Date Of Receipt	Concern Detail
January	
January	CP concerned about staffing levels in centre and negative impact on residents.
January	CP concerned about the quality of care particularly nutrition and hydration of residents and complaints management.
January	CP concerned about the quality of care including hydration of residents, and poor information and complaints management.
January	CP concerned about the quality of care including medical needs not being met in a timely manner, poor communication, poor governance and management and end of life care.
January	CP unhappy that they are not being facilitated to have window visits and the negative impact of this on residents.
January	CP has concerns regarding infection prevention and control measures in this centre and staffing levels during a COVID- 19 outbreak.
January	CP concerned about social isolation of residents and falls management.
January	CP concerned about the quality of care and welfare of residents including safeguarding, call bells being unanswered, staff attitudes and poor governance and management.
January	CP concerned about the quality of care including poor communication with families, medical attention, COVID-19 testing, information management and governance and management.
January	CP has concerns about communication with NH during Covid 19 pandemic.
January	
January	CP has concerns about poor communication with nursing home
January	CP concerned about the quality of care including infection prevention and control measures, staffing levels, poor environmental hygiene and governance and management.
January	CP has concerns about the care and welfare of resident in relation to nutrition, access to allied health professionals and poor management of wound care.
January	CP concerned about the quality of care including meeting the needs of residents, supervision and support of residents, and infection prevention and control measures.
January	CP concerned about the quality of care including a fall and poor communication

January	CP concerned about the quality of care in relation to the nutrition and poor quality of food.
January	CP concerned about the quality of care including infection prevention and control measures, and poor staffing levels.
January	CP concerned about the quality of care in relation to safeguarding of residents and poor communication.
January	CP has concerns about the quality of care in relation to delays in accessing medical care, poor communication, lack of professionalism and poor governance and management.
January	
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January	CP has concerns regarding quality of care including specialised equipment being provided to resident, access to allied health professionals and poor personal care.
January	
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January	CP has concerns that the date to vaccinate residents has been cancelled with no new date scheduled.
January	CP concerned about the impact that the no visiting restrictions is having on residents including social isolation and a lack of mental stimulation.
January	
January	CP concerned about the governance and management of service, communication with residents, contract of care and complaints management.
January	
January	CP concerned about the quality of care including safeguarding of residents, infection prevention and control, professional practice of staff, and medication management.
January	CP concerned about the quality of care including safeguarding of residents, staffing levels, personal care of residents and infection prevention and control measures.
January	CP has concerns regarding the delay in the last HIQA inspection report being published and delays in residents receiving the COVID-19 vaccination.
January	CP concerned about the quality of care including poor infection prevention and control measures, poor end of life planning, poor medical oversight and poor governance and management.
January	CP concerned about the quality of care including staffing levels, infection prevention and control measures, medication management, skin integrity, and governance and management.

January	
January	CP concerned about the quality of care in relation to COVID-19 testing, infection prevention and control measures and poor communication.
January	CP has concerns regarding visitation guidelines that are impacting on residents interaction with their families.
January	CP concerned about the quality of care including infection prevention and control measures and proposed new admissions to centre and impact on current residents who have been asked to relocate rooms.
January	CP concerned about the quality of care in relation to poor personal hygiene, food and nutrition and infection prevention and control measures.
January	
January	CP concerned about the quality of care in relation to health and safety and the use of PPE worn by management.
January	CP concerned about the quality of care including safeguarding of residents and falls management.
January	CP has concerns about the quality of care and welfare of resident in relation to hydration, access to allied health professionals, staff not attending to resident's needs and staff being rough when caring for residents.
January	
January	CP concerned about the quality of care including the professional behaviour of senior managers, medication management, lack of consistency of staffing and complaints management.
January	CP concerned about quality of care during COVID-19 outbreak including staffing levels, communication and expedition of vaccine for residents.
January	CP concerned about the quality of care including poor communication in relation to end of life care with families, nutrition and hydration and staffing levels.
January	
January	CP concerned about professional behaviour of a staff member on social media.
January	CP concerned about the quality of care including communication, staffing levels and personal care.
January	CP concerned that accommodation does not meet their needs. CP also wishes to visit their family at home.
January	CP concerned about the quality of care in relation to falls management, poor rehabilitation and social isolation and the impact this is having on residents well being.
January	CP concerned about the quality of care in relation to infection prevention and control measures, routine duty of care, health and safety and poor governance and management.
January	
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January	CP concerned about lack of communication from centre to family members during COVID-19 outbreak.
January	CP concerned about staffing levels and the negative impact on meeting the needs of the residents during COVID-19 outbreak.
January	
January	CP concerned about the difficulty in contacting the centre and residents being at the centre of decision-making.
January	CP concerned about the quality of care in relation to medical attention, dignity and respect, poor communication and data records alterations.
January	CP concerned about the quality of care in relation to safeguarding, care and welfare, dignity and respect and staff tones and attitudes.
January	CP concerned about the quality of care in relation to risk, falls management, poor communication and governance and management.
January	
January	CP concerned about the quality of care in relation to falls management, poor rehabilitation and social isolation and the impact this is having on residents well being.
January	
January	CP has concerns about lack of communication around proposed discharge of resident.
January	CP concerned about the delay in COVID-19 staff testing and infection prevention and control measures.
January	CP concerned about quality of care being maintained in nursing home due to the high levels of staff testing COVID-19 positive.
January	
January	CP concerned about the lack of communication from NH regarding COVID-19 vaccination and additional service charges in centre when no activities are being provided.
January	CP concerned about infection prevention and control measures during COVID-19 outbreak, information regarding the vaccine, and effective communication with families.
January	CP concerned about the quality of care including infection prevention and control measures, staffing levels, monitoring and oversight of residents, the physical premises and complaints management.
January	Anonymous concern about sewerage and water leakages from this centre and poor communication around this.
January	CP concerned about the ban on window visits to the centre impacting on residents interaction with their families.
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January	CP concerned about the breach of COVID-19 visitation policies in this centre.
January	CP concerned about the quality of care in relation to safeguarding and supporting residents with physical mobility.
January	CP concerned about the quality of care including falls management, monitoring and oversight of residents, physical premises, and governance and management.
January	
January	CP concerned about the quality of care in relation to poor social interaction, personal hygiene, complaints management and allegations of abuse.
January	CP concerned about the quality of care in relation to falls management, poor communication with families and dehydration.
January	CP has concerns in relation to poor communication with provider.
January	
January	
January	CP has concerns in relation to staffing levels, infection prevention and control measures and availability of appropriate equipment.
February	CP concerned about the lack of appropriate infection prevention and control measures, staffing levels, staff knowledge of residents needs and governance and management of service.
February	CP concerned about the management of gifts for residents and communication with centre staff.
February	CP concerned about the quality of care including that residents' lack access to social activities and telephones, a lack of communication with families, insufficient staffing, poor staff supervision, and poor governance.
February	CP concerned about the quality of care in relation to access to medical attention, personal hygiene, poor communication with families, social interaction and poor governance and management.
February	CP concerned about the quality of care in relation to delays in medical attention and the effect this has on residents and poor communication with families.
February	
February	CP concerned about the management of complaints.

February	CP concerned about the quality of care in relation to staff professionalism and practices.
February	
February	CP is concerned about waste management facilities in the designated centre.
February	CP concerned about quality of care in relation to poor governance and management, infection prevention and control measures, staffing levels, communication with families and staff not assisting residents at mealtimes.
February	CP is concerned about infection prevention and control measures in place at end of life.
February	
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February	CP concerned that they are not being facilitated to contact their relative by video call and or window visit.
February	CP concerned about proposed changes to visiting arrangements.
February	CP concerned about the number of deaths in the centre, infection prevention and control measures and poor management of vaccines.
February	
February	CP concerned about the quality of care in the nursing home including heating, staff levels and communication, the management of personal possessions and fees.
February	CP concerned about the quality of care including falls management, accessing timely medical care, communication, governance and complaints management.
February	CP concerned about infection prevention and control practices, including decontamination of equipment, and wound management.
February	CP has concerns about the quality of care including safeguarding and staffing levels.
February	
February	CP concerned about the quality of care including poor communication, infection prevention and control, staffing levels and end of life care.
	CP concerned about the quality of care in relation to staffing levels, call bells being left unanswered and lack of social
February	interaction for residents.

February	CP concerned about staff accessing the COVID-19 vaccine while out on sick/maternity leave.
February	Anonymous concerns about the quality of care including lack of dignity and respect, end of life care, communication, infection prevention and control measures and governance and management.
February	CP concerned about the quality of care in relation to skin integrity, wound management, personal care and nutrition an hydration.
February	CP concerned about infection prevention and control measures and poor governance and management.
February	CP concerned about the restrictions on window visits and the effect this has on residents.
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February	CP has concerns about renovations being carried out during COVID-19 Level 5 restrictions
February	
February	CP concerned about the quality of care particularly the response to their relatives deteriorating condition and poor communication with families.
February	
February	CP concerned about the quality of care including when residents can see their families, safeguarding and meeting residents needs.
February	CP concerned about the quality of care including personal care, wound management, and complaints management.
February	CP concerned about the governance of the service, employee relations and negative impact on residents.
February	CP concerned about the quality of care including the professional behaviour of some staff, communication, infection prevention and control measures and implementation of the visiting guidance.
February	CP concerned about the governance of the service, employee relations and negative impact on residents.
February	CP concerned about the quality of care in relation to window visits, personal care and poor communication.
February	CP has concerns in relation to safeguarding of residents.
February	
February	CP concerned about the quality of care in relation to poor communication with families and management of personal possessions.

February	CP concerned about the quality of care in relation to poor communication with families and management of personal possessions.
February	CP concerned about the quality of care in relation to poor communication with families and management of personal possessions.
February	Concerns in relation to poor management, quality of care, employee relations and staff turnover.
February	Concerns in relation to poor management, staffing levels and poor communication.
February	Concerns in relation to poor place to work, poor communication and staff turnover.
February	Concerns in relation to poor management.
February	CP concerned about the quality of care in relation to staff turnover, residents having purposeful and meaningful days, poor governance and management and lack of ventilation.
February	CP concerned about the quality of care including meeting needs of residents, communication, window visits, management of residents belongings, professional practice of manager and governance and management.
February	CP raised a concern about the national COVID-19 vaccination programmes' age groups and impact on residents in nursing home.
February	CP concerned about the quality of care including meeting residents needs, staffing levels, professional practice of staff and complaints management.
February	CP concerned about the quality of care in relation to recognition of deteriorating condition, medical attention and poor communication with families.
February	CP concerned about the quality of care including staffing levels, meeting residents needs, skin integrity and governance and management.
February	CP concerned about relocation of residents rooms during COVID-19 outbreak and the impact this is having on residents and poor communication.
February	CP concerned about the quality of care in relation to COVID-19 visiting restrictions and the impact this is having on residents.
February	CP has concerns about poor communication in relation to billing.
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February	CP concerned about the infection prevention and control measures in place during an outbreak and governance and management.
February	CP concerned about the safeguarding and monitoring and oversight of residents, complaints management and governance of service.
February	
February	
February	CP has concerns about the care and welfare of residents including infection prevention and control measures, personal possessions, poor communication and billing.
February	
February	CP concerned that residents contracted COVID-19 in the nursing home and the mortality rates.
February	CP concerned that residents wishes will not be upheld in relation to COVID-19 testing and inoculation.
February	CP concerned about the lack of an effective communication system to make contact with residents during lockdown.
February	CP concerned about quality of care including falls, personal hygiene and mortality rates due to COVID-19
February	CP concerned about the quality of care in relation to infection prevention and control measures, poor communication with families and staff providing assistance.
February	
February	CP concerned about the quality of care in relation to mortality rates due to COVID-19 and poor communication with families around this.
February	CP concerned about the quality of care including visiting restrictions, management of personal possessions and access to allied health professionals.
February	Anonymous concern in relation to the roll out of the COVID-19 vaccines.
February	
February	CP has concerns about quality of care including end of life care and poor communication.

February	CP concerned about the quality of care including staffing levels, management of complaints and health and social care needs
February	CP concerned about the safeguarding of residents and management of allegations of abuse.
February	CP concerned about infection prevention and control measures, mortality rates due to COVID-19, poor communication with families and end of life care.
February	CP concerned about the management of personal records and accurate information documented.
February	CP concerned about the quality of care including nutritional needs being met, infection prevention and control measures and management of personal belongings.
February	CP raised health and safety concerns as the lift in centre was out of service.
February	CP concerned about the quality of care including visiting arrangements, communication with families and residents, and management of complaints.
February	Anonymous concern in relation to the quality of care including infection prevention and control measures, safeguarding and social isolation of residents, and governance and management.
February	CP concerned about poor communication from centre during an outbreak of COVID-19.
February	CP concerned about the lack of window visits being facilitated in this centre.
February	
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February	CP concerned about infection prevention and control measures in centre.
March	CP concerned about the quality of care in relation to safeguarding, poor communication with families, lack of social interaction and poor governance and management.
March	CP concerned that the centre advised they cannot meet residents needs.
March	CP concerned about the quality of care in relation to poor communication with families, falls management, window visits and medical attention.
March	CP concerned about the safeguarding of residents finances.
March	CP concerned about the communication shared between staff and relatives.
March	
March	CP has concerns about the quality of care including safeguarding, poor personal care and poor communication.
March	CP concerned about the safeguarding of residents and management of complaints.

March	CP has concerns regarding an employee's social media account supporting an anti mask culture and not supporting COVID-19 guidance.
March	CP concerned about the quality of care including falls management, implementation of visiting guidance, poor communication and staffing levels.
March	CP concerned about quality of care including lack of activities for residents, communication, infection prevention and control measures and poor governance and management.
March	
March	Anonymous concerns about the quality of care in relation to the management of residents preferences and poor governance and management.
March	CP concerned about infection prevention and control measures, the level of clinical input and the management of a COVID-19 outbreak.
March	CP concerned about the management of complaints and the findings of a recent inspection.
March	CP concerned about the quality of care in relation to falls management, infection prevention and control measures, management of personal belongings, poor communication with families and access to medical attention.
March	
March	CP concerned about the quality of care in relation to poor communication with families, relocation of residents and infection prevention and control measures.
March	CP concerned about the quality of care in relation to critical visits being facilitated.
March	
March	CP has concerns regarding the quality of care including safeguarding of residents, nutrition and hydration, record keeping, and consent to treatment.
March	Anonymous concerns in relation to the restrictions on visits and the impact this is having on residents.
March	
March	CP concerned about quality of care in relation to safeguarding of residents.
March	CP concerned about the quality of care including the care and welfare of residents and their rights, personal care, medication and falls management, communication, and lack of rehabilitation.
March	CP concerned about the impact of visiting restrictions, including window visits on the residents and their families.
March	
March	CP concerned that the centre are not implementing the HPSC COVID-19 visitation guidance.
March	CP concerned about the centre facilitating compassionate visits for residents

March	CP concerned about the poor management of the residents personal belongings, communication and management of investigations.
March	CP concerned about the quality of care including safeguarding residents, meeting residents needs including nutrition and hydration, personal care and wishes.
March	CP concerned about the quality of care including safeguarding of residents, infection prevention and control measures, staffing levels, and management of risk and falls.
March	CP concerned about the quality of care including safeguarding of residents, the lack of support and assistance provided to residents, meeting residents nutritional needs, and medication management.
March	CP concerned about staffing levels, infection prevention and control measures and non compliance with COVID-19 restrictions.
March	
March	
March	CP raised concerns in relation to families seeing residents in person and not behind screens when updated HPSC guidance implemented.
March	
March	CP has concerns regarding new visitation guidelines that are impacting on residents interaction with their families.
March	CP raised concerns in relation to the updated HPSC guidance and indoor visits being facilitated.
March	CP concerned about indoor visits not being facilitated and the impact that it is having on residents.
March	Anonymous concern in relation to the implementation of HPSC visiting guidance and the impact this is having on residents.
March	CP has concerns regarding current visitation restrictions in centre and provider not following the latest visitation guidelines.
March	Anonymous concern in relation to the implementation of HPSC visiting guidance and the impact this is having on residents.
March	CP has concerns about the contract of care.
March	
March	CP concerned about the implementation of the updated HPSC visiting guidance and the impact this is having on residents.
March	CP concerned about the poor management of residents' personal belongings and communication with family members.

Manah	CP concerned about the implementation of the updated HPSC visiting guidance and the impact this is having on
March	residents. Anonymous concerns about the quality of care including staffing levels, poor communication, visiting restrictions and non
March	implementation of the updated HPSC visiting guidance.
March	
March	CP concerned about the quality of care including infection prevention and control measures, poor communication, poor governance and management and end of life care.
March	CP concerned about the implementation of the updated HPSC visiting guidance.
March	CP concerned about the roll out of vaccinations for agency staff.
March	Anonymous concern about quality of care in relation to poor infection, prevention and control measures and manual handling
March	Anonymous concerns in relation to infection prevention and control measures.
March	CP concerned about the implementation of the updated HPSC visiting guidance.
March	CP concerned about the quality of care including poor communication and end of life care.
March	
March	CP concerned about the implementation of the updated HPSC visiting guidance and the impact this is having on residents.
March	Anonymous concern about the quality of care including staffing levels, communication, no activities are being provided, implementation of the updated HPSC visiting guidance and the impact of social isolation on the residents.
March	CP concerned about the quality of care and welfare of residents including infection prevention and control measures, poor personal care, poor management of the residents personal belongings, communication, governance and management and end of life care.
March	CP has concerns about the quality of care including delays in accessing medical care, medication management, poor communication and lack of staff professionalism and attitudes.
March	CP is concerned that not all staff are wearing their face masks appropriately in this centre.
March	CP concerned about the quality of care including poor communication with families, nutrition and hydration requirements, personal care and mis-communication regarding COVID-19 diagnosis.
March	
March	CP concerned about the quality of food, management of personal belongings, communication and management of complaints.

March	CP concerned about the management of personal possessions and poor staff professionalism.
March	CP concerned about infection prevention and control measures.
March	CP concerned about the quality of care in relation to lack of social interaction, nutritional care needs and medication management.
March	CP concerned about the quality of care including that the centre continues to be non-compliant with the regulations, staffing levels and delays introducing the updated HPSC visiting guidance as not all staff have been vaccinated.
March	Anonymous concern in relation to the implementation of the updated HPSC visiting guidance and the impact this is having on residents.
March	CP concerned about the quality of care including safeguarding, meeting residents needs, falls management, delays in accessing medical care, and communication.
March	CP concerned about the impact of COVID-19 pandemic on residents deteriorating motor and cognitive skills and implementation of visitation guidelines and the impact on residents and their families.
March	CP has concerns about additional charges in centre.
March	
March	CP concerned about the quality and care of residents including nutrition and hydration, poor staff attitudes and recognition of end of life care.
March	CP concerned about quality of care in relation to safeguarding and complaints management.
March	CP concerned about the quality of care in relation to safeguarding, falls management, lack of social interaction and activities and poor staff attitudes.
March	
April	CP concerned about the implementation of the revised HPSC visiting guidance.
April	Anonymous concern about the quality of care and welfare of residents including poor personal care and lack of mobility.
April	
April	
April	CP concerned about the quality of care including medication and falls management, personal hygiene, staff turnover and noise levels due to building works and the impact this is having on residents.
April	CP concerned about the deaths of five residents and any association with the COVID-19 vaccination.
	CP concerned about the deaths of eight residents and any association with the COVID-19 vaccination.
April	I or concerned about the deaths of eight residents and any association with the COVID-18 Vaccination.

April	CP concerned about the deaths of ten residents and any association with the COVID-19 vaccination.
April	CP concerned about the contract of care and management of complaints.
April	
April	CP concerned about the quality and care of residents in relation to nutrition and weight management.
April	CP concerned about the safeguarding of residents and management of an allegation of abuse.
April	CP concerned that HPSC guidelines were not followed over Easter and the governance and management of the centre.
April	CP concerned about the quality of care in relation to showering facilities and the quality of food.
April	
April	Anonymous concerns in relation to the implementation of the updated HPSC guidance and the effects this has on residents.
April	CP concerned that centre are not fully implementing the revised HPSC visiting guidance.
April	CP concerned about the management of residents belongings and communication.
April	CP has concerns about the quality of care including poor communication and location of residents room.
April	CP concerned about the quality and care including safeguarding and personal care of residents and professional conduct
April	
April	CP concerned about the quality of care including residents physical condition, medication management and poor communication.
April	CP concerned about poor governance and management and staff turnover.
April	
April	CP concerned about the quality of care including physical condition of residents, medication management and communication.
April	CP has concerns regarding the quality of care including medication management, Infection prevention and control measures and management of resident belongings.
April	Anonymous concern in relation to the quality of care including meeting the needs of residents, safeguarding, employee relations and governance and management.
April	CP concerned that centre are aware of an imminent inspection.

April	CP concerned about providers policies and procedures in relation to admissions and transfers and meeting healthcare needs of residents.
April	CP concerned about providers policies and procedures in relation to admissions and transfers and meeting healthcare needs of residents.
April	CP concerned about the safeguarding of residents.
April	CP concerned about residents privacy and their consent when partaking in videos that are uploaded on social media.
April	
April	CP has concerns about the quality of care including personal care, wound management, heating, social isolation and staff levels.
April	CP has concerns about the management of records.
April	CP concerned about indoor dining being facilitated for residents and relatives despite it not being allowed under current COVID-19 rules.
April	CP concerned around the admission procedure within this nursing home.
April	CP has concerns about the recent outbreak of COVID-19 and impact on residents.
April	Anonymous concern in relation to the quality of care including personal care and nutrition.
April	CP concerned about the quality of care including safeguarding of residents, meeting residents needs, poor communication and complaints management.
April	Anonymous concerns in relation to the poor professionalism and practice of staff.
April	CP concerned about the quality of care including staff not responding to bell and communication
April	CP concerned about the safeguarding of residents.
April	CP concerned about the quality of care in relation to poor oral hygiene and visitation.
April	CP concerned about information governance and the recent outbreak in centre and impact on residents.
April	CP concerned that the centre are not implementing the HPSC COVID-19 visitation guidance.
April	CP has concerns about the quality of care and welfare in relation to wound management, medication management, poor communication and personal possessions.
April	CP concerned about safeguarding of residents and an allegation of financial abuse.
April	CP concerned about the safeguarding of residents and an allegation of neglect.

April	CP concerned that centre are not implementing the HPSC visiting guidance in full and poor communication from centre.
April	CP has concerns in relation to communication with families at end of life.
April	CP concerned about the implementation of visits within this centre.
April	CP has concerns about infection prevention and control measures within the nursing home in relation to the wearing of face masks.
April	Anonymous concern about the poor quality of communication with families.
April	
April	Anonymous concern about the quality of care and welfare of residents including physical, mental and social stimulation and poor hydration.
April	CP concerned about the quality of care including lack of dignity and respect and poor communication.
April	CP concerned about the safeguarding of residents.
April	CP concerned about the quality of care including falls management, poor communication, staff turnover and delays introducing the updated HPSC visiting guidance as vaccination programme not completed.
April	Anonymous concern in relation to the implementation of the updated HPSC guidance on visits.
April	
April	
April	Anonymous concern in relation to the implementation of the updated HPSC guidance on visits.
April	CP concerned about the quality of care including management of personal possessions, access to allied health professionals, poor communication and recent report findings.
	CP concerned about the quality of care including the contract of care in relation to fees, infection prevention and control
April	measures and visiting opportunities.
April	CP concerned about the quality of care including personal care, skin integrity, visiting and communication.
April	CP concerned about the discharge process in the centre.
April	CP concerned about the unprofessional behaviour of staff, residents rights and safeguarding.
April	CP concerned about the quality of care in relation to admissions, contracts of care and residents rights.
April	CP concerned about the quality of care in relation to medication management.

April	CP concerned about safeguarding.
April	CP concerned about the quality of care including medication management, hydration, personal care and communication.
April	CP concerned about the unprofessional behaviour of staff in relation to visits and HPSC guidance.
May	CP concerned about the quality of care in relation to personal care, mobility and stimulation, staff turnover and governance and management.
May	CP concerned about the quality of care in relation to wound and medication management, heating, dehydration and personal care.
May	CP concerned about contracts of care and information governance.
May	CP concerned about the quality of care including infection prevention and control measures, poor communication, poor governance and management and nutrition and hydration requirements
May	CP concerned about visits and the poor communication around this.
May	
May	
May	CP concerned about the quality of care in relation to the implementation of HPSC visiting guidance.
May	CP concerned about the quality of care in relation to the implementation of HPSC visiting guidance.
May	CP concerned about the quality of care including medication management, safeguarding, choice of GP, seeking medical attention in a timely manner and communication.
May	CP concerned that centre are not implementing the HPSC visiting guidance in full and poor communication from centre.
May	CP concerned about the quality of care in relation to lack of social interaction, call bells being left unanswered and unprofessional behaviour of staff.
May	CP concerned about infection prevention and control measures.
May	CP concerned about the quality of care in relation to nutrition and hydration, call bells being left unanswered, management of personal belongings and management of complaints.
May	CP concerned about the implementation of updated visiting guidance.
Мау	Anonymous concern about the quality of care including personal care and nutrition and hydration; staffing levels and governance and management.
May	

May	CP concerned about the management of complaints and timely response to information.
may	
May	CP concerned about the quality of care in relation to residents rights.
	Anonymous concern about the quality of care in relation to residents having meaningful and purposeful days, poor
May	governance and management and visitation guidelines.
	CP has concerns regarding current visitation restrictions in centre and provider not following the latest visitation
May	guidelines.
May	CP concerned about the quality of care including safeguarding of residents.
May	
May	CP concerned about safeguarding of residents.
	CP concerned about the quality of care including residents rights, unprofessional behavior of staff, management of
May	medication and management of complaints.
May	
May	
May	CP concerned about the quality of care including personal care, skin integrity, visiting and lack of rehabilitation.
	CP concerned about the quality of care including safeguarding of residents during their transition to centre, infection
May	prevention and control measures during a COVID-19 outbreak, communication to families and end of life care.
	CP concerned about the quality of care including safeguarding of residents, poor communication and governance and
May	management.
May	CP concerned about the quality of care including management of personal possessions, medication management, poor communication, and governance and management.
way	CP concerned about the quality of care including skin integrity, wound management and management of personal
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May	belongings.
May May	belongings. CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
May	

Мау	CP concerned that some residents are being moved from their familiar environment to a different unit and the effect this may have on them.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned about the quality of care in relation to dignity and respect and visiting.
Мау	CP concerned about the quality of care including end of life care, complaints management, management of personal
May	property and governance of service.
May	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
May	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned about the quality of care including personal care, management of visiting and personal possessions, infection prevention and control measures and poor governance and management.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
May	CP concerned that the centre was not implementing the HPSC visiting guidance.
May	CP concerned that the centre was not implementing the HPSC visiting guidance.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance.
May	CP concerned that the centre was not implementing the HPSC visiting guidance

May	CP concerned about admissions process and communication with families during ongoing building works.
May	CP concerned that the centre was not implementing the HPSC visiting guidance.
May	CP concerned about the quality of care in relation to personal care and hygiene and cleanliness of premises.
May	CP concerned that the centre was not implementing the HPSC visiting guidance.
May	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
May	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
May	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
May	
May	CP concerned that the centre was not implementing the HPSC visiting guidance and poor communication with families.
Мау	CP concerned that the centre was not implementing the HPSC visiting guidance.
May	
Мау	
Мау	CP concerned about the quality of care including hydration of residents, falls management and timely access to medical attention.
Мау	CP concerned about the quality of care for residents including personal care, skin integrity, access to allied health professionals, nutrition and hydration and poor communication.
May	
May	CP concerned about the centres complaints management process, particularly the independence of the appeals mechanism.
	CP concerned about the implementation of the updated HPSC guidance.
May	
May May	CP concerned about the management of personal belongings.

Мау	CP concerned about the quality of care in relation to visiting, personal hygiene and hydration and nutrition.
Мау	CP concerned that the HPSC visiting guidance is not being implemented in full.
May	CP concerned about inadequate communication and poor management of a COVID-19 outbreak and requesting HIQA to undertake an investigation.
Мау	CP concerned about the quality of care including safeguarding of residents, training provision to health care assistants and governance and management.
Мау	CP concerned about the quality of care including safeguarding of residents, personal care, medicines management, complaints handling and poor communication.
Мау	CP concerned about quality of care including hydration of residents and falls management.
Мау	Anonymous concerns in relation to the implementation of the updated HPSC guidance.
Мау	
Мау	CP concerned about safeguarding of residents and management of residents personal possessions.
Мау	CP is concerned about noise levels from construction being carried out on the premises causing stress to residents.
Мау	CP is concerned about Infection prevention and control measures and communication with family members.
Мау	CP concerned about general welfare and development of residents.
Мау	Anonymous concern in relation to the quality of care including poor management of personal possessions, staff not responding to bells, lack of dignity and respect of residents and poor governance and management.
Мау	
Мау	CP concerned about quality of care including transitioning into the centre, the management of positive behavioural supports and safeguarding residents.
Мау	CP concerned about the quality of care including hydration of residents and weight loss.
May	Anonymous concern about infection prevention and control measures including staff not adhering to social distancing guidelines.
Мау	CP concerned about the implementation of the updated HPSC guidance.
Мау	

	CP has concerns regarding governance and quality of care.
May	CP concerned about the safeguarding of residents and governance and oversight of service.
May	CP concerned about safeguarding of residents and the governance and management of centre.
Мау	CP concerned about the quality of the care including meeting the needs of residents, nutrition and hydration, management of the facilities, health and safety, staffing levels and governance of service.
May	CP complimentary of a well run centre and unhappy about the timing of a recent HIQA inspection while roof repairs were ongoing and problems identified.
Мау	CP concerned about social isolation of resident due to them being isolated in their room and the lack of communication to family regarding residents wellbeing.
Мау	CP concerned about the quality of care including care planning, medication management, nutrition and weight management, visiting arrangements, and poor communication.
Мау	Anonymous concern about the dignity and respect shown to residents, safeguarding of residents, health and safety, seeking medical attention following a fall and governance and management.
May	CP concerned about the quality of care including meeting the residents healthcare and dietary needs, nutrition, infection prevention and control measures and complaints management.
May	CP concerned about visiting arrangements and residents rights.
Мау	CP concerned about the management of infection prevention and control measures in this centre including testing of staff.
June	CP concerned about the quality of care including visiting and poor communication.
June	CP concerned about the lack of effective communication, complaints management and governance and management.
June	
June	
June	CP concerned about the quality of care in relation to residents rights, information governance and communication.
June	CP concerned about the recognition of residents healthcare needs and the unprofessional behaviour of management

June	
June	CP concerned about the governance and management of this centre including unprofessional behaviour of staff and quality of care in relation to poor personal care of residents.
Julie	
June	
June	CP concerned about the safeguarding of residents.
June	CP concerned about the safeguarding of residents and the quality of care in relation to meeting residents care plan needs including falls management.
June	CP concerned about the safeguarding of residents and the quality of care in relation to meeting residents care plan needs including falls management.
June	CP concerned about the quality of care in relation to discharge of residents.
June	CP concerned about the quality of care including meeting the needs of residents, residents general welfare and development, the cleanliness of the physical premises, and governance and oversight.
June	
June	CP concerned about the quality of care in relation to care planning, social isolation, falls management and nutrition.
June	CP concerned about the quality of care including personal care, social care and management of personal possessions.
June	CP concerned about safeguarding, resident's rights including dignity and respect, training and staff development.
June	CP concerned about infection prevention and control measures during COVID-19 outbreak, end of life care and poor communication.
June	CP concerned about the quality of care including nutritional needs of residents and the quality of food, care planning processes and medication management.
June	CP concerned about the quality of care including falls management and relevant notification of incidents to HIQA.
June	
June	
June	CP concerned about visiting arrangements, safeguarding and communication.

June	
June	
June	CP concerned that internal transfer will have a negative impact on the resident.
June	CP concerned about the quality of care including falls management, nutrition and hydration, effective communication, management of complaints and general care and welfare of residents.
June	CP concerned about recruitment practices, infection prevention and control measures and governance of the service.
June	CP concerned about recruitment practices, infection prevention and control measures and governance and management.
June	
June	Anonymous concerns in relation to contract of care and management of personal belongings.
June	CP concerned about the quality of care including personal care, falls management and staffing levels.
June	CP concerned about the quality of care including personal care, safeguarding of residents and infection prevention and control measures.
June	CP concerned about contracts of care and effective communication.
June	
June	CP concerned about the quality of care, staffing levels, the oversight of residents and management of a complaint.
June	CP concerned about safeguarding of residents, the quality of care including personal care and complaints handling.
June	CP concerned about staffing levels, staff training and the quality of care including medicines management and end-of-life care.
June	CP concerned about the quality of care including appropriate medical review, assessment and diagnosis of clinical condition, recognition of clinical deterioration and medication management.
June	CP concerned about the quality of care including skin integrity, physical condition, and hydration.
June	CP concerned about the quality of care including skin integrity, medication management and lack of rehabilitation and governance and management.
June	CP concerned about staffing levels, and the impact on the quality of care including call bells being left unanswered.

June	CP concerned about the quality of care including falls management and information governance.
June	CP has concerns about the safeguarding of residents, and governance and management of the centre.
June	CP concerned about safeguarding, poor communication, quality of care including falls management and complaints handling.
June	CP concerned about falls management, nutrition, personal care, poor communication and poor governance and management.
June	
June	
June	CP concerned about safeguarding, governance and management and staffing.
June	CP concerned about safeguarding, falls management and communication.
June	
June	CP concerned that residents rights are not being upheld and risk averse infection prevention and control measures within the centre.
June	CP concerned about the discharge process and communication.
June	CP concerned that residents rights are not being upheld, including privacy and family life and the impact of this on the residents.
June	CP concerned that residents rights are not being upheld due to restrictions on visits.
June	CP concerned about residents rights not being respected, the quality of care including delays in seeking medical attention and current restrictions on visitors.
June	CP concerned about the quality of care in relation to compassionate visits, communication around end of life and management of personal belongings.
June	CP concerned about safeguarding of residents and the quality of care including personal care.
June	CP concerned about admission and discharge process within nursing home including residents rights.
June	CP concerned about infection prevention and control measures.
June	
June	CP concerned about safeguarding, complaints management, staffing and personal care.

June	CP concerned about the quality of care including hydration of residents, cleanliness of room and availability of equipment for residents medical needs.
June	
June	CP concerned about the quality of care including medication management, staffing levels and poor communication.
June	CP concerned about safeguarding in relation to unexplained bruising.
June	CP concerned about safeguarding of residents.
June	CP concerned about the quality of care including skin integrity and hydration of residents and staffing levels.
June	CP concerned about poor governance and management, staffing and the quality of care.
June	CP concerned about the quality of care including healthcare and poor communication.
June	
June	Anonymous concerns in relation to access to medical attention.
July	
July	CP concerned about staffing levels, particularly night time staffing levels.
July	
July	Anonymous CP has concerns about staffing levels at night and privacy of residents.
July	CP concerned about poor communication, visiting and residents' rights.
July	CP concerned about the quality of care in relation to access to medical attention, oral hygiene, weight management and health and safety.
July	CP concerned about the quality of care including care planning and the contract of care including additional fees.
July	CP concerned about the quality of care including nutrition and accessing healthcare.
July	CP concerned about poor communication.
July	CP concerned about infection prevention and control measures in centre and recent inspection report findings.

July	CP concerned about residents' rights including privacy.
July	
July	CP concerned about the quality of care including falls management, healthcare, nutrition and hydration, personal care and care planning, management of personal belongings, staffing, complaints management and communication.
July	CP concerned about the quality of care including medicines and falls management.
July	CP concerned about infection prevention and control measures, governance and management, staffing levels, communication and quality of care including social care and nutrition.
July	CP concerned about poor communication.
July	CP concerned about quality of care including poor personal care, residents rights and complaints handling.
July	CP concerned about poor communication and health and safety measures. CP concerned about poor communication and the quality of care including healthcare, medicines management and end-
July	of-life care.
July	CP complimenting the service.
July	CP concerned about the quality of care including personal care, staffing and communication.
July	CP concerned about complaints handling, risk management and governance and management.
July	CP concerned about the safeguarding of residents, risk management, and quality of care including care planning and positive behaviour supports.
July	CP concerned about the safeguarding of residents, transfer of residents to hospital in a timely manner and governance and management.
July	CP concerned about poor governance and management, safeguarding, residents' rights, communication, personal possessions and quality of care including personal care and medicines management.
July	
oury	

July	CP concerned about the quality of care including personal care and care planning, general welfare and development of residents, management of personal belongings, communication, staffing, complaints handling and governance and management.
July	
July	CP concerned about the safeguarding of residents, staffing, and governance and management.
July	CP concerned about the safeguarding of residents, the quality of care including medicines management and residents transfer to hospital.
July	CP concerned about safeguarding of residents, the quality of care including healthcare, nutrition and skin integrity, and communication with families.
July	CP concerned about the quality of care including care planning, medicines management and end of life care, residents rights, infection prevention and control measures during a COVID-19 outbreak and communication.
July	CP concerned about communication, quality of care including falls management and nutrition, and transfers to hospital.
July	CP concerned about the safeguarding of residents, the quality of care including healthcare, personal care, residents rights and visiting.
July	CP concerned about safeguarding, health and safety and quality of care including falls management.
July	CP concerned about personal possessions, lack of social interaction and unprofessional behaviour of staff.
July	
July	CP is concerned about safeguarding of residents, staffing, training and staff development.
July	CP concerned about residents rights, the quality of care including personal and social care and staffing.
July	
July	CP concerned about the quality of care including skin integrity.
July	CP concerned about visiting, communication and governance and management.
July	CP concerned about management of personal possessions, infection prevention and control measures and quality of care including hydration.

July	
July	CP concerned about the quality of care including personal care and healthcare.
July	
July	CP concerned about the quality of care including falls management and communication.
July	CP concerned about complaints handling, governance and management and the quality of care including care planning, nutrition and medication management.
July	CP concerned about the quality of care including healthcare, medicines management and personal care, governance and management and training and staff development.
July	CP concerned about safeguarding.
July	
July	CP concerned about complaints handling, health and safety and quality of care including personal care and skin integrity.
July	CP concerned about safeguarding, governance and management and unprofessional behaviour of staff.
July	
July	
July	CP concerned about the safeguarding of residents, complaints handling, communication and quality of care including medication management and discharge.
July	CP concerned about the quality of care including skin integrity and personal care, personal possessions, general welfare and development and complaints handling.
July	CP concerned about visiting and quality of care including positive behavioural support and healthcare.
July	CP concerned about health and safety, facilities and quality of care including care planning, personal care and staff training.
July	CP concerned about the quality of care including nutrition, risk management, and staffing levels.
August	CP concerned about residents rights, communication and quality of care including personal care and medicines

August	
August	CP concerned about poor communication.
August	CP concerned about poor infection prevention and control measures.
August	CP concerned about premises, poor communication, governance and management, resident's rights, quality of care and social care.
August	CP concerned about complaints handling, communication and governance and management.
August	CP concerned about the governance and management of service, information governance, and complaints handling.
August	CP concerned about the governance and management of the service.
August	
August	CP concerned about the governance and management of service, and information governance.
August	
August	CP concerned about the safeguarding of residents, communication and quality of care including hydration.
August	CP concerned about poor governance and management, staffing, employee relations and negative impact on residents and quality of care including social care.
August	CP concerned about complaints handling and governance and management.
August	CP concerned about the safeguarding of residents and quality of care in relation to hydration and personal care.
August	CP concerned about residents' rights and poor communication.
August	CP concerned about complaints handling, infection prevention and control measures, quality of care including healthcare and personal care.
August	CP concerned about unprofessional behavior of staff and quality of care including personal care and falls management.
August	CP concerned about the premises, health and safety measures, personal possessions, a lack of activities and poor communication.
August	CP concerned about the quality of care including falls management, healthcare and end of life care, staffing and governance and management.
August	CP concerned about infection prevention and control measures.

August	
August	
August	CP concerned about poor communication, staffing and quality of care including healthcare.
August	CP concerned about the safeguarding of residents in relation to an allegation of abuse.
August	
August	CP concerned about the quality of the care including personal care, residents rights, staffing and governance and management.
August	CP concerned about governance and management, staffing, training and staff development, poor communication and quality of care including positive behavioural support, personal care and social care.
August	CP concerned about the governance and management of the service, staffing levels, contracts and the quality of care including nutrition and hydration, personal and social care.
August	CP concerned about visiting and staffing.
August	CP concerned about communication.
August	CP concerned about admissions and contracts.
August	CP concerned about admissions and contracts.
August	
August	
August	
August	CP concerned about communication and visiting.
August	CP concerned about staffing levels and quality of care including skin integrity and personal care.
August	
August	CP concerned about the quality of care including care planning, risk management and contracts.

August	CP concerned about residents' rights
August	CP concerned about poor communication and quality of care including falls management.
August	CP concerned about complaints' handling, risk management and governance and management.
August	CP has concerns around visiting and HPSC visiting guidance not being fully implemented.
August	CP concerned about infection, prevention and control measures and quality of care including access to healthcare, personal care and hydration.
August	
August	CP concerned about the quality of care including care planning, personal and social care, nutrition and hydration and positive behavioural supports.
August	CP concerned about residents rights, visiting and infection prevention and control measures in the centre.
August	CP concerned about the premises, residents' rights, the quality of care including positive behaviour supports, safeguarding, contracts of care and governance and management.
August	CP concerned about residents rights, general welfare and development and visiting.
August	CP concerned about the quality of care including personal care, skin integrity, access to medical attention and healthcare.
August	CP concerned about infection prevention and control measures and staff working cross site.
August	CP concerned about residents' rights, visiting and quality of care including healthcare.
August	
August	CP concerned about residents quality of care including care planning, personal care and healthcare, communication and staffing.
August	CP concerned about infection prevention and control measures and staff working cross site during COVID-19 outbreak.
August	CP concerned about the quality of care including nutrition and hydration, healthcare and end of life care and visiting.
August	
August	CP concerned about residents rights, visiting, infection prevention and control measures, communication and governance and management.
August	CP concerned about residents rights, visiting and infection prevention and control measures.

August	CP concerned about infection prevention and control measures, general welfare and development, visiting and staffing levels during COVID-19 outbreak.
August	CP concerned about the quality of care including skin integrity.
August	
August	CP concerned about quality of care to resident including falls management.
August	CP concerned about the safeguarding of residents and discharge processes.
August	CP concerned about poor infection prevention and control measures.
August	CP concerned about infection prevention and control measures, residents quality of care including personal care and staffing levels.
August	CP complimentary of the service including quality of care provided to patients and staff professionalism.
August	
August	CP concerned about the quality of care including nutrition, skin integrity and social care, poor communication and governance and management.
August	CP concerned about communication, infection prevention and control measures and governance and management.
August	Media article about infection prevention and control measures.
August	
August	CP concerned about visiting and communication.
August	
August	CP is complimenting the staff regarding the quality of care provided to the resident during end of life care.
August	CP concerned about the quality of care including personal care and staffing.
August	Anonymous concerns about the safeguarding of residents, staffing levels and governance and management.

August	CP concerned about residents rights, visiting, infection prevention and control measures, the quality of care including personal care, communication and governance and management.
August	
August	CP concerned about residents rights, staffing and premises.
August	CP concerned about infection prevention and control measures and governance and management
August	CP concerned about infection prevention and control measures and governance and management.
August	CP concerned about infection prevention and control measures during a COVID-19 outbreak, visiting, communication and staffing levels.
August	CP concerned about infection prevention and control measures during a COVID-19 outbreak, staffing and governance and management.
August	CP concerned about residents rights, visiting, infection prevention and control measures, communication and governance and management.
August	CP concerned about the safeguarding of residents, their rights, the quality of care including care planning, the admissions process and governance and management.
August	CP concerned about communication, visiting and residents rights.
August	CP concerned about safeguarding, the quality of care including nutrition and hydration and care planning, the discharge process and governance and management.
August	CP concerned about residents rights, communication and governance and management.
August	CP concerned about safeguarding, the quality of care including nutrition and hydration and care planning, the discharge process and governance and management.
August	CP concerned about the quality of care including falls management and healthcare and staff training and development.
August	Anonymous concern about residents rights, visiting, the premises, the quality of care including nutrition and hydration, staffing, communication and complaints handling.
August	CP complimentary of the quality of care but concerned about the contract, communication and governance and management.
August	CP concerned about the quality of care including falls management and care planning.

August	
August	CP concerned about quality of care including medicine and falls management.
August	CP concerned about visiting and residents rights.
August	CP concerned about the quality of care including care planning and medication management, the discharge process, poor communication, and governance and management.
August	Anonymous concerns in relation to residents rights, the quality of care including personal care, skin integrity and nutrition and hydration, staffing and complaints handling.
August	CP concerned about residents rights, the quality of care including personal care, visiting and staffing.
August	Anonymous concern about poor governance and management, unprofessional behaviour of staff and information governance.
August	
August	CP concerned about the quality of care including wound management and accessing healthcare.
August	Anonymous concern in relation to the safeguarding of residents, their rights, the quality of care including healthcare and care planning and governance and management.
August	CP concerned about the safeguarding of residents, staffing levels and governance and management.
August	
August	CP concerned about residents rights, visiting and communication.
August	CP concerned about safeguarding and infection prevention and control measures.
August	CP concerned about communication, complaints handling and contracts.
August	CP concerned about staffing, governance and management and quality of care including personal care and nutrition.

August	CP concerned about staffing, communication, premises, personal possessions and the quality of care including personal care and falls management.
August	CP concerned about residents rights, visiting, staffing, communication, complaints handling and governance and management.
August	CP concerned about infection prevention and control measures, the quality of care including falls management, skin integrity and healthcare and communication.
August	CP concerned about residents rights, the quality of care including personal care, and care planning, poor communication, information governance, complaints handling and governance and management.
August	CP concerned about safeguarding and governance and management.
September	CP concerned about residents' rights, poor communication and quality of care including care planning, poor personal care, medicines management and end of life care.
September	
September	CP concerned about residents rights and safeguarding of residents and governance and management.
September	
September	
September	CP concerned about general welfare and development of residents, residents rights, the quality of care including personal care and staffing.
September	CP concerned about the quality of care including personal care and skin integrity and staffing.
September	CP complimentary of the service including the quality of care provided to residents and governance and management.
September	
September	
September	CP concerned about safeguarding of residents, staffing and residents rights.
September	CP concerned about staffing, health and safety and the quality of care including falls management.

September	
September	CP concerned about infection prevention and control measures, the quality of care including skin integrity, nutrition and hydration and staffing.
September	CP concerned about the safeguarding of residents, management of personal possessions, the quality of care including nutrition and hydration, personal care and healthcare needs and communication.
September	
September	
September	
September	CP concerned about the safeguarding of residents, unprofessional behaviour of staff and governance and management.
September	CP concerned about the safeguarding of residents and communication.
September September	CP concerned about the safeguarding of residents and communication. CP concerned about communication, residents rights and quality of care including medication management and personal care.
·	CP concerned about communication, residents rights and quality of care including medication management and personal
September	CP concerned about communication, residents rights and quality of care including medication management and personal care.
September September	CP concerned about communication, residents rights and quality of care including medication management and personal care. CP concerned about poor communication and quality of care including personal care and skin integrity.
September September September	CP concerned about communication, residents rights and quality of care including medication management and personal care. CP concerned about poor communication and quality of care including personal care and skin integrity.

September	CP concerned about residents' rights, premises and quality of care including healthcare. CP concerned about the quality of care including personal care, skin integrity, nutrition and hydration, safeguarding and
September	health & safety.
	CP concerned about staffing, governance and management and quality of care including personal care and care
September	planning.
September	CP concerned about communication, governance and management, residents rights and quality of care including falls management.
September	CP concerned about the admissions process.
September	
September	CP concerned about safeguarding, governance and management, staffing and quality of care including falls management.
September	CP concerned about poor communication and quality of care including skin integrity, falls management and care planning.
September	CP concerned about visiting, communication and residents rights.
September	
September	CP concerned about the quality of care including nutrition and hydration, care planning and medicines management, governance and management, staffing, training and staff development and communication.
September	CP concerned about residents rights and the quality of care including end of life care and medicines management.
September	CP concerned about quality of care including personal care, healthcare and staffing.
September	CP concerned about staffing, governance and management and quality of care.
September	CP concerned about communication.
September	CP concerned about safeguarding, quality of care including medication management and nutrition, and complaints handling.

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Santambar	CP concerned about quality of care including falls management and social care, visiting, communication and complaints
September	handling.
September	CP concerned about safeguarding, residents rights, quality of care including personal care and complaints handling.
September	
September	CP concerned about contracts and safeguarding.
Sontombor	
September	
September	
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September	
Sontombor	CD concerned about quality of care and communication
September	CP concerned about quality of care and communication.
September	
Coptombol	
September	
September	CP concerned about the safeguarding of residents and their rights, infection prevention and control measures and communication.
Ocptember	
	CP concerned about the quality of care including personal care and healthcare, infection prevention and control
September	measures, communication, and complaints' handling.
September	CP concerned about quality of care including healthcare and governance and management.
September	
September	CP concerned about visiting, the quality of care including personal care and communication.
Contember	CP concerned about the safeguarding of residents and the quality of care including healthcare, end of life care, and
September	nutrition and hydration.

September	CP concerned about quality of care including health care, personal care and nutrition and hydration.
September	CP concerned about the quality of care including nutrition and hydration and general welfare and development, visiting and staffing.
September	CP concerned about staffing, resident's rights, infection prevention and control measures, premises and quality of care including personal care and falls management.
September	CP concerned about residents rights, the quality of care including medicines management and nutrition and hydration, the absence of positive behaviour supports, the admissions process and contracts.
September	CP concerned about quality of care including personal care and nutrition and hydration, staffing and communication.
September	CP concerned about the quality of care including healthcare, communication, and governance and management.
September	CP concerned about infection prevention and control measures and governance and management.
September	CP concerned about safeguarding, residents rights, quality of care including personal care and care planning, health and safety, infection prevention and control measures and governance and management.
September	CP concerned about safeguarding, residents rights and quality of care including personal care, skin integrity, social care and nutrition and hydration.
September	CP concerned about residents rights, the quality of care including personal care, hydration and social care, Infection prevention and control measures, premises and governance and management.
September	CP concerned about quality of care including care planning, healthcare and residents' rights.
September	
September	CP concerned about the safeguarding of residents, health and safety, governance and management, and staffing.
September	
September	CP concerned about the safeguarding of residents, the discharge process, poor communication, complaints' handling, governance and management and information governance.
September	CP concerned about governance and management.
September	

September	Anonymous concern about residents' rights, the quality of care including personal care and nutrition and hydration, staffing and governance and management.
September	CP concerned about the safeguarding of residents, the quality of care including healthcare and nutrition and hydration, and poor communication.
September	CP concerned about the quality of care including care planning and medicines management.
September	CP concerned about the quality of care including personal care and healthcare, communication and complaints' handling.
September	CP concerned about residents rights and their general welfare and development, the quality of care including social care, staffing and governance and management.
September	CP concerned about residents rights, the quality of care including personal care and skin integrity and governance and management.
September	CP concerned about residents' rights, the quality of care including care planning and healthcare, infection prevention and control measures, health and safety, and complaints' handling.
September	CP concerned about the quality of care including personal care, social care and nutrition and hydration, the premises and communication.
September	CP concerned about quality of care including personal care, discharge of resident, visiting and staffing.
September	CP concerned about the quality of care including healthcare, falls management, nutrition and hydration, personal care and governance and management.
September	CP concerned about the quality of care including personal care, medicines management and skin integrity, the discharge process, contracts and governance and management.
September	
September	CP concerned about the safeguarding of residents, the quality of care including positive behavioural support, the discharge process, communication, contracts and governance and management.
September	CP concerned about the safeguarding and protection of residents and governance and management.
September	CP concerned about the quality of care including positive behavioural support, personal care, nutrition and medicines management, health and safety, infection prevention and control measures, communication and governance and management.
October	

October	CP concerned about the quality of care including personal care and falls management, management of personal possessions, general welfare and development, risk management, communication, information governance and complaints handling.
October	CP concerned about safeguarding, staff training and development, and staffing.
October	CP concerned about residents rights, safeguarding, personal possessions and quality of care including care planning, healthcare and medicines management.
October	CP concerned about visiting.
October	CP concerned about the safeguarding of residents, the management of allegations of abuse, the quality of care including personal care, communication and governance and management.
October	CP concerned about the management of personal possessions, the quality of care including personal care and communication.
October	CP concerned about the safeguarding of residents, the quality of care including personal care, nutrition and hydration and healthcare, personal possessions, infection prevention and control measures, communication, complaints handling and governance and management.
October	
October	CP concerned about safeguarding, staffing and governance and management.
October	CP concerned about safeguarding, the quality of care including hydration, medicines management and healthcare, staffing and governance and management.
October	CP concerned about safeguarding of residents.
October	Anonymous CP concerned about unprofessional behaviour of staff and governance and management.
October	
October	CP concerned about communication and quality of care including hydration and end of life care.
October	CP concerned about residents' rights, safeguarding and visiting.
October	CP concerned about poor communication.

	CP concerned about the safeguarding of residents, the quality of care including falls management and personal care,
October	communication and governance and management.
October	CP concerned about residents rights, visiting and governance and management.
October	CP concerned about safeguarding, the quality of care including personal care, residents rights, staffing and governance and management.
October	CP concerned about governance and management, visiting and personal possessions.
October	
October	CP concerned about residents rights, general welfare and development and visiting.
October	CP concerned about communication, personal possessions and governance and management.
October	CP concerned about the safeguarding of residents, infection prevention and control measures during a COVID-19 outbreak, residents rights, general welfare and development and governance and management.
October	CP concerned about governance and management and poor communication.
October	CP concerned about the safeguarding of residents and governance and management.
October	CP concerned about safeguarding and residents' rights.
October	
October	CP concerned about the safeguarding of residents, the quality of care including falls management and communication.
October	CP concerned about poor communication
October	
October	Anonymous concerns about safeguarding, staffing, infection prevention and control measures, communication, and governance and management.

October	CP concerned about residents rights, the quality of care including personal care and nutrition and governance and management.
October	Anonymous concern about safeguarding and training and staff development.
October	
October	CP concerned about the safeguarding of residents, quality of care, staffing and governance and management.
October	
October	CP concerned about the safeguarding of the residents, the premises, risk management and communication.
October	
October	
October	CP concerned about the quality of care including healthcare, medicines management, personal care, management of personal belongings, communication, complaints handling and governance and management.
October	
October	Anonymous concerns in relation to the quality of care including personal care and nutrition, infection prevention and control measures, staffing and governance and management.
October	CP concerned about the quality of care including social care, staffing and governance and management.
October	
October	CP concerned about quality of care including nutrition and hydration, governance and management, communication and staffing.
October	CP concerned about the discharge process and governance and management.
October	CP concerned about the safeguarding of residents, complaints handling, staffing and governance and management.

October	
October	CP concerned about safeguarding, governance and management and communication
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October	
October	CP concerned about the safeguarding of residents.
October	CP concerned about staffing and governance and management.
October	CP concerned about the safeguarding of residents, the quality of care including personal care, staffing, complaints handling and governance and management.
October	CP concerned about the quality of care including personal care, healthcare and care planning.
October	CP concerned about the safeguarding of residents, the quality of care including personal care, infection prevention and control measures, visiting, staffing, and governance and management.
October	CP concerned about infection prevention and control measures.
October	
October	Anonymous concern about the governance and management of the centre and employee relations.
October	CP concerned about the safeguarding of residents, the quality of care including personal care and healthcare and governance and management.
October	Anonymous concern about the quality of care including end-of-life care.
October	CP concerned about the safeguarding and general welfare and development of residents, the quality of care including personal care, staffing, training and staff development and governance and management.
October	CP concerned about the quality of care including skin integrity and nutrition and hydration, personal possessions and staffing.

November	CP concerned about the quality of care including healthcare.
November	CP concerned about the safeguarding of residents, the quality of care including healthcare and falls management, staffing and governance and management.
November	CP concerned about quality of care including skin integrity and training and staff development.
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November	CP concerned about residents rights, the quality of care including personal care and nutrition and governance and management.
November	CP concerned about the safeguarding and rights of residents, visiting, infection prevention and control measures, the quality of care including personal care, communication, staffing, training and staff development and governance and management.
November	
November	CP concerned about the safeguarding of residents and their rights, the quality of care including healthcare, medication management and nutrition and hydration, contracts of care, communication and governance and management.
November	CP concerned about residents' rights, the premises and staffing.
November	
November	CP concerned about the safeguarding and general welfare and development of residents, the quality of care including personal care, social care, falls management, nutrition and hydration and healthcare, staffing, communication and governance and management.
November	
November	CP concerned about communication, residents rights and governance and management.

November	CP concerned about the safeguarding of residents and the quality of care including hydration and medicines management.
November	CP concerned about the safeguarding and rights of residents', the quality of care including care planning and positive behavioural support and governance and management.
November	CP concerned about the safeguarding of residents, personal possessions, the quality of care including care planning, healthcare, social care, positive behavioural support, falls management, communication and governance and management.
November	CP concerned about safeguarding of residents.
November	CP concerned about the quality of care including personal care, hydration, healthcare and medicines management, safeguarding, residents' rights, general welfare and development, communication and governance and management.
November	
November	CP concerned about safeguarding of residents, quality of care including care planning, healthcare, nutrition and communication.
November	CP concerned about the safeguarding and rights of residents, complaints handling and governance and management.
November	Anonymous concerned about quality of care including personal care and nutrition, residents' rights and staffing.
November	CP concerned about residents rights and quality of care including personal care.
November	Anonymous concerns in relation to safeguarding, residents rights and governance and management.
November	CP concerned about the safeguarding of residents, the quality of care including personal care, nutrition and hydration, skin integrity and healthcare and governance and management.
November	CP concerned about the safeguarding of residents, the quality of care including medicines management and governance and management.
November	CP concerned about residents' rights, the premises, infection prevention and control measures, communication, complaints handling and governance and management.
November	CP concerned about the safeguarding of residents, infection prevention and control measures and governance and management during a COVID-19 outbreak last year.

November	CP concerned about safeguarding, the quality of care including care planning, health and safety, staffing, training and staff developments and governance and management.
November	
November	CP concerned about residents rights and the quality of care including nutrition and care planning.
November	CP concerned about the safeguarding of residents, infection prevention and control measures and governance and management.
November	CP concerned about residents rights, the quality of care including personal care, the premises, infection prevention and control measures and governance and management.
November	CP concerned about safeguarding of residents, governance and management and staffing.
November	CP concerned about the safeguarding of residents, visits, the quality of care including hydration and communication.
November	CP concerned about the safeguarding of residents, the quality of care including personal care, infection prevention and control measures, staffing and governance and management.
November	CP concerned about the rights and general welfare and development of residents', the discharge process, the quality of care including personal care, staffing and communication.
November	
November	CP concerned about the safeguarding of residents, the quality of care including care planning, healthcare, medicines management and nutrition and governance and management.
November	
November	CP concerned about residents' rights, communication and governance and management.
November	
	CP concerned about the rights and general welfare and development of residents, visiting and the quality of care including social care, and governance and management.
November	

November	CP concerned about the safeguarding and rights of resident's, personal possessions, the quality of care including nutrition and hydration, falls management and health and social care, visiting, general welfare and development, complaints handling, communication and governance and management.
November	CP concerned about the safeguarding of residents, the quality of care including healthcare, infection prevention and control measures, poor communication and governance and management.
November	CP concerned about the safeguarding of residents, the quality of care including falls management and personal care and governance and management.
November	CP concerned about residents rights, personal possessions and governance and management.
November	
November	CP concerned about the safeguarding of residents, infection prevention and control measures, the quality of care including healthcare, and governance and management.
November	CP concerned about the safeguarding of residents, the quality of care including personal care and falls management and governance and management.
November	CP concerned about safeguarding of residents, quality of care including care planning, discharge and governance and management.
November	CP concerned about residents rights, staffing and governance and management.
November	CP concerned about the safeguarding of residents, the quality of care including falls management, the discharge process, communication and governance and management.
November	CP concerned about the safeguarding and rights of residents', the quality of care including end of life care, medicines management and nutrition and hydration, infection prevention and control measures and governance and management.
November	CP concerned about the safeguarding of residents, the discharge process, communication and governance and management.
November	CP concerned about the quality of care including care planning and positive behavioural support and communication.
November	CP concerned about the safeguarding and rights of residents', the quality of care including positive behavioural supports and governance and management.
November	CP concerned about the safeguarding and rights of residents', the quality of care including personal care and nutrition, health and safety and governance and management.

November	
November	CP concerned about the rights of residents, the quality of care including social care, visiting, poor communication and governance and management.
November	CP concerned about staffing and governance and management.
November	CP concerned about the safeguarding and rights of residents', quality of care including medicines management and nutrition, infection prevention and control measures and governance and management.
November	CP complimentary of the service including the quality of care provided to residents and governance and management.
November	Anonymous concern about the safeguarding of residents, the quality of care including falls management, infection prevention and control measures, staffing and governance and management.
December	CP complimentary of the service including the quality of care provided to residents including end of life care, social care, skin integrity, nutrition and governance and management.
December	
December	CP concerned about the safeguarding of residents and the premises.
December	
December	CP concerned about safeguarding, quality of care including medicines management, healthcare, hydration, discharge and governance and management.
December	
December	CP concerned about the safeguarding of residents and the quality of care including healthcare.

December	CP concerned about the safeguarding and rights of residents', personal possessions, the quality of care including personal care, hydration, and healthcare, communication, staffing and governance and management.
December	CP concerned about the safeguarding of residents, the quality of care including hydration, the discharge process, communication and governance and management.
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December	CP concerned about resident's rights and visiting.
December	CP concerned about residents rights, personal possessions, staffing and governance and management.
December	CP concerned about the safeguarding and rights of residents', the premises, health and safety, staffing and governance and management.
December	CP concerned about the safeguarding of residents, residents rights, quality of care including healthcare and governance and management.
December	CP concerned about the safeguarding of residents, quality of care including end of life care, communication and governance and management.
December	CP concerned about the safeguarding of residents.
December	CP concerned about the safeguarding of residents, the quality of care including healthcare, infection prevention and control measures and governance and management
December	CP concerned about the safeguarding and rights of residents', the quality of care including personal care and healthcare, communication and governance and management.
December	CP concerned about the safeguarding and rights of residents, visiting, the quality of care including medicines management and falls management and governance and management.

December	CP concerned about the safeguarding of residents, communication and governance and management.
December	CP complimentary of the quality of care including end of life care, communication and governance and management.
December	
December	CP concerned about the safeguarding and protection of residents.
December	CP concerned about safeguarding and residents rights, the quality of care including social care and nutrition and governance and management.
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December	CP complimentary about the quality of care, staffing and governance and management.
December	CP concerned about the safeguarding of residents.
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December	CP concerned about the safeguarding, rights and general welfare and development of residents, the quality of care including personal care, healthcare, end of life care and positive behavioural supports, visiting, communication and governance and management.
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December	CP concerned about the safeguarding and rights of residents', the quality of care including personal care and healthcare, infection prevention and control measures, communication and governance and management.
December	CP concerned about the safeguarding and rights of residents, the quality of care including personal care, care planning and falls management and governance and management.

December	CP concerned about the safeguarding of residents, the quality of care including falls management and the discharge process.
December	CP concerned about the safeguarding and rights of residents', visiting, infection prevention and control measures, poor communication and governance and management.
December	CP concerned about the safeguarding of residents, the quality of care including care planning, the discharge process, risk management, communication and governance and management.
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December	CP concerned about the safeguarding and rights of residents', the quality of care including end of life care, personal care, nutrition and hydration, communication, complaints handling and governance and management.
December	CP concerned about the safeguarding of residents, the quality of care including falls management, health and safety measures and governance and management.
December	CP concerned about the rights and general welfare of residents, the quality of care including healthcare, infection prevention and control measures, communication and governance and management.
December	CP concerned about communication and governance and management.
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December	CP concerned about safeguarding of residents the quality of care including medicines management, staffing, complaints handling and governance and management.
December	CP concerned about the safeguarding and rights of residents', complaints handling and governance and management.
December	
December	CP concerned about the safeguarding of residents, general welfare and development, quality of care including social care, staffing and governance and management.
December	CP concerned about the governance and management of centre.
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December	CP concerned about residents rights, quality of care including personal care, and governance and management.
December	CP concerned about the safeguarding of residents, the quality of care including care planning, visiting, staffing and governance and management.
December	
December	CP concerned about the safeguarding, rights and general welfare of residents, infection prevention and control measures and governance and management.
December	CP concerned about resident's rights, visiting, infection prevention and control and governance and management.
December	CP concerned about the rights and general welfare of residents, infection prevention and control measures and governance and management.
December	CP concerned about the safeguarding of residents.
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December	CP concerned about the safeguarding of residents, visiting and governance and management.
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December	CP concerned about the safeguarding of residents and health and safety.
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December	CP concerned about residents rights, premises and governance and management.
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December	CP concerned about the safeguarding, rights and general welfare of residents, visiting, staffing and governance and management.
December	CP concerned about the safeguarding, rights and general welfare of residents, personal possessions, quality of care including personal and social care, and governance and management.
December	CP concerned about the safeguarding and rights of residents, infection prevention and control measures, visiting and governance and management.
December	CP concerned about the safeguarding of residents, infection prevention and control measures and governance and management.
December	