| **Centre name:** | A designated centre for people with disabilities operated by St Paul's Child and Family Care Centre Limited |
| **Centre ID:** | OSV-0003766 |
| **Centre county:** | Dublin 9 |
| **Type of centre:** | Health Act 2004 Section 39 Assistance |
| **Registered provider:** | St Paul's Child and Family Care Centre Limited |
| **Provider Nominee:** | Mary Day |
| **Lead inspector:** | Bronagh Gibson |
| **Support inspector(s):** | Una Coloe |
| **Type of inspection** | Announced |
| **Number of residents on the date of inspection:** | 4 |
| **Number of vacancies on the date of inspection:** | 0 |
**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.
This inspection report sets out the findings of a monitoring inspection, the purpose of which was to monitor ongoing regulatory compliance. This monitoring inspection was announced and took place over 1 day(s).

**The inspection took place over the following dates and times**

From: 04 December 2014 09:30  
To: 04 December 2014 12:30

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

| Outcome 05: Social Care Needs | Outcome 07: Health and Safety and Risk Management |

**Summary of findings from this inspection**

This was the third inspection of this centre by the Authority. The purpose of this inspection was to ensure an adequate and safe response to immediate actions required following a registration inspection carried out on 12 November 2014.

The Authority carried out a registration inspection of this centre on the 12 and 13 of November 2014 and found serious safety risks to children including a poor quality and unsafe environment in its residential unit. Immediate actions were required in relation to significant risks to children from exposure to very hot radiators and very hot water. The Authority took the unusual step of issuing an immediate action plan and the provider took serious steps to address the situation. These actions resulted in significant changes for children using the service. The purpose of this inspection was to assess the management of these changes and their impact on the safety of children. As part of this inspection inspectors met with the person in charge, reviewed centre documents and reports and observed the premises.

Actions taken by the provider in response to the immediate action plan had both a positive and negative impact on children. Changes to the level of respite services being offered due to a reduction in the number of premises from which services were operated was found to have been well managed, and staff had reacted in a child centered manner to these changes.

At the time of the registration inspection, the designated centre consisted of four units on four different sites. Three units were located in the community and each provided four respite services places on any given night. There was a residential unit for four children that operated from an older building in a campus style setting. At the time of this follow-up inspection, the residential unit was no longer in operation and children in residential placements were moved to one of the units in the...
community.

Inspectors found that despite immediate actions taken by the provider, children remained at significant risk from exposure to very hot water in some of the units. A second immediate action plan was issued to the provider as a result. These matters were resolved within days of this inspection and inspectors were assured that outstanding works would be completed by 12 December 2014. Progress continued to be monitored by the Authority.
Outcome 05: Social Care Needs

Each resident’s wellbeing and welfare is maintained by a high standard of evidence-based care and support. Each resident has opportunities to participate in meaningful activities, appropriate to his or her interests and preferences. The arrangements to meet each resident’s assessed needs are set out in an individualised personal plan that reflects his /her needs, interests and capacities. Personal plans are drawn up with the maximum participation of each resident. Residents are supported in transition between services and between childhood and adulthood.

Theme:
Effective Services

Outstanding requirement(s) from previous inspection(s):
The action(s) required from the previous inspection were satisfactorily implemented.

Findings:
The unit visited by inspectors was community based and had originally catered for children on respite breaks, and training programmes had been delivered from this unit on a daily basis. As the provider had ceased operations from the residential unit, children on residential placements were moved to this community based unit. Respite services and training programmes were currently being delivered from the two remaining community based units.

Inspectors found that these changes were managed in a sensitive way, in as much as was possible, given that this was a rapid response to risk. Reports provided to inspectors showed that consideration was given to how change would impact on individual children and their behaviour. Records contained transition plans which identified possible reactions to change from children and how they were to be managed. Reports read by inspectors showed that children were prepared verbally and through the use of visual supports prior to the move. The person in charge told inspectors that the children now living in the unit had reacted well and liked it. She said that anticipated problems did not materialise and children had benefited overall from the move. Centre records showed that community based activities and outings had increased for children and this was positive. The person in charge and two staff members said that the premises and its location in the community supported them to create a family type environment that was not possible in the previous unit.

There were concerns during the registration inspection on how children’s behaviour impacted on each other and inspectors found that the move to a community based setting had reduced incidents of peer to peer aggression. The person in charge said that this was due to the space available to children and increased involvement in individual
activities that kept them occupied. The person in charge said that there were no reported incidents of aggression between peers since the move.

Children’s records and planning documents were moved safely to the new premises and updated to reflect their needs during and following the move. Changes were made to the premises to ensure children’s privacy was promoted as neighbours could see into some of the bedrooms. Careful consideration was given to how bedrooms would be allocated based on individual children’s needs. The staff had ensured that visual supports were in place around the unit before the children moved in in order to orientate them.

Transitions were also planned for children who had availed of respite breaks and day programmes in this unit. These services were re-located to two other units and visits from these children were facilitated to assist them cope with change.

Parents were contacted and told about changes in the use of premises and care arrangements. The parents of children living in the unit had visited to assist their children with the move.

**Judgment:**
Compliant

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**Outcome 07: Health and Safety and Risk Management**

*The health and safety of residents, visitors and staff is promoted and protected.*

**Theme:**
Effective Services

**Outstanding requirement(s) from previous inspection(s):**
Some action(s) required from the previous inspection were not satisfactorily implemented.

**Findings:**
Children remained at risk from tap water and radiator temperatures that were too hot. Systems in place to manage these risks were ineffective.

In preparation for the transition of residential services to a new unit, risk assessments were carried out in relation to individual children and the unit itself. Unit risk assessments showed that risks identified included a new living environment where children would not be familiar with evacuation plans, the requirement for window restrictors, use of locks on some exit doors and hazards associated with accessibility of the kitchen to children. On a walk around the unit inspectors found locks had been fitted were necessary for safety reasons and restrictors were fitted to windows.

The unit risk assessment identified the need for regulators on heat and water temperatures. These had been ordered and in the interim, staff were to control radiator temperatures through a temperature control located in the hallway. However, the
person in charge said that this was not effective as children had tampered with this control. She said that a cover was to be placed over the control and this had been ordered. On a walk around the unit, inspectors found that work men were on-site and were attending to works in relation to the heating and water system amongst other things. However, when inspectors tested tap water temperatures in the kitchen and communal bathroom they were found to be very hot and posed an immediate risk to children. The person in charge told inspectors that this was not reported to her as a risk by staff. One staff member told inspectors that they had not noticed the too hot temperature of the water in the kitchen. The person in charge told inspectors that there was no routine monitoring of tap water temperature despite works not being completed to eradicate this risk. A second immediate action plan was issued to the provider as a result. Following a response from the person in charge, the Authority was satisfied that essential works had taken place in the unit and would be completed in two other units to bring radiator and water temperatures to an acceptable and safe level. A monitoring system was put in place in the interim.

Measures were taken against the risk of fire but they were not adequate. Prior to the move, the child care leader for the unit identified several fire related risks. These included the need for fire retardant curtains in certain areas, fire evacuation signage to be posted strategically around the unit and a fire drill and evacuation to be carried out immediately after the admission of the children. Risk assessments provided to inspectors showed that a fire drill and evacuation of the premises had taken place on 3 December 2014. A walk around the unit showed that works in relation to fire safety were underway, such as the installation of emergency lighting. In the event of an evacuation, the identified assembly point was a green area opposite the unit. The person in charge told inspectors this was the case for all of the community based units. Access to this area was through the front door or a side door from the back garden. However, the side door was locked at all times and there was one key that was held by a team leader on shift. This meant that in the event of an evacuation, not all staff had the capacity to leave the back garden and bring children safely to the assembly point. The person in charge told inspectors that the fire officer had not visited the centre but this was planned and that all risks associated with fire would be reported on to centre managers.

Judgment:
Non Compliant - Moderate

Closing the Visit

At the close of the inspection a feedback meeting was held to report on the inspection findings.

Acknowledgements

The inspector wishes to acknowledge the cooperation and assistance of all the people who participated in the inspection.
Report Compiled by:

Bronagh Gibson
Inspector of Social Services
Regulation Directorate
Health Information and Quality Authority
Centre name: A designated centre for people with disabilities operated by St Paul’s Child and Family Care Centre Limited
Centre ID: OSV-0003766
Date of Inspection: 04 December 2014
Date of response: 06 January 2015

Requirements

This section sets out the actions that must be taken by the provider or person in charge to ensure compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

All registered providers should take note that failure to fulfil your legal obligations and/or failure to implement appropriate and timely action to address the non-compliances identified in this action plan may result in enforcement action and/or prosecution, pursuant to the Health Act 2007, as amended, and Regulations made thereunder.

Outcome 07: Health and Safety and Risk Management

Theme: Effective Services

The Registered Provider is failing to comply with a regulatory requirement in the following respect:
Works required in relation to too hot radiator and water temperatures in all centres was planned but not completed at the time of the inspection fieldwork.

A system of monitoring water and radiator temperatures was put in place and required full implementation.

1 The Authority reserves the right to edit responses received for reasons including: clarity; completeness; and, compliance with legal norms.
**Action Required:**
Under Regulation 26 (2) you are required to: Put systems in place in the designated centre for the assessment, management and ongoing review of risk, including a system for responding to emergencies.

**Please state the actions you have taken or are planning to take:**
In addition to the immediate action plan the following was undertaken:

1. Within the three domestic dwellings the following has been completed:
   - Anti-scald valves placed on taps on the sinks and baths in the domestic dwellings.
   - Temperature regulators have been fitted to all radiators in the domestic dwellings which give the function of restricting the temperature locally to each radiator.
   - Hand held temperature probes and thermostats purchased to facilitate weekly checks as a control measure should the domestic hot water or heating system exceed the maximum temperatures.
   - Radiator covers have been fitted to standard size radiators with the exception of five radiators which require customised fittings to be sourced.
   - A cover is no longer required on the hall thermostat in light of the above fixtures.
   - A designated contractor is commissioned to respond to all maintenance emergencies.

**Proposed Timescale:** 14/01/2015

**Theme:** Effective Services

The Registered Provider is failing to comply with a regulatory requirement in the following respect:
Not all staff had a key to the side gate in the event of an evacuation.

**Action Required:**
Under Regulation 28 (3) (d) you are required to: Make adequate arrangements for evacuating all persons in the designated centre and bringing them to safe locations.

**Please state the actions you have taken or are planning to take:**
All staff are assigned a key to all locked exit points in the event of an evacuation. - Completed

**Proposed Timescale:** 06/01/2015