The role of HI QA in Quality Improvement in Long-Term Care

Bríd McGoldrick
Inspector Manager HI QA
Overview

- Regulations and Standards
- Annual Overview Report 2015
- Governance
- Communication
The regulatory approach taken by HI QA

Aims and Objectives

- **Safeguard patients - Care and Welfare Regulations**
- Provide an independent objective assessment of performance
- Identify areas of good practice
- Identify areas of poor practice
- Share learning across the system
- Enforcement powers
The Law
Primary Legislation

Regulations

Standards

Criteria & Features

- Regulations are the law - Standards set out a vision for quality.
- Standards, legislation and regulations are intended to work together to assure quality in services.
- Health Act 2007 (as amended)
- National Standards for Residential Care Settings for Older People in Ireland 2016
Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013

- **Regulation 27** - Infection Control: The registered provider shall ensure that procedures, consistent with the standards for the prevention and control of healthcare associated infections published by the Authority are implemented by staff.

- **Regulation 31** - Notification of Incidents
  
  **Schedule 4, 7(1):** The Chief Inspector shall be notified of the occurrence of any of the following events within 3 days of such occurrence and a record shall be kept: (e) an outbreak of any notifiable disease.

- **Regulation 4** - Written Policies and Procedures
  
  **Schedule 5, 14:** Health and safety of residents, staff and visitors (including infection control and food safety)

- **Regulation 17 (2)** - Premises
  
  **Schedule 6:** All listed requirements apply
Standard 3.3

Infection prevention and control practices achieve the best outcomes for residents.

Features of a service meeting this standard may include:

3.3.1 Responsibility for infection prevention and control is clearly defined with clear lines of accountability throughout the residential service. Policies and procedures reflect national standards for the prevention and control of Healthcare Associated Infections and relevant national guidelines.

3.3.2 All staff receive education and training in infection prevention and control that is commensurate with their work activities and responsibilities and is regularly updated.

3.3.3 An identified staff member has responsibility for monitoring compliance with national standards for infection prevention and control procedures such as hand hygiene, the use of protective clothing, the safe disposal of sharps, management of laundry and waste management.

3.3.4 There are clear arrangements in place for staff on making referrals to infection control nurses and public health professionals, who have expertise in infection prevention and control, for advice and support.

3.3.5 Accessible information is available on infection prevention and control for residents, visitors and staff, including availability of appropriate vaccinations for residents and staff.

3.3.6 Hand hygiene is a priority for the residential service and high standards of hand hygiene are promoted among residents, staff and visitors. There are wash-hand basins, supplies of liquid soap, alcohol hand gels, disposable towels and personal protective equipment wherever care is delivered.

3.3.7 The residential service has a contingency plan in place for dealing with an outbreak, such as an influenza, which takes into account national guidelines.

3.3.8 Outbreaks of infection are managed in accordance with evidence-based practice and are reported in line with national guidelines, and to the Health Information and Quality Authority and local public health authorities.

3.3.9 There is a policy on the provision, management, maintenance, cleaning and decontamination, and repair of medical devices and equipment. An identified person has responsibility for medical devices and equipment management, including staff training and safety assurance.
National Standards for the Prevention and Control of Healthcare Associated Infections 2009

Standard 1: Governance & Management
Standard 2: Structures, systems and processes
Standard 3: Environment and Facilities Management
Standard 4: Human Resource Management
Standard 5: Communication Management
Standard 6: Hand hygiene
Standard 7: Communicable/transmissible Disease Control
Standard 8: Invasive medical device related infections
Standard 9: Microbiological services
Standard 10: Outbreak Management
Standard 11: Antimicrobial Surveillance Programme
Standard 12: Antimicrobial Stewardship
National Standards for the Prevention and Control of Healthcare Associated Infections

<table>
<thead>
<tr>
<th>Standard 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hand hygiene practices that prevent, control and reduce the risk of the spread of Healthcare Associated Infections are in place</td>
</tr>
</tbody>
</table>

Hand hygiene policies, procedures and systems are in place

- Monitoring and audit of hygiene practices
- Service users and relatives are informed
Governance and Management

23. The registered provider shall ensure that:

a) the designated centre has sufficient resources to ensure the effective delivery of care in accordance with the statement of purpose;

b) there is a clearly defined management structure that identifies the lines of authority and accountability, specifies roles, and details responsibilities for all areas of care provision;

c) management systems are in place to ensure that the service provided is safe, appropriate, consistent and effectively monitored;

d) there is an annual review of the quality and safety of care delivered to residents in the designated centre to ensure that such care is in accordance with relevant standards set by the Authority under section 8 of the Act and approved by the Minister under section 10 of the Act;

e) the review referred to in subparagraph (d) is prepared in consultation with residents and their families; and

f) that a copy of the review referred to in subparagraph (d) is made available to residents and, if requested, to the Chief Inspector.
Good governance and management - the evidence

- There is a **fit** provider and persons participating in the management of the centre including person in charge (PIC)
- Residents involved in the operation and management of the centre
- Ongoing monitoring by provider and PIC
- Regular audits
- Robust training for staff
Fit Person - Health Act 2007

- Good character
- The person is competent and capable to hold the role they perform
- The person is honest and transparent
- Proper management structures and appropriate delegation
- Robust governance
- Resources
Role of registered provider and person in charge/staff

- What residents experience on a day to day basis in the designated centre
- How does the person in charge ensure that best practice occurs as a matter of routine within the designated centre?
- How is the registered provider (as the registered entity) assured of the quality and safety of care and compliance within the designated centre?
Regulations, Standards and Features

Regulation 17

• (1) The registered provider shall ensure that the premises of a designated centre are appropriate to the number and needs of the residents of that centre and in accordance with the statement of purpose prepared under Regulation 3.

• (2) The registered provider shall, having regard to the needs of the residents of a particular designated centre, provide premises which conform to the matters set out in Schedule 6.

Standard 2.7

• The design and layout of the residential service is suitable for its stated purpose. All areas in the premises meet the privacy, dignity and wellbeing of each resident.*

27 Features of Standard 2.7

• These are supporting statements that set out what the service may consider in order to meet the standard. They are indicative, rather than prescriptive.
Standard 5.4

The quality of care and experience of residents are monitored, reviewed and improved on an ongoing basis.

Standard 6.1

The use of resources is planned and managed to provide person-centred, effective and safe services and supports to residents.
Annual Overview Report 2015

- Overview of centres
- Regulatory monitoring activity
- Notifications and Concerns
- Key findings
- Governance
Findings from 2015 Annual Report

- There were 577 active centres providing 30,106 registered beds in the sector.

- Increase in the numbers of centres, from 565 centres with 29,060 beds in 2014 to 577 centres and 30,106 beds in 2015.

- Reflective of ageing demographics.
Findings of good practice and compliance

- Healthcare
- Food and Nutrition
- End-of-Life Care
- Statement of Purpose, Residents’ Guide
- Notifications
Findings of non-compliance

- Governance and Management
- Premises
- Risk Management
- Fire Precautions
- Staff levels and training
- Individualised assessment and personal plan
- Medicines and Pharmaceutical Services
- Residents’ rights
Unsolicited Information/ Concerns

- In 2015, HIQA received 516 items of unsolicited information relating to 272 centres.

- This was a reduction from 2014 where 609 items of information were received regarding 303 centres.
Thematic Inspections 2015

- In 2015, we commenced a three-year programme focused on dementia care. Methodology was informed by an expert advisory group and a review of best practice.
- HIQA produced and published guidance documents identifying the essential elements required to provide safe, high-quality care to people with dementia.

https://www.hiqa.ie/resource-centre/care-providers/inspection
## Inspection Activity 2015:

<table>
<thead>
<tr>
<th>No of Centres</th>
<th>Total Inspections in 2015</th>
<th>Type of Inspection</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Inspection</td>
<td>287</td>
<td>Registration Inspection</td>
<td>170</td>
</tr>
<tr>
<td>2 Inspections</td>
<td>45</td>
<td>Monitoring Inspection</td>
<td>94</td>
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<tr>
<td>3+ Inspections</td>
<td>11</td>
<td>Single Issue Inspection, thematic</td>
<td>73</td>
</tr>
<tr>
<td>Total</td>
<td>343</td>
<td>Total</td>
<td>411</td>
</tr>
<tr>
<td>Type</td>
<td>Content</td>
<td>Quantity</td>
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<tr>
<td>NF01</td>
<td>Unexpected death</td>
<td>910</td>
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<tr>
<td>NF02</td>
<td>Outbreak of infectious disease</td>
<td>239</td>
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</tr>
<tr>
<td>NF03</td>
<td>Injury requiring immediate medical or hospital treatment</td>
<td>4155</td>
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</tr>
<tr>
<td>NF05</td>
<td>Missing Person</td>
<td>177</td>
<td></td>
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<tr>
<td>NF06</td>
<td>Allegation of abuse</td>
<td>424</td>
<td></td>
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<tr>
<td>NF07</td>
<td>Allegation of staff misconduct</td>
<td>69</td>
<td></td>
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<tr>
<td>NF09</td>
<td>Fire, loss of power or heating</td>
<td>133</td>
<td></td>
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<tr>
<td>NF20</td>
<td>Absence of a PIC for more than 28 days</td>
<td>77</td>
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<tr>
<td>NF21</td>
<td>Return of a PIC after a 28+ day absence</td>
<td>31</td>
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<tr>
<td>Other</td>
<td>Quarterly notifications</td>
<td>4386</td>
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</tr>
<tr>
<td>Total</td>
<td></td>
<td>10,572</td>
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</tbody>
</table>
Notifiable Disease NF02

- Norovirus, 84, 36%
- Influenza, 64, 27%
- Not an outbreak CDiff, 27, 12%
- Not an outbreak, 5, 2%
- Influenza, 64, 27%
- Norovirus, 84, 36%
- Respiratory type illness, 9, 4%
- Scabies, 4, 2%
- Rhinovirus (not notifiable), 1, 0%
- VTEC infection, 1, 0%
- Shigella, 6, 3%
- Shingles, 1, 0%
- Streptococcus pneumonia, 1, 0%
- VTEC infection, 1, 0%
- Acute infectious gastroenteritis, 1, 0%
- Campylobacteriosis, 1, 0%
- Cause not recorded, 1, 0%
- Carbapenemase Producing Enterobacteriacea (CPE), 1, 0%
- CDiff, 8, 3%
- Diarrhoea, 7, 3%
- Gastroenteritis, 3, 1%
- Influenza, 64, 27%
- Mumps, 1, 0%
- Klebsiella Pneumonia Carbapenemase, 1, 0%
- Legionella, 3, 1%
- MRSA, 2, 1%
- Norovirus - suspected not confirmed, 1, 0%
- Not an outbreak CDiff, 27, 12%
Recent Communication

- Guidance on Dementia Care for Designated Centres for Older People, February 2015
- Statutory Notifications – Guidance for registered providers and persons in charge of designated centres, June 2015
- Medicines Management Guidance, October 2015
- Fire Precautions in Designated Centres, Guidance for Registered Providers and Persons in Charge of Designated Centres for Older People, November 2015
Communication

- Risk Management of Percutaneous Endoscopic Gastroscopy (PEG) Feeding
- Submissions Policy and Procedures
- Publication Policy and Procedures

Health Information and Quality Authority. *Safety alert 003/2012: Outbreaks of influenza in designated centres.* 2012.

Health Information and Quality Authority. *Safety alert: Risk management of blood glucose monitoring in designated centres.* 2016

HIQA Concerns Line: (021) 240 9646

HIQA Registrations: (021) 240 9340

HIQA Regulatory Support Team: (01) 8147635
Thank You