



THE RESIDENT'S GUIDE

THE VILLAGE RESIDENCE

DROGHEDA

A RESIDENTIAL SERVICE FOR OLDER PEOPLE

Revised August 2023



REGULATIONS

This information brochure sets out important information for people who are considering coming to The Village Residence for extended Residential Services in line with Part 6 Section 21 (1) of Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013.

GUIDE

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THE PURPOSE

The Village Residence is a care home for older people.

The Village Residence is a centre for older people who require extended and short stay care.

“The purpose is to provide a high standard of personal and social care to older people in a residential setting so that each person is enabled to live as fulfilling and independent a life as possible””

The Village Residence offers a level of specialist care, provided by trained staff, to enable older people living in the Village Residence to have as much autonomy in their lives as is possible being provided with the level of support to live fulfilled lives.

Michael MC CAUL

PERSON IN CHARGE



ABOUT US

The Village St. Mary's is currently registered to provide residential care for 30 residents. As of August 2023 an application is being made to the Health Information and Quality Authority for registration of additional thirty beds in the Village Residence.

The Village Residence is currently registered to provide residential care for 30 residents for both male and female.

It is made up of two buildings side by side – St Mary's (Meadowview and Sunnyside) and The Village Residence (Butterfly Cottage, Red Robin Cottage and Forget-Me-Not Cottage).



★ KNOW ★ YOUR RIGHTS

AS A RESIDENT I HAVE THE FOLLOWING RIGHTS.

I have the right for my privacy
I have a right to ensure my dignity is upheld
I have the right to be treated like any other human being regardless of the colour of my skin
I have a right not to be discriminated against because of my age or my disability
I have a right to feel protected
I have the right to say no.
I have the right to be cared for and receive healthcare.
I have the right to special care, enhanced care and extra support if I need it along with the appropriate activities, recreation and occupation.
I have a right to education, information, development and to be kept informed.
I have a right to live.
I have a right to express my sexuality
I have a right to vote
I have the right to have my culture, language and religion respected.
I have the right to have my identity upheld
I have the right to have my say and at all times to be listened to.
I have the right to have my family and friends
I have a right to see this centre as the place I live and see it as my home.
I have the right to healthy and adequate food
I have the right to go places and see people.
Talk to me, not at me.
I am happiest when I know I belong. I have the right for my privacy
I have a right to ensure my dignity is upheld
I have a right to feel protected
I have the right to say no.
I have the right to be cared for and receive healthcare.
I have the right to special care and extra support if I need it.
I have a right to education and be kept informed.
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Aim Objectives

Aims of the Centre.

The Aim of the Village Residence and the Village St. Mary's is care.

to provide a high standard of personal, health and social care to older people in a residential setting, who require extended care, so that each person is enabled to live as fulfilling and independent a life as possible.

Objectives of the Centre.

Our objective is to revolutionize to remodel residential care by offering services that foster independent living for older individuals while ensuring dignified care for those who require assistance. We aim to move away from the traditional institutional model and create a supportive environment that promotes autonomy and well-being. The provision of care is based on a bio-psycho-social and gerontological approach to care.

Enable residents to enjoy a good quality of life in a place that

feels like home, with access to necessary social

- Promote person-centered care, uphold rights, respect privacy and dignity, and protect against abuse and neglect.
- Collaborate closely with residents and their representatives to understand and honour their wishes, particularly when making decisions.
- Facilitate independence and personal choice for older people, including those with dementia.
- Hold regular resident meetings to listen to and act upon their wishes and views.
- Conduct regular staff meetings to improve standards of care.

- Conduct audits to ensure compliance with regulations and learn from practices.
- Provide extended care services and respite services between the five households.
- Continually assess and reassess residents' abilities and health and social care needs, creating individualized care plans and ensuring safe and transparent discharge written from the perspectives of the resident.
- Coordinate with other services to support older people in remaining in their own communities for as long as possible.
- Deliver high standards of care and maintain privacy, dignity, independence, choice, fulfilment, and rights for residents availing short stay services during recovery.
- Assist individuals in coping and adapting to their circumstances and returning to normal life.
- Monitor and evaluate systemic shocks, crisis situations, chronic conditions, frailty levels, and limited support networks.
- Provide a conducive learning environment for staff and residents and relative's.
- Facilitate religious services or outside visits, while considering any national IPC issues.
- Provide Service Users Guide and Statement of Purpose to inform residents about the centre.
- Assign named nurses and key workers to each resident.
- Improve care standards through comprehensive staff training.
- Implement policies and procedures to safeguard residents and staff.
- Involve residents through various methods to listen to and act upon their wishes and views.
- Work closely with residents and their representatives when they have difficulty making informed decisions.
- Promote independence and personal choice for all older people in their daily lives as well as assigning the staff member to work closely with each resident in their transition time.
- Facilitate the residence in assisted decision making.
- Ensure the residents are aware of and have access to Advocacy services.
- To ensure the residence know to who to contact should a resident have a concern issue or complaint.
- To ensure the resident know to who to contact if they have safeguarding issue.
- To audit our services to ensure we learn from our practices and ensure compliance with Health Act 2007 (Care and Welfare of Residents in Designated Centre's for Older People) Regulations 2013.
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Infection Control Measures & The Village Residence

National Guidelines on infections are frequently revised.

These guidelines may in some instances have an impact on your admission

The guidelines for The Village Residence are at any time based on what is published by the Health Protection Surveillance Centre

The Village Residence staff will keep you informed of any changes

CONTACTS

ST.MARY'S HOSPITAL

The Village
Residence, Dublin
Road Drogheda
County Louth
Ireland.
A92X862

PERSON IN CHARGE

00 353 41 9893203
00 353 41 9893204

Meadowview

041 9893205 Direct Line

Sunnyside

041 983209 OR 9893210 Direct Line

Butterfly Cottage Tel:

Red Robin Cottage Tel:

Forget Me Not Cottage Tel:

REGISTERED PROVIDER:

Health Services Executive
Ms Emma Gonoud (Nominated person to act on behalf of HSE)
General Manager Older Persons Service—CH08
Health Centre
Mullingar
Co Westmeath
T: 044 93 95078



FIRE SAFETY.

Prior to your admission to The Village Residence you will have a safety assessment completed in relation to fire safety. The room you may be allocated to will be discussed with you particularly in relation to fire safety.

We will invite you to take part in fire drills and evacuation in order to ensure you are familiar with fire safety arrangements within the centre.



Charges

You will be given a document called a Contract of Care. A contract of Care is governed by The Health Act 2007 (care and welfare of residents in designated centres for older people) regulations 2013 and require:

The registered provider shall agree in writing with each resident, on the admission of that resident to the designated centre concerned, the terms on which that resident shall reside in that centre.

The agreement referred to in paragraph (1) shall relate to the care and welfare of the resident in the designated centre concerned and include details of—

- (a) the services to be provided, whether under the Nursing Homes Support Scheme or otherwise, to the resident concerned,
- (b) the fees, if any, to be charged for such services,
- (c) where appropriate, the arrangements for the application for or receipt of financial support under the Nursing Homes Support Scheme, including the arrangements for the payment or refund of monies, or
- (d) any other service of which the resident may choose to avail but which is not included in the Nursing Homes Support Scheme or to which the resident is not entitled under any other health entitlement.

The document, referred to as a Contract of Care sets out in writing, the terms on which a resident resides in this Centre. The services provided as outlined in this document are funded by the Nursing Home Support Scheme as well as a contribution from you based on the financial assessment that was undertaken with you prior to you selecting this nursing home as your nursing home of choice. The balance of your fees are paid by the Department of Health. All services as outlined in this contract are funded by this programme. It does however not cover charges such as hairdressing/ barber, private travel, or travel expenses incurred by attendance at private outpatient clinics where this charge would normally be met by the person themselves if they lived at home. It does not cover private taxi use, or payment of any transport, other than that required to assist the person in their discharge home. This charge does not cover private therapy if that is what a resident or family may feel they require.

The centre will not charge any resident for any private service. Services such as hairdressing will be an agreement between the resident and the private service provider. Payment for use of private transport will be an agreement between the resident and the transport provider.

Private therapy provider arrangements will be an agreement between the resident and the private practitioner.

Your Contract of Care with this service outlines the services available to you, and also gives information to you on how you can pay for the services provided.

Please refer to your contract of care.

Name and address of Registered Provider

**Registered Provider:
Health Services Executive
Ms Emma Gonoud**

**(Nominated person to act on behalf of
Health Services Executive)**

General Manager Older Persons

Service—CH08

Health Centre

Mullingar

Co Westmeath

T: 044 93 95078

**PERSON IN CHARGE/
DIRECTOR OF NURSING.**

Mr Michael McCaul.

The Village Residence
Dublin Road, Drogheda , Co. Louth.
Tel: 041 9893203

**Clinical Nurse
Manager 2**

Ms. Simy Kurian

c/o The Village Residence
Dublin Road, Drogheda
Co. Louth.
Tel: 041 9893210

**Clinical Nurse
Manager 2**

**Ms.Sujitha
Sukumaran**

The Village Residence
Dublin Road
Drogheda , Co. Louth.

MAXIMUM NO OF RESIDENTS AND MAXIMUM NUMBER OF RESIDENTS WHO CAN BE ACCOMMODATED:

The centre is registered with the Health Information and Quality Authority to provide a maximum numbers of residents who can be accommodated to be 30. An application is being made to the Health Information and Quality Authority in August 2023 to provide an additional 30 beds in the Village Residence bringing the total number of beds to 60. Five of these beds will be used for short stay care.

STAFFING

The Village Residence is a nursing/residential facility. This means that some of our residents require nursing care on a regular basis, and others on a less frequent basis. Therefore you may find that you will have a nurse assisting you with your care, or a care assistant, a home maker or activities facilitators.

All Staff will wear a name badge and should at all times introduce themselves to you. Different staff have different roles but all staff work as a team for the benefit of the people who live here. Staff roles may not be identified by uniform as staffs have moved away from wearing of uniforms. There is always at least one nurse on duty twenty-four hours per day.

Residents may have access to a medical, nursing physiotherapist, occupational therapy, speech and language therapy and a dietician. Residents will also have access to a specialist case worker in elder abuse and can access an advocate through SAGE advocacy Services.

Residents in Saint Mary's who are eligible for specific services and those residents who hold a medical card will be supported to avail of relevant allied health care services free of charge.

Residents admitted for extended care can retain their own general practitioner but on coming to live in the service may be medically managed by the medical officer.

OTHER VISITING PROFESSIONALS

- Other visiting professionals:
- GP
- Chiropodist
- Dentist

PHARMACY.

Residents are welcome to retain their pharmacist of choice. The Pharmacy Service that provides services to the Centre currently is; Stack's Pharmacy.

Address: Strand Rd, Co.Meath, Laytown, Co. Meath

Hours:

Open : Closes 7 p.m.

Phone: (041) 982

7163.**Province:** Leinster.

The Centre provides services for adult female and male residents over the age of eighteen years who have an assessed care need. The Centre is also designated to accommodate residents who have advanced dementia and who require extended care.

Type of Nursing Care

There is a Registered Nurse on duty twenty-four hours per day. The model of nursing care is based on the bio-psycho-social and gerontological model of nursing. All nurses working in the Village are maintained on the live register of nursing as registered for by the Nursing and Midwifery Board of Ireland. Care Assistants all support nursing care in the provision of physical emotional and social care aspects. Home makers also provide support to nursing staff in the provision of home making duties.



Type of Care

The criteria for admission.

As a person considering The Village Residence for residential care services, you are invited to come and view the centre before you make your decision.

A number of major changes have been introduced as a result of the Assisted Decision Making Capacity Act, 2015

Presumption of capacity

First, the presumption of capacity means that everyone, regardless of age appearance or diagnosis has capacity to make decisions unless shown otherwise. When a person has an everyday decision to make the person assessing capacity in that instance is the person presenting the decision. Capacity is always assumed.

The assessor will mainly be family or staff or other carers.

Major changes from the legislation Overall, three major changes to how we perceive and treat capacity arise from this legislation and specifically from the guiding principles. These include the presumption of capacity; the use of a functional approach to capacity; and the shift from 'best interests' to will and preferences.

A photograph of a woman with dark hair, wearing a light-colored cardigan, helping an elderly man with a white beard and glasses. She is pulling a dark jacket over his shoulders. They are outdoors with green foliage in the background. The image is partially covered by a large orange triangle pointing towards the top right.

Functional APPROACH

This leads to the second major change this Act brings and that is moving Ireland from a “status-based” approach to capacity to a “functional” approach. This means that an individual with, for example, a dementia diagnosis, would no longer be presumed to lack capacity simply because he or she has a diagnosis. Instead, that individual would be presumed to have capacity and, if that capacity is called into question, capacity is to be determined in a decision-specific, time-specific fashion; i.e. for any given decision, capacity is to be decided based on the individual's understanding of that decision, at that time.

Capacity is taken on a case-by-case basis and not connected to diagnosis. And while an individual may have reduced capacity for a certain decision today, he or she may well have capacity for other decisions today, and may regain capacity for all decisions in the future.

This applies to all admissions as well.

All potential Applicants to the Centre seeking extended care must be processed through Nursing Home Support Services (Fair Deal) requirements as issued through the Department of Health and Children (2009).

Each prospective Resident must have care needs requiring extended care.

All prospective residents currently must reside in the Louth area though applications can be considered from any area. It may be difficult to retain your own G/P if coming from another county. A Nursing assessment must be completed by a public health nurse using Louth Community Care Area application form. This

form must contain the demographic details of the resident, and contain an assessment of the individual's cognitive status and their functional status as well as their social background and levels of support currently available in the community. This must also be accompanied by a medical assessment.

Residents requesting extended care must have completed The Nursing Home Support Scheme Application Process. The resident or their family must have The Village Residence as one of their choices for extended care.



ACTIVITIES

Each individual resident will have an assessment carried out in order to determine, their needs and their abilities in relation to activities. Different residents will have different needs and abilities. Also different residents may have different strengths in relation to family involvement As residents progress in their illness, their needs and will be assessed based in consultation with residents and relatives. Relatives are actively encouraged to highlight past interest and hobbies and work interests. We will assist in facilitating you in any recreational, occupational activities that are available. We will with your assistance assist in creating opportunities for occupation and activities.



CONSULTATION WITH RESIDENTS

There is a Residents Focus Group in operation here in The Village Residence, and all residents are facilitated along with their relatives to join this group. The centre welcomes any ideas for improving the service and the Residents' Group provides a forum for residents to put across their views. We encourage people to join and give their views on enhancing the service. We encourage the Residents/Relatives Group to collaborate to improve life here within the centre, and maintain links with family/community.

FIRE Precautions



A fire safety risk assessment will be completed with you prior to your admission to the centre. Your safety in relation to fire safety is of utmost importance. We may have to decline your admission to the centre if we determine that we could not meet the risks associated with you and fire safety.

The centre has a full safety statement and risk assessment in compliance with Health and Safety at Work Act (2005). The risk assessments are reviewed on an ongoing basis or as new risks are identified. A safety committee is in operation and the site is supported by the Regional Fire and Safety officers and designated safety reps. The Unit has an overarching safety statement agreed with the General Manager.

The centre has a Fire Safety Policy, fire safety procedures and a Personal; Evacuation Egress Plan for each resident. Each unit within the centre has a fire alarm and warning system. Fire instructions are clearly displayed throughout the Unit. All fire Exits are clearly marked and Fire Extinguishers are situated throughout the Centre.

The centre has a number of sledges available throughout the centre for the safe evacuation of residents who are immobile

Each resident on admission has their own personal evacuation and egress plan drawn up by nursing staff to ensure the safest plan is in place for you in the event of an evacuation.

As a resident you have the right to know what your evacuation plan is and you can see it at anytime.



RELIGIOUS SERVICES

Mass

Mass is held in the Centre. It is televised to areas for those residents who are unable to attend and who wish to celebrate mass in the Centre.

Other Services / denominations.

All denominations are respected by this service. A multidenominational spiritual room is available within Sunnyside unit

All denomination leaders are welcome to this centre.

VISITING



SEEING FAMILY AND

You have a right to see family and friends if you want to. It is for you to decide who you would like to see or not see. It might suit you to name a person as a nominated support person. This is like a “lead visitor” who can spend a good part of each day with you in normal times. This might suit you if there is one person who is able to spend a lot of time with you. If you prefer not to have a nominated support person that is up to you.

How many different people can visit?

There is no limit to the number of different people who can visit you, but no more than two people at a time. If there are a lot of people you want to see they will need to take turns to visit you.

Can children visit?

Yes, but an adult needs to be with the child and needs to make sure the child keeps to the rules in the nursing home.

How long can the visits be?

The visit can usually be as long as you want unless the nursing home is getting very crowded or the visit is causing a problem or a risk for other residents. If there are times when visits need to be a bit shorter, nursing home staff will be able to tell you about this.



VISITING

Seeing family and friends

Are there times when people should not visit?

Your friends and family will need to stay away from the nursing home:

- if they have any symptoms of influenza type or of any other infection
- If they have been told they have to self-isolate.

Can visitors bring in things for me?

Yes, they can bring books, papers, magazines pictures, keep-sakes or a favourite food.

Is it OK to go out for a drive or a visit home with a visitor?

Yes, but it is safer if you and the person driving you have had your vaccination and booster.

Is it OK to go to visit the house of a friend or family member?

Yes,

If I am very sick or upset can I see ask for more visits than usual?

If you become seriously ill or are very upset or worried you should tell the staff if you feel you need to spend extra time with visitors. In that case the staff will do everything that can be done to help you see the people you need to see.

Why is it safer to see people now than it was last year?

The advice for residents in nursing homes is very different now. This is because most residents have been vaccinated and have had the booster. Most of the people who visit nursing homes have also been vaccinated and have had the booster. We know that people who have had vaccination including the booster can still get infection but most of those people who have had the booster do not get very sick with COVID-19 infection. Please enjoy the visit, and do not feel pressured to end your visit quickly.

When you should not visit/ Mix with other residents or other visitors.

Do not visit if you have:

- been told you are a close contact of someone with COVID-19
- any symptoms of COVID-19 or any other infection, including a cold or flu
- symptoms of gastroenteritis, such as diarrhoea and vomiting

If you have any of these symptoms, wait until at least 2 days after any symptoms have gone before visiting. If you are a close contact, you will need to wait until you have restricted your movements for 14 days.

The resident's right to decline a visitor will be respected at all times.

Family members are invited to be involved in the care planning process. **(See letter of invitation to relatives to become involved in care planning)**. Under normal circumstances, Residents are encouraged through their families and with staff to attend various events within the community. Family and staff are also encouraged to bring in posters of various local events. Making the decision to move a person into residential care can be one of the most difficult thing that families and carers will do. There are many decisions to be made and arrangements to organise, which can result in families experiencing a wide range of conflicting emotions.

During this stage, be patient as it will take time for you the family and the resident to adjust to the new situation. Extended family members may also experience a sense of loss. Any change in care arrangements can be disruptive so understand that there will be an adjustment period for everyone involved.

Regular visits to the Centre can enable both the person and their loved ones to feel more at ease with the change in living arrangements. Familiar items, enjoying an activity together, or simply sitting and talking can enable your relative to feel more at ease. The important thing is to make each visit as rewarding as possible. All facilities are yours to use, go for a walk, give your relative something to do, no matter how small a job it is. Keep your relative informed about things going on outside, tell them of events taking place and keep them informed of their friends and other relatives. Laugh, laugh often and laugh loudly!

Please feel free to become involved in your relatives support. There will be so many things you know about your relative that we don't. One of the things we ask of you respectfully is to become involved in your loved ones care plan. It is their care plan which is facilitated by nursing staff. You may not be familiar with this term so please ask a member of staff to explain to you what this involves. They will explain and seek your advice in relation to the plan of care. Please give yourself now at this time some space for yourself, but most of all if you have any concerns about the care your relative is receiving, please do not hesitate to speak with the Nurse Manager.



Complaints

The Centre is required to be compliant with S.I. No. 628/2022 - Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) (Amendment) Regulations 2022

Each resident aware of the complaints procedure as soon as is practicable after the admission of the resident to the designated centre concerned, and

(b) display a copy of the complaints procedure in a prominent position in the designated centre, and where the provider has a website, on that website.

We shall ensure that the complaints procedure provides for the following:

(a) the nomination of a complaints officer to investigate complaints;

There are currently three complaints officers onsite as nominated by the Health Service Executive

(b) that complaints are investigated and concluded, as soon as possible and in any case no later than 30 working days after the receipt of the complaint;

We do ensure that all complaints are investigated and concluded no later than 30 days after the receipt of the complaint.

(c) the provision of a written response informing the complainant whether or not their complaint has been upheld, the reasons for that decision, any improvements recommended and details of the review process;

The person in charge along with the registered provider nominee ensures the provision of a written response informing the complainant whether or not their complaint has been upheld, the reasons for the decision and any improvements recommended along with details of the review process.

The registered provider may, where appropriate assist a person making or seeking to make a complaint,

subject to his or her agreement, to identify another person or independent advocacy service who could assist with the making of the complaint.

The registered provider shall ensure that:

(a) all complaints received, the outcomes of any investigations into complaints, any actions taken on foot of a complaint, any reviews requested and the outcomes of any reviews are fully and properly recorded and that such records are in addition to and distinct from a resident's individual care plan; and

(b) as part of the designated centre's annual review, as referred to in Part 7, a general report is provided on:

(i) the level of engagement of independent advocacy services with residents, and

(ii) complaints received, including reviews conducted.

(7) The registered provider shall ensure that –

(a) nominated complaints officers and review officers receive suitable training to deal with complaints in accordance with the designated centre's complaints procedures, and

(b) all staff are aware of the designated centre's complaints procedures, including how to identify a complaint." This training has commenced. All issues, concerns or complaints are documented by any staff member receiving a complaint using first point of contact complaints resolution form.

Should the complaint remain unresolved, the complaint will be managed by one of the complaints officers as delegated by the person in charge in conjunction with the provider nominee who is also the General Manager of the services for older people in CHO8.

Each resident and their family has been provided with information on who they can go to if they have an issue, concern or complaint. The person in charge has ensured that a copy of the complaints procedure is in a prominent place. The new website is currently under construction and this information will be provided under information for residents as well in the section information for staff

All residents and their families have been given information on who they could talk to if they had an issue, concern or a complaint. The process of dealing with an issue, concern or a complaint is the same.

The service keeps a record of all complaints and all compliments

An analysis is completed of all complaints to analyse trends or specific issues that may emerge.

Complaints, comments concerns or issues are welcomed and are viewed as an opportunity to learn.

The Centre fully participates in the Health Services Executive "Your Service, Your Say" comments and complaints system. Service users and their families are advised that complaints may be made openly or anonymously and that complaints will be dealt with thoroughly and sensitively as per the Health Services Executive Complaints

Procedure. All complaints are dealt with through a Point of Contact Complaint Resolution or if not resolved through a Point of Contact Escalation Process.

The independent designated complaints officer for the service is Ms. Eimear Hickey, on behalf of the HSE, phone 0429334488. Ms. Eimear Hickey along with the Manager of Services for Older People is responsible for the appointment of an independent complaints investigator as per article 39 (5) to ensure that

- a. all complaints are appropriately responded to
- b. the independent person maintains the records specified under article 39 (7)
- c. Records pertaining to complaints are retained for a period of not less than seven years after the complaint has been investigated.

There are guidelines displayed throughout the Centre on the procedure involved in making a complaint, comments or compliments.

A Comments/Compliments Complaints Box is provided in different areas of The Village in order to help residents and their representatives give us any Comments, Compliment and Complaints.

Complaints, comments, issues, concerns are all dealt with as per the complaints process and the Key Senior Manager is responsible for the safe storage and handling of all complaints, concerns and issues in conjunction with the person in charge.

Complaints and complaints data including analysis of complaints are returned to the Regional Office of Consumer Affairs on a monthly basis through the named person to act on behalf of the Registered Provider. Since 2014, all complaints data are also compiled and returned to the Regional Director of Quality Improvement on a QPS Template. This is facilitated by the Registered Provider.



Resident's Care Plan

ARRANGEMENTS MADE FOR DEALING WITH REVIEWS OF THE RESIDENTS PLAN

Individual assessment and care plan

- The registered provider shall, in so far as is reasonably practical, arrange to meet the needs of each resident when these have been assessed in accordance with paragraph (2).
- The person in charge arranges a comprehensive assessment, by an appropriate health care professional of the health personal and social care needs of a resident or a person who intends to be a resident immediately before or on the person's admission to a designated centre.
- The person in charge shall prepare a care plan, based on the assessment referred to in paragraph (2), for a resident no later than 48 hours after that resident's admission to the designated centre concerned.
- The person in charge shall formally review, at intervals not exceeding 4 months, the care plan prepared under paragraph (3) and, where necessary, revise it, after consultation with the resident concerned and where appropriate that resident's family.
- A care plan, or revised care plan, prepared under this Regulation shall be available to the resident concerned and may, with the consent of that resident or where the person in charge considers it appropriate, be made available to his or her family.

On admission to the Centre and at regular 16 week intervals, the nursing staff undertakes a full assessment of the resident's physical, emotional, cognitive, social and spiritual needs as a part of the nursing care planning and evaluation process. This will also include a review of fire safety arrangements. The Care Plan and all assessments are carried out using mostly an electronic care planning system known as EpicCare. All residents and their families are encouraged to participate fully in this care planning process to ensure that the resident's views and wishes are incorporated into care delivered. Each resident or their representatives will be invited on admission to assist in drawing up the plan of care.

All attempts are made to reflect the resident's desired daily routine in the running of the Centre. Residents and relatives will be invited at three monthly intervals to review the care plan to ensure it properly reflects the care required.

PRIVACY AND DIGNITY

SPECIFIC THERAPEUTIC TECHNIQUES

There is a relaxation and quiet room available in the Centre
There is also a quiet room available for all residents.

The occupational therapist and physiotherapist undertake a range of therapeutic interventions. There is equipment provided for individual and group activity. A designated Occupational, Recreational and Activities staff member is employed in order to facilitate and co-ordinate various occupational, recreational and activities for individual residents based on assessed abilities. Relatives may be invited to assist with this in terms of expressing an individual residents past preferences and past times that can assist in planning individual activities.

Privacy and Dignity

We aim to ensure that all our residents are cared for in an environment where privacy, dignity and confidentiality are respected. In accordance with our local Privacy and Dignity Policy all procedures must be fully explained in a quiet manner and implied/verbal consent obtained. All staff members are expected to adhere to this Policy. Some rooms are shared so every effort will be made to ensure that privacy is respected for both residents.

Throughout the period of COVID-19, IT IS IMPORTANT THAT WE CONTINUE TO RESPECT AND UPHOLD YOUR DIGNITY AT ALL TIMES, DESPITE RESTRICTIONS PLACED ON THE CENTRE, AND RESTRICTIONS PLACED ON YOU. WE WILL ALWAYS LISTEN TO YOU AND ACT ON WHAT YOU HAVE TO SAY.

Under normal circumstances relatives and friends are encouraged to visit as often as they wish and sustain relationships that have always been there. A designated room is allocated for all residents and relatives to use as required. Visitors and voluntary organisations will be asked to respect a residents rights to privacy and dignity while in their bedrooms and in sitting rooms. All personal care giving and treatment will be delivered in private and with dignity. Saint Mary's has accommodation for both male and female residents within two separate Units

Because of COVID 19 we may have to change your room allocated to you if there was an outbreak of COVID-19 in Saint Mary's. We will always do this in consultation with you.

Under normal circumstances and as from September 2021, before admission prospective residents will be encouraged to visit the Centre. You may visit as often as needed and have any questions you may have answered. Any decision to take a permanent place at St. Mary's will not rest solely with the prospective resident; however, as the manager has to be certain that their specific needs can be met by the Centre.

We will carry out a thorough assessment of your needs including fire safety, and if necessary discuss them with your representatives.

We will include you in this assessment as much as possible and all aspects of your circumstances will or may be considered in making the final decision.

You will be allocated a room on admission and this will remain your room unless your needs change and a clinical decision warrants that your needs would be better met in different accommodation within the Unit. This will be only done in consultation with you or your representatives.



AS A RESIDENT OF SAINT MARY'S, YOU HAVE THE RIGHT TO:

- Complain about any aspect of the service you receive and be assured that that complaint will be listened to and dealt with accordingly by the appropriate person.
 - To have access to an advocate if you are unable to express yourself.
 - To have your privacy and dignity respected at all times.
 - To have your decisions respected even if we or others don't like your decision
 - Bring any possessions into the centre within space and safety limits.
 - Choose how you wish to spend your day and who with.
 - Have access to your room whenever you wish.
 - Get up and retire at times of your preference.
 - To be facilitated to go outside.
 - Manage your own finances or ask someone of your choice to do so.
 - Have access to written information concerning you which is held in the home.
 - Be assured that all information we hold about you will be kept in the strictest confidence and only shared with other professionals if it is necessary to do so for your health or well being.
 - Be involved in planning your care if you so wish.
 - To have your cultural or religious dietary needs catered for as much as is practicable within the nursing home environment.
 - Eat your meals whenever and wherever you wish, within our normal meal times (or they can be saved and warmed for you)
 - Be able to choose from our menu or request something else if there is nothing to your taste.
-
- Choose what time and day you would like to be bathed or showered.
 - Buy and choose the clothes which you wear.
 - Have access to other services such as physiotherapy, occupational therapy or other supporting services.
 - Attend resident meetings and have your opinion heard and have a say in how the home is managed.
 - Practice your religion without prejudice and have help in meeting your needs from staff (e.g. finding out about local services, booking transport etc).
 - To celebrate festivals related to your culture or
 - Attend appointments, meetings or social events outside the home and expect that the staff will arrange transport as needed (although some costs may be incurred if for social reasons).
 - Entertain visitors in your room or in any of the communal areas of the home whenever you wish (taking other residents needs into consideration if it is in a communal area).
 - To register and vote in elections.
- To ensure there are no or few restrictive practices in place.



FACILITIES

The accommodation has 38 beds. There are some single rooms and some shared rooms. Not all residents will have a single room, but staff on the Centre will allocate rooms on the basis of your assessed need. All rooms are on the ground floor. There are two sitting rooms, one dining room. There are various TV points within the Unit. Telephone services are available and there is a private room available for residents and families should they wish to have a conversation or meeting in private.

All service users' rooms are connected with an emergency call system and can be decorated and furnished to your requirements.

There are two large communal sitting rooms, several smaller rooms and a communal dining room where service users can relax and socialise.

Wii FI is available, various multi-media platforms are available for residents, to enable contact with friends and families throughout the pandemic stages.

Service users are encouraged to bring some of their own furniture, television, radio, pictures and any other items to enhance their room.

They may decorate their room at their own expense. Service users may use a telephone at their own expense or in order to encourage contact with relatives, staff can utilise the Centre phone system in order to place calls for you

A Laundry service for the laundering of your personal clothes. Personal Laundry is collected and returned to the Centre twice weekly.

Smoking is not allowed within any part of the building or Grounds except for a designated area outside for residents who have been exempted from the smoking rule.



REVIEW OF PLACEMENT

When a risk is identified as a result of Dementia/Cognitive impairment, a referral is sent to Psychiatry of Old Age and/or Geriatric Day Hospital, Our Lady of Lourdes Hospital. Following review of the resident, the Care Team may identify an alternative placement where the resident's needs may be better met. This would be done in full consultation with the resident and/or relatives.

CIRCUMSTANCES IN WHICH A RESIDENT MAY BE ASKED TO LEAVE THE CENTRE:

Where the resident fails to comply with Fire and Safety Regulations, and deliberately puts other residents and staff's lives at major risk, it would be necessary to discuss such behaviours and request resolutions. In the absence of any change it would be necessary to terminate the residency, having given the resident every opportunity to reform. Where reasonably practicable, four (4) weeks notice of termination will be given to the resident and/or next of kin/representative.



CONTRACT OF CARE

Contract of Care.

A full contract of care will be drawn up with you within one month of your admission. Fees are charged on a weekly basis by the Health Service Executive Dublin North East, for the provision of twenty-four hour Nursing Care and Accommodation. All fees are paid to the Accounts Department in Saint Mary's Hospital under the Fair Deal Assessment process. An assessment of your finances will be arranged with you prior to you accepting a place in the Centre

The resident's Pension Book may be submitted to the Accounts Office on admission of the resident into Long Term care and upon the HSE being appointed agent to collect the pension, the appropriate weekly charge is deducted. Alternatively, the resident/ next of kin or legal personal representative may retain the pension book and pay the weekly charges as due. This can be arranged by contacting the Accounts Office 041 9893202.

Payments can be made weekly or by arrangement.

An appeals process exists where a resident or their next of kin as appropriate are dissatisfied with the charge raised. The appeals officer may be contacted at HSE Kells, Co Meath, telephone number 046 9280551.

Under Fair Deal, Fees are charged when a resident is admitted to an acute Hospital for treatment. Fees will also continue to be charged when you wish to absent by choice i.e. for weekend leave. The amount you are paying per week will be arranged with you prior to admission and must be an acceptable charge to you.

We will have a contract with you in order to ensure that you are satisfied and in agreement with the conditions of this Unit.



CONTRACT OF CARE

Contract of Care.

Nursing Care – Nursing Care is provided 24 hours per day, 7 days per week and includes the Assessing, planning, implementing and reviewing of patient care and plan of Care. Full nursing review is carried out on all residents every three months or more frequently if health status changes. Care Assistants support the Nursing Team in providing individualised care to all residents. There is no extra charge for Nursing Care

Medical Officer/Doctor – every resident will be seen and their medications charted by our medical officer (Doctor John Mulroy) within 24 hours of admission to the Centre. The resident will be seen by the doctor/medical officer if there is a change/deterioration in his/ her condition. Otherwise the residents are reviewed by the doctor/ medical officer on a three monthly basis. There is no extra charge for this service

Out of Hours: From 5pm each evening until 8am the next morning Monday to Friday, from 5pm on Friday evening until 8am on Monday morning and on Bank Holidays, Medical cover is provided by North East Doctor on Call Service. There is no extra charge for this service

Physiotherapy - . Physiotherapy may be available to all residents in relation to mobility issues, post stroke care and in respiratory conditions. Residents may be referred to the Physiotherapist by the Nursing staff on the Unit, following nursing assessment and if there is a need identified. There is no extra charge for this service.

Occupational Therapy – Occupational Therapy may be available to all residents for seating, pressure care and splinting needs. Residents must be referred to the Occupational Therapist by the Nursing staff on the Ward, following nursing assessment and if there is a need identified. There is no extra charge for this service.



CONTRACT OF CARE

Contract of Care.

Speech and Language Therapy – A Speech and Language Therapist may be available within Services for Older Persons, Louth, to carry out assessments on residents, following an identified need. Referrals are made by nursing staff in consultation with the Medical Officer. There is no charge for this service.

Chiropody – Chiropody services may be available to residents on a sessional basis at no extra charge. First referral to chiropodist is carried out by the nursing staff on the ward, and following assessment and treatment by the chiropodist the resident will be reviewed on a regular basis depending on need.

Catering – All resident's meals are cooked fresh each day in our Main Kitchen. Special diets and requests can be catered for. Kitchen operates seven days per week from 7 30am until 5 30pm.. There is no extra charge for this service

Hairdressing – Hairdressing services may be available to the residents weekly. There is a charge for this service as per patient's private property interim guidelines 2006. Hair dressing services are normally provided at the resident's expense. This service is delivered on a needs basis and all residents are reviewed by the hairdresser on a regular basis. Charges for Hairdressing services are displayed on the Residents notice Board. During this pandemic this service is restricted. Staff working for you may style your hair. There is no charge where members of staff undertake hair styling for you.

Diversional Activities – A variety of activities are available in each ward.. There is no charge for participating in activities,

A supply of Daily and weekly newspapers are available at no extra charge.



CONTRACT OF CARE

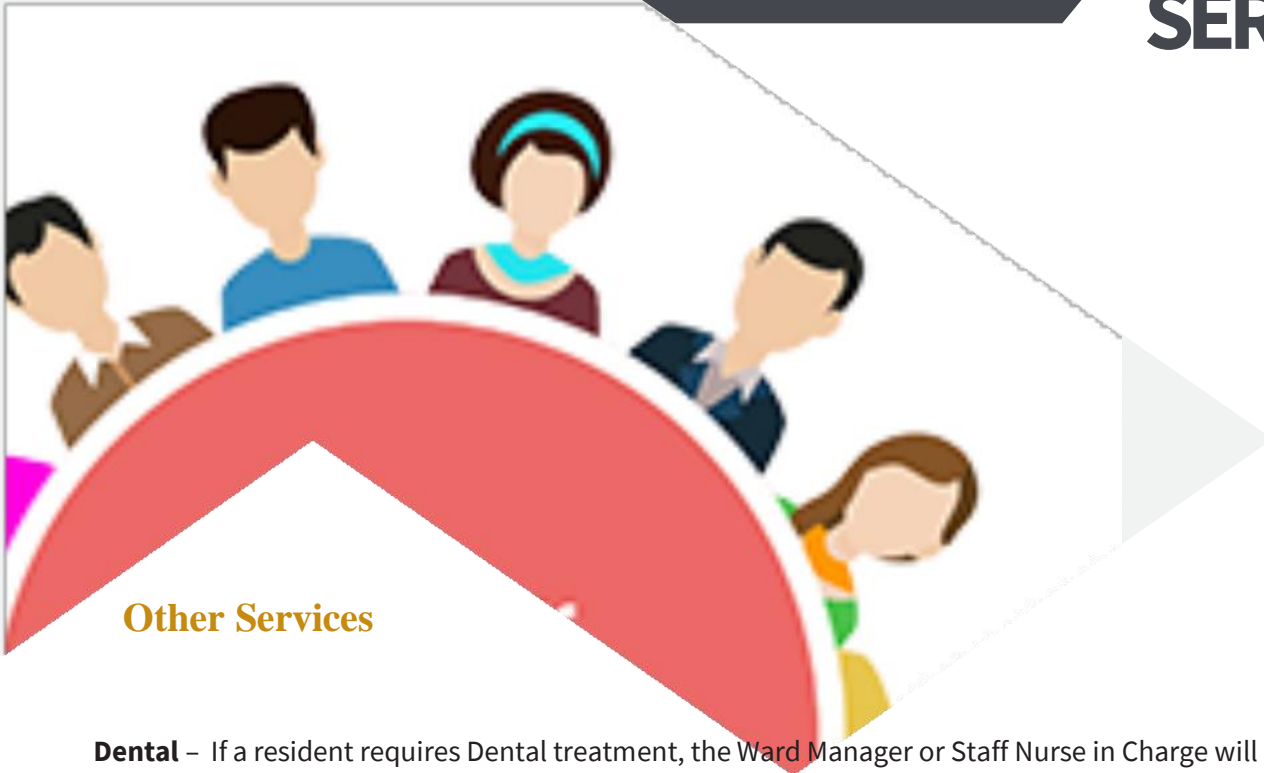
Contract of Care.

Pastoral Care – Pastoral Care is provided by Sister Carmel presently who visits each Centre on a regular basis. Chaplains of all denominations visit and can also be contacted on request. Mass is celebrated on Sundays and Church Holidays when possible. Mass is celebrated on week days. The Eucharist is distributed on Sundays, Holy Days and first Friday of each month.

All denominations can be contacted by staff on the Unit.

Laundry –A private laundry service is available for the laundering of all personal clothes. This service is provided for twice per week. We would ask that all residents clothes are clearly marked. There is no extra charge for this service.

OTHER SERVICES



Other Services

Dental – If a resident requires Dental treatment, the Ward Manager or Staff Nurse in Charge will ring Dental Surgery, within Louth Community Care (042 9332287) and make an appointment for the resident to have dental treatment. This treatment is covered by Medical Card so there is no charge to the resident.

Optical – Ward Manager or Nurse in charge will contact the Optician of choice for the resident, and request an application form. On receipt of this form the Ward Manager or Nurse in Charge completes same and forwards it to Optical Services, Louth Community Care Dublin Road Dundalk.. Confirmation is received back within ten (10) days (approx). An appointment is then arranged with the Optician. There is no charge to the resident.

Hearing – The Medical Officer (Doctor John Mulroy) sends a letter to Hearing Aid Department, Louth Community Care requesting an appointment for the resident. An appointment will be received back to attend Dundalk). Medical Card covers this appointment so there is no charge to the resident.

Dietician – Access to Dietician is on a referral basis.. There is no charge to the resident for this service.

Pharmacy. Residents are welcome to retain their pharmacist of choice. The Pharmacy Service that provides services to the Centre currently is;

Address: 15-17 New Street, Windmill Lane, Skerries, Co. Dublin
Hours: 9a.m.–6:30p.m. Monday to Saturday
Phone: (01) 8492519

OTHER SERVICES



Other Services

TRANSPORT:

The Health Service Executive may provide transport for residents to attend Medical appointments but, not for private, social or family outings.

Continence Products

There is no extra charge for continence products.

Note:

Residents in Saint Mary's who are eligible for specific services and those residents who hold a medical card will be supported to avail of relevant allied health care services free of charge.

National Screening Programmes

The criteria for inclusion on all screening programmes are dependent on age limits (no age limit for the Diabetic RetinalScreen) and any resident who falls into the correct age bracket should be automatically entered on the screening programme via their PPS numbers. As letters are sent out from the National Screening Programme notifying people of appointment slots we will make sure to contact info@screeningservices.ie with the resident's change of address and GP when admitted or when they fall within the correct age bracket and, therefore, meet the criteria. The age limits are as follows:

- Cervical Screening: Females aged 25-60.
- Bowel Screening: Males and females aged 60 to 69
- Breast Check: females from 50 to 69
- Diabetic Retinal Screening: Males and females aged 12 and upwards.

For residents who have difficulties understanding or communicating that choice, what arrangements do you have in place to ensure those residents have access to appropriate representation to either assist them or to identify their will and preference in relation to the screening programmes?

Residents, and when appropriate, their family member are included in all aspects of their care planning. Their eligibility to be included on the appropriate screening programmes will be dis-

cussed with them and their decision to either be included or not will be supported. Assurances from the National Screening Programme will be sought to ensure that they have the correct information including their address.



The Most Recent Inspection Report.

The Most recent inspection report is available within the admission pack

**Chief Inspector of
Social Services**

&

**Office of the
Ombudsman**

**Office Of the Chief
Inspector,**

Chief Inspector of Social
Services Inspectorate,
Head Office: Unit 1301,
City Gate, Mahon, Co.Cork
T: 00 353 21 240 9300
Fax: 00 353 21 240 9600 Email:
info@hiqa.ie.

Office of the Ombudsman

6 Earlsfort Terrace, Saint Kevin's,
Dublin 2, D02 W773

Hours:

Open 09.00 AM- Closes 5 p.m.

Phone: (01) 639 5600 Address:

Twitter: @OfficeOmbudsman

Email: ombudsman@ombudsman.ie

Office of the Ombudsman.COVID-19 NOTICE:

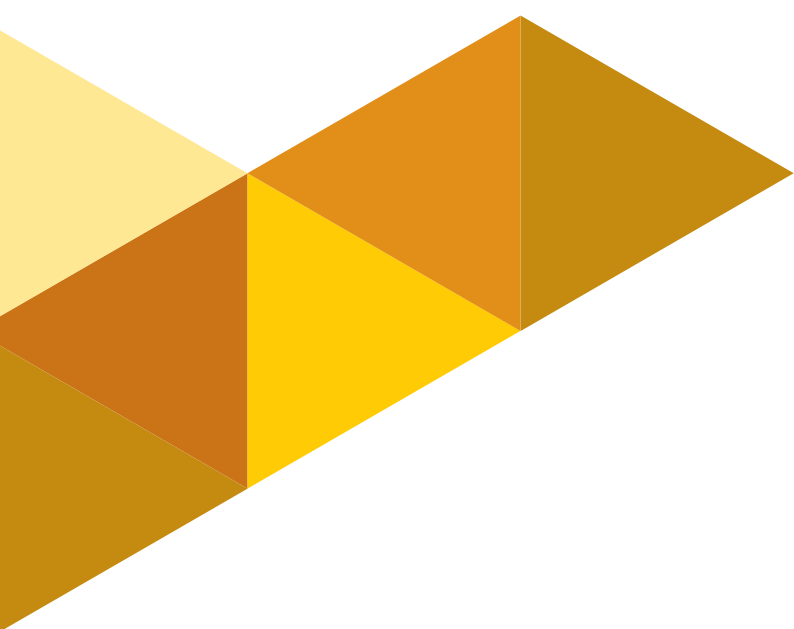
All services are available. You can make a complaint through our website or call us if you have a query at 01 639 5600.

At present we cannot take personal callers to our office.



DISCLAIMER

This information guide has been prepared to assist new and prospective residents, and their family and friends, to make a care decision. Every effort has been made to ensure the accuracy of the information at time of print. The information contained is not legally binding and St.Mary's Hospital, Drogheda reserve the right to make changes to this guide as circumstances require.



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