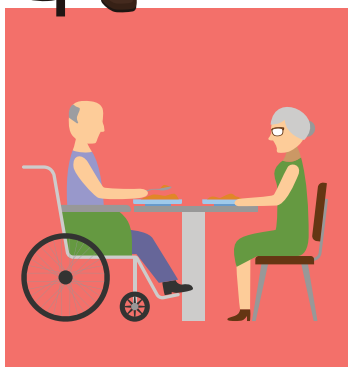
1. SACN-Consultation on draft SACN Vitamin D and Health report 2015.
Date of Preparation: January 2017 EN/Crème/001/17



Nursing Homes Week

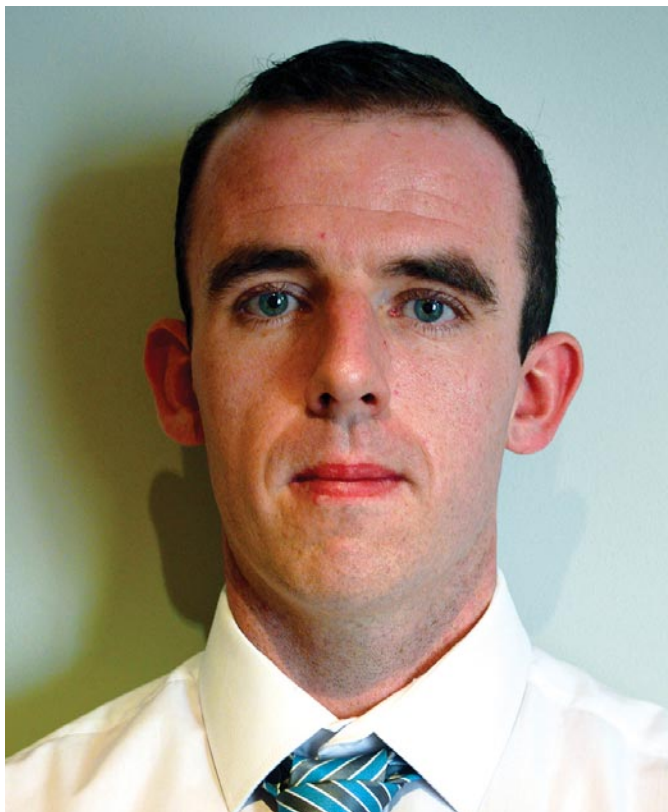
29th May - 5th June 2017

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Rewarding the trust placed within you as leadership skills are developed

25-year-old Philip Archbold fulfils the role of carer at AnovoCare Nursing Home, Swords, Co Dublin. Philip, the winner of the NHI Care Awards Carer of the Year Award 2016, describes initiatives he has undertaken within the nursing home to support residents wellbeing, the important attributes for a carer within a nursing home, and what his role entails.



What attracted you to working in a role as a carer?

Being a Carer was the chosen career of my mother and sister and the same qualities are within me. I started working in a nursing home as a kitchen porter and waiter and within a year I had started working as a healthcare assistant.

What appeals to you for fulfilling the role of a carer within a nursing home?

I could see from fulfilling my previous roles within the nursing home the importance of working as part of a team, towards the betterment of residents and this was a big appeal in my decision to pursue the role of a carer. I also observed the excellent support nurses and doctors provide to residents and to carers in fulfilling their role.

What training did you undertake to fulfil the role?

I obtained a Fetac Level 5 in Healthcare Support. This training enables me to understand the responsibilities placed upon me as a carer and provided me with the training and practice to fulfil the role and respect the residents in doing so. It placed emphasis upon diversity in the care setting, working within a team, and the importance of and crucial considerations when communicating.

What does the role entail?

I seek to provide the residents with the best care and to meet and exceed their needs and wants. On a daily basis, I work alongside a team of clinical staff that from pre-assessment stage treat each resident as an individual. This requires me to be a team player and to be patient and courteous with both residents and colleagues, even under the most stressful and challenging circumstances. I ensure I take the time to read residents assessments, their care plans, their life stories, preferences and choices. I also take time to sit with the residents to gain an understanding of their needs. All of this prepares me for engagement with the individual residents and supports me in providing them with care.

How have you developed within the role?

I've taken it upon myself to be fully involved in the care plan meetings involving residents and these meetings inform the team from a carer perspective. This entails discussing the physical, psychological and social needs with the resident and their team. I also engage with our activities team, providing input re the programme of activities that is developed for residents.

Have you developed initiatives within the role?

In conjunction with our Head Chefs Vytara and Neil, I have developed a 'unique meal time' experience for our residents. This enables us to create a fine dining experience for them.

Using a special booking form, they can invite one family member to a special dining experience on a weekly basis within the nursing home. This is proving to be a great experience and social occasion for the residents and their families.

Also, in conjunction with our activities team, a green finger gardening programme has been developed for residents. Materials have been sourced locally to allow our residents develop our flower, vegetable and herb gardens within the home. These have provided a great focal point for residents to socialise together and to provide further input into how their home is developed. Our recently developed sensory garden is enjoyed by residents, staff and visitors.

What are the challenges within the role?

Certain behaviours due to underlying illness can sometimes presents difficulties that every carer would be aware of. Also of course, the loss of a resident can prove very difficult. A day-to-day challenge is to ensure you are providing the best care to the resident entrusted in your care and you are enabling them to live as happy and fulfilling a life as possible.

What satisfaction do you derive from fulfilling the role?

It gives me great satisfaction to promote and support a resident in being independent. Also, it is a pleasure to build relationships with residents and their families and very rewarding to have their trust placed in you. Developing into a team leader and training new staff members is also a big part of my role.

What do you see as the benefits of working in a nursing home?

Building and developing a lasting relationship with our residents provides unique job satisfaction within this setting. It is great to speak with residents about their past and what has changed in their lifetimes. Also, it is great to work with a diverse team that is focussed upon improving the residents' health and wellbeing. The nursing home is very receptive to new ideas you want to advance and develop. Within a nursing home you are continually meeting new people, making new friends and being

exposed to different cultures. Working in a nursing home is a great place to learn the value of life, learn to work as part of a team and learn respect and empathy.

Is a nursing home a good setting for a young person to work within?

I would recommend any young person considering such a role to ensure they are committed to it and it does require a lot of dedication.

What would you advise anyone considering applying for a role of carer within a nursing home?

Anyone wanting to become a care assistant should be a positive person who wants to make a difference to the lives of the people entrusted in their care. The job involves helping people who have problems performing daily activities so you should have a friendly and caring approach. It is important to be able to relate to people from a wide variety of backgrounds. It is also very important to be patient and to have a good sense of humour.

My Nursing Home Life affords persons working within a nursing home setting the opportunity to discuss their role and advise the wider public of what it entails and employment within such a setting.

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Opening the door to improved health and wellbeing in the community

A health and wellness centre has been developed at a Co Clare nursing home to provide a wide range of services that provide health and wellbeing benefits to older people in the local community. The concept opens the nursing home to the wider community. Last April, the centre became a hub within the county for a programme of talks and activities surrounding older person wellbeing. The nursing home's concept was the recipient of the NHI Care Awards Community Initiative Award.

The perception of nursing homes being removed or isolated from local communities is being eroded. Across Ireland, nursing homes are integrated within their local communities and acting as a hub for wider community activity. Nursing homes are enabling older people and others to connect within their community. Through programmes, initiatives and events, students, volunteers and the wider community are becoming familiarised with the local nursing home and engaging with the residents living within them.

Carrigoran House utilises its recently established health and wellness centre to integrate itself with the local Newmarket-on-Fergus community and the extended Co Clare county. Established in 2013, the centre offers a myriad of services that enhance the quality of life, the health and wellbeing of over 100 people who are living in the local community. These services enable older persons to live longer within community, to be healthier, more active, vibrant and engaged.

As well as integrating Carrigoran into the local community, the centre also creates a positive familiarity with the nursing home and 'opens its doors' to people that would not otherwise have occasion to visit Carrigoran. Staff within the centre are supported by local volunteers to provide the services to the wider community. These services provide respite and support for carers. A day-to-day programme is planned and implemented to encompass social, creative, fitness and leisure activities.

The services provided support health, wellbeing and deliver classes to bring enjoyment, interaction and stimulation. These encompass:

- Day services for older adults that include beauty therapy, hairdressing, chiropody, dental services
- A health and wellness programme
- Health screening
- Computer skills classes
- Drama classes
- Arts & craft workshops and art classes
- Exercise programmes
- Music and entertainment

- Provision of education and training facilities for the wider community

"The Health & Wellness Centre enhances the quality of life, health and wellbeing of over 100 people living in the local community," Aodhnaid Lennon, the centre manager states. "Just like life, provision of a day care service does not stand still and at the health and wellness Centre our desire to constantly improve and develop, bringing with us new ideas and new ways of thinking. Our focus is on providing ongoing support to local people living within our community by providing them with relevant and valued services that promote and support their health and wellbeing. Extending the services we provide via the centre enables us reach out and further integrate within the wider community. It helps place Carrigoran at the heart of the local community and enhance the positivity surrounding the care services we provide."

In April 2016 the centre hosted Clare Expo, an event that encompassed a conference, exhibition, open classes and recreational activities that focussed around promoting older person wellbeing to the wider community. Carrigoran collaborated with The Clare Age Friendly County Programme to host the event. Run over two days, the conference on day one featured talks on:

- Dementia care
- Community care for older persons
- Positive ageing
- Education and development for older persons
- The role of activities and sports to support wellbeing
- Men's sheds

It brought together a host of professionals from diverse backgrounds to inform, in particular, people working with and caring for older persons in the county.

The programme for day two encompassed fun fitness, mindfulness, reflexology, pilates, yoga, health screening and a tea dance.

Clare Expo brought together local help and support groups to inform of the services they provide and local organisations and businesses provided sponsorship.





"The Clare Expo was a ground-breaking event for County Clare," Mary O'Dowd, Quality Officer at Carrigoran states. "It showcased the positivity of entering the third age in people's lives and was enjoyed by all who worked on the Expo and attended it. The event provided a platform to enable older person services present what they offer in a positive manner. It also enable professionals to hear current thinking and research surrounding practice in older person care and ask questions to leaders within their field. The upskilling and networking is benefitting provision of older person services in Co Clare. And the interactive workshops and activities hosted at the Expo opened locally available activities to older people and promoted their accessibility. The Expo created enormous positivity around the health and wellness centre and Carrigoran House."

Within the wellness centre, three healthcare assistants, a nurse and a centre manager are supported by a team of local volunteers who generously contribute not just time, but their talents.

In 2016, the centre also published *Of Pleasant Days Gone By*, a book based on the memories and musings of the centre users. It recalls life in 20th Century

Clockwise from left:

A trad music performance bringing residents and the local community together at Carrigoran Health and Wellness Centre

Afternoon dance at Carrigoran Health and Wellness Centre

Clare Expo, hosted by Carrigoran Health and Wellness Centre, brought together a host of professionals from diverse backgrounds to inform working with and caring for older persons in the county.

Heritage Week 2016 featured a showing of the film *Older than Ireland*

A selection of artwork on display at the centre that coincided with a talk on the importance of art therapy for older persons

Ireland before rural electrification, before running water in homes and before most families even had a car

"We work closely with the Public Health Nurses and Social Care teams within our catchment areas as well as other key health care professionals to deliver a comprehensive, needs driven, non-stigmatising and empowering a programme as possible," Aodhnaid explains. "Added to this, the many characters who visit the centre create a wonderful atmosphere. The health and wellness centre replaces the concept of an old day care centre, bringing together a vibrant community of enthusiastic people participating in their preferred activity."

Best Practice is a feature in NHI News that focusses on best and innovative practices in nursing homes. Nursing Homes are invited to make us aware of practices the wider public should be aware of and can contact michael@nhi.ie if interested in contributing an article •

Open dialogue focusses minds on end of life care

Linda Carew, Person in Charge at Millbrae Lodge Nursing Home, was the recipient of the NHI Care Awards 2016 End of Life Care Award, sponsored by the Irish Hospice Foundation. The ethos surrounding end-of-life-care at the Co Tipperary nursing home is based upon openness and dialogue. A comprehensive training programme has enabled staff to deter unnecessary admissions to hospital for end-of-life care and enabled them be comfortable and competent in planning and coping with the emotional demands of meeting expectations and providing this specialist care. Linda explains the journey she and the staff have undertaken to create an environment that embraces end-of-life care and ensures a reassured and comforting approach is in place to support residents making their final journey and their family and fellow residents.



We always felt we provide a high standard of end of life care at Millbrae and this was confirmed to us on an ongoing basis by bereaved families. However, we wanted to strive for improvement and identified areas to focus upon, such as better end of life care planning, along with issues surrounding symptom control and admissions to hospital.

The ethos surrounding end-of-life-care at Millbrae Lodge is based upon openness and dialogue. Staff have attended training in palliative care and the What Matters to Me programme. The training provided has helped them to be comfortable and competent in planning for and providing end-of-life-care. The care plans we have in place provide great support to staff, bringing together guidance and a structure that enables families and residents talk about plans for their loved one in advance, rather than having to make decisions when under stress. We have found this advanced planning has been very helpful in preventing unnecessary hospital admissions, particularly when out-of-hours

doctors who may not be familiar with the resident are on call.

The End of Life Symbol that we have adopted within the nursing home has proven to be very helpful as a communication to staff and residents. This spiral symbol aims to add respect and solemnity to items used prior to or following the death of a person and to make resources relating to the end of life instantly identifiable. It communicates to staff and visitors that a resident is imminently dying or has died. Awareness of this profound event allows staff to interact appropriately with those affected by the death. On seeing the symbol, people should create an atmosphere of quiet where people are respectful, avoid mobile phone use and be prepared to meet people who are grieving. Its purpose and significance are notably:

- The three stranded white spiral represents the interconnected cycle of birth, life and death
- The white outer circle represents continuity, infinity

and completion

- Purple is associated with nobility, solemnity and spirituality

Previously, a resident may have died and their remains could have been removed from the nursing home with only a few residents being aware of the passing. Staff felt spreading the word could be upsetting to other residents, who may have upsetting and somewhat natural thoughts like 'I might be next'. Speaking of the passing may also have been considered as 'gossiping', staff may have been uncomfortable speaking about a passing to residents, and they may not have considered informing them of such an occurrence.

The symbol acts as a communication tool and has helped create a more comfortable culture and attitude amongst staff to speak with residents about a passing. They are encouraged and supported by staff to engage in a grieving process, where appropriate and comfortable. This is beneficial for the residents as they can grieve for their friend and feel a sense of worth in supporting the bereaved family. Families feedback to us they feel great comfort from being supported by the residents and staff. Further to introduction of the Symbol, two years ago we introduced a memorial tree. It is placed in a large open lounge near the entrance to the home. Visitors, residents and staff are invited to enter the name of their loved one in a book that is placed at the base of the tree. They may include an anecdote or a saying that reminds them of the person within the book. This book is placed on the altar at our November memorial mass, where we remember those residents who have died in the preceding year. The November mass is utilised as a focal point to provide information on bereavement and the Irish Hospice Foundation's Think Ahead Programme.

Also as part of our end-of-life programme, our Social Care Co-ordinator Roisin engages with residents to create an angel or dove that features the name of the resident that has passed away and it is then hung on the tree.

Our staff have participated in the Irish Hospice Foundation's Journey of Change programme. A big emanation from this is the structured review meetings that follow on from the passing of a resident. I feel the open and dialogue-focussed

culture within our nursing home helps staff feel comfortable in discussing their feelings and concerns surrounding end-of-life-care more readily.

On a personal basis, I feel confident in supporting staff following the death of a resident. Much of this arises after undertaking in 2014 a Certificate for Essential Palliative Care and education in palliative care for people suffering from dementia.

Here at Millbrae Lodge, we have developed a strong relationship with the Hospice at Home team based at Milford Hospice Limerick. They share their vast knowledge and experiences of supporting people passing and their families with our staff.

One challenge and frustration that has arisen in our end-of-life care has been when it was felt GP's did not utilise staff knowledge about symptom control. While these incidents were rare, they were distressing for staff. Often times families were not as affected as staff were, as residents still received a very high standard of care. This was the primary reason for me undertaking and completing the Certificate in Essential Palliative Care and sharing the knowledge gained from it with staff. Furthermore, staff members undertook short courses in palliative care. These measures provided our staff with the confidence to present up-to-date, evidence-based, knowledgeable ideas to GP's and out of hour's doctors. This had led to better end-of-life-care for our residents, and fewer admissions to hospital.

None of these initiatives would have come to fruition without the support and willingness of our staff to embrace and learn best practices in end-of-life care. Across the board new initiatives have been implemented. Nursing home care is 24/7 and the high standard of end-of-life care is available on a continuous basis from staff within Millbrae Lodge. Often times people will ask 'how do you cope when a person dies'? If we in the nursing home feel we have done the very best we could for the passing person as they make their final journey in life we all derive personal inner peace and it brings contentment and satisfaction.

Linda's background

I started nursing as a Health Care Assistant in my local hospital in Guernsey before moving to Southampton where I completed my General Nursing training. I spent several years in Australia and in the USA where I gained valuable professional and personal experience; along with a qualification of Critical Care Registered Nurse. Prior to moving to Ireland, I worked in ICU at Seton Medical Centre just outside San Francisco and lived in Millbrae California - hence the name of the nursing home. In 1998 I moved to Ireland and with my husband established Millbrae Lodge, which opened in November 1999 with 38 beds and was extended to 81 in 2006. While working in San Francisco I was affiliated to the education department within the hospital. I continue to enjoy taking part in, and facilitating, ongoing training and education. Relevant to this award, in 2014 I completed the Certificate in Essential Palliative Care and Education in Palliative Care for People Suffering from Dementia.





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