

**Health Information and Quality Authority
Regulation Directorate**

**Compliance Monitoring Inspection report
Designated Centres under Health Act 2007,
as amended**



Centre name:	A designated centre for people with disabilities operated by St Michael's House
Centre ID:	ORG-0008557
Centre county:	Dublin 16
Email address:	eilis.mccarthy@smh.ie
Type of centre:	Health Act 2004 Section 38 Arrangement
Registered provider:	St Michael's House
Provider Nominee:	Declan Ryan
Person in charge:	Maria Parsons
Lead inspector:	Florence Farrelly
Support inspector(s):	None
Type of inspection	Unannounced
Number of residents on the date of inspection:	5
Number of vacancies on the date of inspection:	1

About monitoring of compliance

The purpose of regulation in relation to designated centres is to safeguard vulnerable people of any age who are receiving residential care services. Regulation provides assurance to the public that people living in a designated centre are receiving a service that meets the requirements of quality standards which are underpinned by regulations. This process also seeks to ensure that the health, wellbeing and quality of life of people in residential care is promoted and protected. Regulation also has an important role in driving continuous improvement so that residents have better, safer lives.

The Health Information and Quality Authority has, among its functions under law, responsibility to regulate the quality of service provided in designated centres for children, dependent people and people with disabilities.

Regulation has two aspects:

- Registration: under Section 46(1) of the Health Act 2007 any person carrying on the business of a designated centre can only do so if the centre is registered under this Act and the person is its registered provider.
- Monitoring of compliance: the purpose of monitoring is to gather evidence on which to make judgments about the ongoing fitness of the registered provider and the provider's compliance with the requirements and conditions of his/her registration.

Monitoring inspections take place to assess continuing compliance with the regulations and standards. They can be announced or unannounced, at any time of day or night, and take place:

- to monitor compliance with regulations and standards
- following a change in circumstances; for example, following a notification to the Health Information and Quality Authority's Regulation Directorate that a provider has appointed a new person in charge
- arising from a number of events including information affecting the safety or well-being of residents

The findings of all monitoring inspections are set out under a maximum of 18 outcome statements. The outcomes inspected against are dependent on the purpose of the inspection. Where a monitoring inspection is to inform a decision to register or to renew the registration of a designated centre, all 18 outcomes are inspected.

Compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

This inspection report sets out the findings of a monitoring inspection, the purpose of which was following receipt of unsolicited information. This monitoring inspection was un-announced and took place over 1 day(s).

The inspection took place over the following dates and times

From:	To:
11 December 2013 18:05	11 December 2013 20:40

The table below sets out the outcomes that were inspected against on this inspection.

Outcome 08: Safeguarding and Safety

Summary of findings from this inspection

This single issue inspection was carried out following receipt of unsolicited information by the Health Information and Quality Authority (the Authority). This was the first inspection of this centre and was carried out in the evening time when residents were present in the centre.

The unsolicited information received raised concerns in a number of areas in relation to the care and welfare of residents and the Authority requested written assurances from the provider that residents care and welfare needs were being met and that residents were safe from any form of abuse.

The purpose of this inspection was to determine if there was immediate risk to residents and to follow up on information received from the provider. As part of the inspection, the inspector met with residents and staff members, reviewed documents and took a tour of the premises. Findings from the inspection are set out under Outcome 8.

The inspector formed the view, having spoken with residents and staff and from documents reviewed, that there was no immediate risk to residents. As there were no non-compliances identified on inspection there is no action plan attached to this report.

Section 41(1)(c) of the Health Act 2007. Compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) With Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

Outcome 08: Safeguarding and Safety

Measures to protect residents being harmed or suffering abuse are in place and appropriate action is taken in response to allegations, disclosures or suspected abuse. Residents are assisted and supported to develop the knowledge, self-awareness, understanding and skills needed for self-care and protection. Residents are provided with emotional, behavioural and therapeutic support that promotes a positive approach to behaviour that challenges. A restraint-free environment is promoted.

Theme:

Safe Services

Judgement:

Compliant

Findings:

The inspector found there were measures in place to safeguard and protect residents from abuse.

The abuse policy in place was provided to the Authority prior to the inspection. On review, the policy provided sufficient information to guide staff in the steps to follow in the event of suspected or actual abuse.

The centre had capacity for six residents, there were five residents living there on a permanent basis with one bed vacant, this bed was being used for one resident who availed of respite services with a view to long-term care. During the inspection the five permanent residents were on site. Residents living in the centre were independently mobile and maintained their own independence in relation to activities of daily life.

The inspector spoke with all five residents in the centre and all stated that they felt safe and could bring any concerns to the attention of the staff. Two of the residents left the centre during the inspection to attend the Arch club for recreational purposes, both appeared relaxed and stated they were looking forward to going out. Both residents needed pocket money to attend the club and the inspector observed the staff member and the resident signing a receipt for monies removed from the resident's individual box. The inspector reviewed the system in place regarding the safeguarding and recording of three residents' finances and was satisfied that the system in place provided robust protection for residents and residents spoken with stated they were very happy with the system in place and could access their money any time they wanted.

Two of the residents showed the inspector their recently updated personal plans, the plans were in picture format and outlined goals they wanted to meet. One of the residents had identified seven areas such as going on more mini breaks, attending the Ireland vs. New Zealand rugby match and playing pool. The resident informed the

inspector that he had completed five of his seven goals and was waiting to confirm if he would be able to complete the rest.

The inspector sat at the kitchen table with three of the residents and they discussed their daily lives in the centre, all stated that they enjoyed living in the centre and could make decisions about what they wanted to do, where they wanted to go and they all felt supported by staff. They all stated that they would speak to a staff member or the person in charge if they had any concerns. They all stated that they were encouraged to live their lives as independently as possible; they described how they each had their day for doing personal laundry and cooking. They described how they had a house meeting on a Monday night and all decided on activities, menus and drew up the shopping list to include items of food they wanted to eat. Residents discussed the financial arrangements in place and stated they were happy with the arrangements and felt secure that they managed their own finances with support from staff. Following this discussion the inspector was satisfied that should any of the residents living in the centre have any concerns in any area of their lives they would be able to articulate these concerns and would bring them to the attention of the person in charge or the staff member on duty.

There were two staff in the centre during the inspection, one staff member identified herself as the person in charge at the time of the inspection and explained that the other staff member in the centre was a student on work placement. Rosters reviewed showed there were two permanent staff rostered, however one staff had called in sick.

Both staff members confirmed they had completed training in Safeguarding Service Users in recent months. Both persons were knowledgeable regarding the types of abuse and reporting structure in place should there be any concerns regarding residents' safety.

Throughout the inspection the inspector observed residents moving freely about the centre, watching television, making drinks and snacks for themselves. The interaction between residents and staff was observed to be supportive whilst encouraging the residents to maintain their own independence. Residents were encouraged to express their opinion and staff were observed to interact in a positive friendly manner at all times.

At the end of the inspection the inspector formed a view that there were systems in place to protect residents, staff on duty were trained in adult protection and knew the residents well and the residents themselves stated they felt safe and well supported by staff.

Closing the Visit

At the close of the inspection a feedback meeting was held to report on the inspection findings, which highlighted both good practice and where improvements were required.

Acknowledgements

The inspector wishes to acknowledge the cooperation and assistance of the residents, relatives, and staff during the inspection.

Report Compiled by:

Florence Farrelly
Inspector of Social Services
Regulation Directorate
Health Information and Quality Authority