REVIEW OF MINIMUM STANDARDS FOR NURSING HOMES

CONSULTATION RESPONSE QUESTIONNAIRE

July 2014
CONSULTATION RESPONSE QUESTIONNAIRE

Introduction

You can respond to the consultation on the review of Minimum Standards for Nursing Homes by e-mail or letter.

Before you submit your response, please read Appendix 1 about the effect of the Freedom of Information Act 2000 on the confidentiality of responses to public consultation exercises.

Responses should be sent to:

E-mail: sgqu@dhsspsni.gov.uk

Written: Standards and Guidelines Quality Unit
          DHSSPS
          Room D1
          Castle Buildings
          Stormont Estate
          Belfast, BT4 3SQ

Telephone: (028) 90522351

Responses must be received no later than 5pm on Thursday 23rd October 2014

I am responding: as an individual

on behalf of an organisation ✓

(please tick a box)

Name: Dr Diana Day Cody
Job Title: Consultant Psychiatrist and Chair
Organisation: Royal College of Psychiatrists in NI
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Belfast, BT15 1ES
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e-mail: tmckeever@rcpsych.ac.uk
**Background**

The Department has reviewed the 2008 Minimum Standards for Nursing Homes.

The final version of the standards will be used by the Regulation and Quality Improvement Authority (RQIA) in registering and inspecting providers of these services.

Minimum care standards are a key element in the Department’s drive to improve the quality of health and social care. Standards aim to promote a collaborative, multi-disciplinary approach to providing family-centred care through specification of the facilities, processes and training and qualifications necessary for the delivery of a quality service.

As well as providing service users with information on the quality of service they can expect to receive, the standards will set a benchmark against which service providers can measure their provision. RQIA will use the final version of the standards to assess and report on the quality of services delivered by registered providers.

**Purpose**

This questionnaire has been designed to aid those who wish to respond to the consultation exercise on the Review of Minimum Standards for Nursing Homes.

The questionnaire seeks your views on the draft standards and should be read in conjunction with the standards document itself.

The questionnaire also seeks views on the equality implications of the draft standards. A preliminary equality screening exercise has been carried out and copies are available on request.

**Completing the questionnaire**

The questionnaire can be completed by anyone who has an interest in the provision of these services and can be completed by an individual or on behalf of a group or organisation.
Q1. Are the standards easy to understand?

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If your answer is no, please identify the difficulties.

Yes

Q2. Do the standards cover areas that are priorities for residents of nursing homes? If your answer is no, please identify any areas you feel are missing.

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Comment:

Yes
**Q3. Is it reasonable to expect providers of services to meet these standards now?**

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Please outline any criteria which you think cannot be met and explain the difficulties.

Yes

**Q4. Will any of the standards have significant costs associated with compliance?**

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Please comment on which standards you feel will have cost implications.

No
Q5. Do you think the new standards are reasonable? These standards are:

- Daily Life;
- Individual and Human Rights;
- Use of Restraint and/or Restrictive Practice;
- Responding to Residents’ Behaviour;
- Dementia (3 Standards); and
- Intermediate Care

Please outline the reasons for your answer.

The new standards are reasonable. They comply with Human Rights and are predicated on the principle of Autonomy. It is essential that staff have ongoing training in Dementia awareness including the complex array of features that are associated with it. Significant numbers of residents in Nursing Care have features of dementia, which is not currently appreciated or accounted for. This number will increase with demographic changes. The nature of the variety of ways in which residents can present with biological and psychological features of dementia is not well understood. The importance of the environment and the approach taken is cardinal and this is often not recognised.

Understanding the person’s life story is key and often simple solutions to behaviour change are evident if time is taken to know the person, in conjunction with their family.

Given the demographics and the need to consider the Nursing Home as ‘home’, all possible steps should be taken to work out a potential source of stress/behaviour change, before considering an A+E referral. Thus, staff should be well-trained to manage persons with dementia.

Standard referring to Daily Life is most important. Too many residents are left unstimulated, and independence quickly deteriorates. The principles in this section need to be strongly supported.
Q6. Do you think qualifications levels for care assistants should be set out in these standards? What level should the qualification be set at?  

Yes [✓]  No [ ]
Please outline the reasons for your answer.

Qualification levels should be set out in the standards as this is one way of aiming to raise the understanding and achieving of the standard.

### Equality implications

| Q7. Are the actions/proposals set out in this consultation document likely to have an adverse impact on any of the nine equality groups identified under Section 75 of the Northern Ireland Act 1998? |
|----------------------------------|----------------|
| Yes                              | No ✔        |

If yes, please state the group or groups and provide comment on how these adverse impacts could be reduced or alleviated in the proposals.

No, in fact they should have a positive impact.

| Q8. Are you aware of any indication or evidence – qualitative or quantitative – that the draft standards may have an adverse impact on equality of opportunity or on good relations? |
|----------------------------------|----------------|
| Yes                              | No ✔        |
If yes, please give details and comment on what you think should be added or removed to alleviate the adverse impact?

No

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<th>Q9. Is there an opportunity to better promote equality of opportunity or good relations?</th>
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If yes, please give details as to how.

- Involve local schools in visitations/Christmas carols /Concerts.
- Volunteering schemes.
- Advocacy services.
- Enabling day-care options for those able.
- Facilitate activity therapists- this massively fluctuates between facilities.
- Regular trips out of the facility- everyone is entitled to a change of scene.
Q10. Are there any aspects of the draft standards where potential human rights violations may occur?

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The draft standards are well received. It is important, however, that these are seen as minimum, and that nothing less can/should be tolerated.

Nursing Homes should not smell of urine. Continence should be maintained, but if help is required, all efforts should be made to manage this appropriately. Staffing numbers are crucial; staff knowledge, skills and attributes even more so. Sufficient resource needs to be put into the education of the staff - much more so than the ‘look’ of a building.

The Royal College of Psychiatrists in Northern Ireland welcomes the opportunity to respond to the consultation on the review of minimum standards for nursing homes.

The Royal College of Psychiatrists is the statutory body responsible for the supervision of the training and accreditation of psychiatrists in the UK and for providing guidelines and advice regarding the treatment, care and prevention of mental and behavioural disorders. Among its principal aims are to improve the outcomes for those with mental illness and to improve the mental health of individuals, families and communities.

The College has 370 members in Northern Ireland, including doctors in training. These doctors provide the backbone of the local psychiatric service, offering inpatient, day patient and outpatient treatment, as well as specialist care and consultation across a large range of settings.

This is submitted on behalf of the Royal College of Psychiatrists in Northern Ireland Executive Committee.
Please return your response questionnaire.

Responses must be received no later than 5pm on Thursday 23rd October 2014

Thank you for your comments.
Appendix 1

FREEDOM OF INFORMATION ACT 2000 – CONFIDENTIALITY OF CONSULTATIONS

The Department will publish a summary of responses following completion of the consultation process. Your response, and all other responses to the consultation, may be disclosed on request. The Department can only refuse to disclose information in exceptional circumstances. Before you submit your response, please read the paragraphs below on the confidentiality of consultations and they will give you guidance on the legal position about any information given by you in response to this consultation.

The Freedom of Information Act gives the public a right of access to any information held by a public authority, namely, the Department in this case. This right of access to information includes information provided in response to a consultation. The Department cannot automatically consider as confidential information supplied to it in response to a consultation. However, it does have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity should be made public or be treated as confidential.

This means that information provided by you in response to the consultation is unlikely to be treated as confidential, except in very particular circumstances. The Lord Chancellor’s Code of Practice on the Freedom of Information Act provides that:

- The Department should only accept information from third parties in confidence if it is necessary to obtain that information in connection with the exercise of any of the Department’s functions and it would not otherwise be provided;

- the Department should not agree to hold information received from third parties “in confidence” which is not confidential in nature;

- acceptance by the Department of confidentiality provisions must be for good reasons, capable of being justified to the Information Commissioner.

For further information about confidentiality of responses please contact the Information Commissioner’s Office (or see web site at: [http://www.info...](http://www.informationcommissioner.gov.uk/)).
Appendix 2

EQUALITY IMPLICATIONS

Section 75 of the Northern Ireland Act 1998 requires the Department to “have due regard” to the need to promote equality of opportunity between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation; between men and women generally; between persons with a disability and persons without; and between persons with dependants and persons without. The Department is also required to “have regard” to the desirability of promoting good relations between persons of a different religious belief, political opinion or racial group.

In keeping with the above statutory obligations and in accordance with guidance produced by the Equality Commission for Northern Ireland, the Department has carried out a preliminary equality screening exercise to determine if the draft standards are likely to have a significant impact on equality of opportunity and should therefore be subjected to an Equality Impact Assessment (EQIA). The Department has concluded that an EQIA is not appropriate for a number of reasons including:

- The preliminary screening and engagement/consultation with key stakeholders to date has showed no evidence of any adverse impact on the different groups;
- The draft standards are intended to set a transparent and consistent regional benchmark for the quality of these services, which will benefit all those who use and provide these services.

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www.dhsspsni.gov.uk

April 2013