

**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 John of God Community Services Limited
Centre ID:	OSV-0005315
Centre county:	Kildare
Type of centre:	Health Act 2004 Section 38 Arrangement
Registered provider:	St John of God Community Services Limited
Provider Nominee:	Michael Stokes
Lead inspector:	Julie Pryce
Support inspector(s):	None
Type of inspection	Unannounced
Number of residents on the date of inspection:	0
Number of vacancies on the date of inspection:	4

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, 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.

This inspection report sets out the findings of a monitoring inspection, the purpose of which was to inform a registration decision. This monitoring inspection was un-announced and took place over 1 day(s).

The inspection took place over the following dates and times

From: 04 December 2015 09:30 To: 04 December 2015 15:00

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

Outcome 01: Residents Rights, Dignity and Consultation
Outcome 02: Communication
Outcome 03: Family and personal relationships and links with the community
Outcome 04: Admissions and Contract for the Provision of Services
Outcome 05: Social Care Needs
Outcome 06: Safe and suitable premises
Outcome 07: Health and Safety and Risk Management
Outcome 08: Safeguarding and Safety
Outcome 09: Notification of Incidents
Outcome 10. General Welfare and Development
Outcome 11. Healthcare Needs
Outcome 12. Medication Management
Outcome 13: Statement of Purpose
Outcome 14: Governance and Management
Outcome 15: Absence of the person in charge
Outcome 16: Use of Resources
Outcome 17: Workforce
Outcome 18: Records and documentation

Summary of findings from this inspection

This registration was conducted following an application by St John of God Kildare Services to register a designated centre under the Health Act 2007. The centre is a newly acquired community based home, which was unoccupied at the time of inspection, in to which it is intended that four residents from another nearby centre will move.

The centre is a large semi- detached five bedroom home in a community location near to many community amenities and public transport.

Considerable work had been done to prepare the centre for occupation, to facilitate

the choice of proposed residents, and to plan for the transition. There was evidence that extensive consultation had taken place with the potential residents and their families. Residents had been supported to visit their new home and had the opportunity to spend time there, and some residents had begun to move their personal belongings into their rooms.

The proposed designated centre achieved compliance in all of the regulations. There were no actions required following this inspection.

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, 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.

Outcome 01: Residents Rights, Dignity and Consultation

Residents are consulted with and participate in decisions about their care and about the organisation of the centre. Residents have access to advocacy services and information about their rights. Each resident's privacy and dignity is respected. Each resident is enabled to exercise choice and control over his/her life in accordance with his/her preferences and to maximise his/her independence. The complaints of each resident, his/her family, advocate or representative, and visitors are listened to and acted upon and there is an effective appeals procedure.

Theme:

Individualised Supports and Care

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The organisation has a policy guiding the management of complaints and the procedure was displayed in an accessible location in the designated centre. The programme manager of the service will be the complaints officer, and the person in charge outlined the steps that will be taken should any complaints be received.

It is intended that each residents will each have their own bedroom which and there was evidence that the residents who have been identified to move into the centre were consulted in all aspects of their transition including choosing the decoration for their own bedroom. Minutes of meetings also demonstrated that family members had been consulted.

There was evidence of the promotion of the rights of residents, for example, a rights review committee was in place in the organisation, and a rights awareness checklist had been completed and maintained in the personal file of each resident.

Judgment:

Compliant

Outcome 02: Communication

Residents are able to communicate at all times. Effective and supportive interventions are provided to residents if required to ensure their communication needs are met.

<p>Theme: Individualised Supports and Care</p>
<p>Outstanding requirement(s) from previous inspection(s): This was the centre's first inspection by the Authority.</p> <p>Findings: The assessment conducted for each resident included the communication needs of residents and where there were additional needs a communication passport was in place.</p> <p>There was a television and radio in the centre and arrangements for internet access.</p> <p>A speech and language therapist has been involved with one of the residents in relation to enhancing communication and facilitating choice, for example by the use of an application on the resident's tablet.</p>
<p>Judgment: Compliant</p>

<p>Outcome 03: Family and personal relationships and links with the community <i>Residents are supported to develop and maintain personal relationships and links with the wider community. Families are encouraged to get involved in the lives of residents.</i></p>
<p>Theme: Individualised Supports and Care</p>
<p>Outstanding requirement(s) from previous inspection(s): This was the centre's first inspection by the Authority.</p> <p>Findings: There was clear evidence of family involvement in the plans for the centre. This involvement was documented in transition plans and in planning meetings.</p> <p>Links with the community had already been forged for those residents identified to move into the centre, as their previous home was in the same locality. The person in charge outlined the plans to maintain these links and to build on them, for example to facilitate one of the residents to engage in a role in the local church.</p>
<p>Judgment: Compliant</p>

Outcome 04: Admissions and Contract for the Provision of Services

Admission and discharge to the residential service is timely. Each resident has an agreed written contract which deals with the support, care and welfare of the resident and includes details of the services to be provided for that resident.

Theme:

Effective Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

There is a policy in place for the admissions, including transfers and discharge of residents. In addition there were thorough transition plans for each resident on order to facilitate the move to the new house.

A contract of care had been developed which outlined the services offered to residents, and any charges incurred. The person in charge outlined the plan to have all these contracts signed prior to the move to the house.

Judgment:

Compliant

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):

This was the centre's first inspection by the Authority.

Findings:

Although there were no residents yet residing in the centre, personal plans were already in place for those who had been identified to move into the new home.

Each personal plan included a thorough assessment of need, including social care needs, and a plan based on these assessed needs. There was also a detailed transition plan, and evidence that these plans had been implemented. For example, residents had frequently visited the new house, and occasionally had meals there. Each identified

resident had chosen their own bedroom, had been consulted in the decor of the bedroom, and had begun to move in personal items.

Personal plans also included plans to introduce residents to the use of community facilities, and to learning new skills such as domestic skills. These plans were available in versions accessible to residents, for example pictures of domestic facilities, and pictorial representation of the journey to community living.

The person in charge outlined the plans to ensure a meaningful day for residents. This included continuing to facilitate current activities and plans to gradually introduce the choice of new activities.

Judgment:

Compliant

Outcome 06: Safe and suitable premises

The location, design and layout of the centre is suitable for its stated purpose and meets residents individual and collective needs in a comfortable and homely way. There is appropriate equipment for use by residents or staff which is maintained in good working order.

Theme:

Effective Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The proposed designated centre was a large, spacious semi-detached house in a location appropriate to the assessed needs of those residents who had been identified to move into the centre.

There were five bedrooms, one of which was allocated as a staff sleepover room. The other four bedrooms were spacious and nicely decorated and two of them had ensuite bathrooms. There was also a large family bathroom and a downstairs WC.

There was a large open plan living/dining room and kitchen which was fully furnished. The furnishings and decor throughout the house were of a high standard. There was a large enclosed back garden, and space at the front of the house for parking.

The location of the house was such that shops and pubs were within walking distance, and there was public transport nearby.

Judgment:

Compliant

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<p>Outcome 07: Health and Safety and Risk Management <i>The health and safety of residents, visitors and staff is promoted and protected.</i></p>
<p>Theme: Effective Services</p>
<p>Outstanding requirement(s) from previous inspection(s): This was the centre’s first inspection by the Authority.</p> <p>Findings: Arrangements had been made in relation to fire safety. Emergency lighting was in place, as was an alarm and fire safety equipment. Certificates of compliance of all equipment were available. A personal evacuation plan was in place for each resident in relation to their current home, and the person in charge undertook to conduct a fire drill with residents while on a visit to the house prior to their moving in date, and to update the evacuation plans as required.</p> <p>Site specific health and safety statement had been prepared, and various risk assessments had been completed, including environmental risks and individual risks.</p> <p>Appropriate arrangements had been made for the storage of cleaning equipment and products.</p>
<p>Judgment: Compliant</p>

<p>Outcome 08: Safeguarding and Safety <i>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.</i></p>
<p>Theme: Safe Services</p>
<p>Outstanding requirement(s) from previous inspection(s): This was the centre’s first inspection by the Authority.</p> <p>Findings: Arrangements had been made in relation to the safeguarding of residents. There was a policy in place in relation to the protection of vulnerable adults, and any staff who were</p>

already identified had received training in the protection of vulnerable adults. Proposed staff engaged by the inspector displayed appropriate knowledge in relation to abuse and their role in the protection of vulnerable adults.

There were plans in relation to the management of residents' finances, including the management of bank accounts, and safe storage of personal money.

No restrictive interventions had been identified.

Judgment:

Compliant

Outcome 09: Notification of Incidents

A record of all incidents occurring in the designated centre is maintained and, where required, notified to the Chief Inspector.

Theme:

Safe Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The person in charge was aware of her responsibilities in relation to required notifications to the Authority.

Judgment:

Compliant

Outcome 10. General Welfare and Development

Resident's opportunities for new experiences, social participation, education, training and employment are facilitated and supported. Continuity of education, training and employment is maintained for residents in transition.

Theme:

Health and Development

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Whilst there were as yet no residents in the centre, the person in charge outlined plans in relation to ensuring a meaningful day for residents, and in relation to maximising the

potential of proposed residents, as discussed under outcome 5.

Judgment:

Compliant

Outcome 11. Healthcare Needs

Residents are supported on an individual basis to achieve and enjoy the best possible health.

Theme:

Health and Development

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Those residents who had been identified as moving into the centre had each recently moved to the care of a community general practitioner. Arrangements had also been made for an out of hours GP service. They were also accessing other healthcare professionals in the community, for example, chiropodist, dentist and optician.

Each resident's personal plan included an annual health assessment, and healthcare plans for all identified healthcare needs, for example, coeliac and dysphagia.

In preparation for the move to the centre, residents had begun to be involved in menu planning in their current centre. These preparations included aids to choice making, such as pictures of shopping and food. They has also already had meals and snacks in the house.

Judgment:

Compliant

Outcome 12. Medication Management

Each resident is protected by the designated centres policies and procedures for medication management.

Theme:

Health and Development

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The proposed structures and processes in relation to medication management were outlined by the person in charge. Samples of proposed documentation were presented, and both a policy and a local protocol regarding the management of medication were available.

Appropriate and safe storage for medications had been arranged.

The pharmacist supplying medications had agreed to conduct audits, and to be available for advice, and the person in charge outlined her plans to conduct internal audits.

Judgment:

Compliant

Outcome 13: Statement of Purpose

There is a written statement of purpose that accurately describes the service provided in the centre. The services and facilities outlined in the Statement of Purpose, and the manner in which care is provided, reflect the diverse needs of residents.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

A statement of purpose had been prepared which contained all the information required by the regulations.

Judgment:

Compliant

Outcome 14: Governance and Management

The quality of care and experience of the residents are monitored and developed on an ongoing basis. Effective management systems are in place that support and promote the delivery of safe, quality care services. There is a clearly defined management structure that identifies the lines of authority and accountability. The centre is managed by a suitably qualified, skilled and experienced person with authority, accountability and responsibility for the provision of the service.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

There was a clearly defined management structure in place. The person in charge and the provider outlined a system of meetings at various levels within this structure, and described how these meetings would be conducted and recorded. Minutes were available of meetings held in relation to planning the transition to the new centre.

The person in charge had prepared a series of audits including audits of personal plans, residents' finances and medication management. The provider gave assurances that six monthly unannounced visits would be conducted on his behalf, as required by the regulations.

The person in charge was suitably qualified, skilled and experienced. She was currently the person in charge in another designated centre, and had engaged appropriately with the Authority. She demonstrated commitment to developing and maintaining good standards of care and support in the centre. She had shown appropriate leadership skills in the transition process, and was clearly aware of her responsibilities under the regulations.

Judgment:

Compliant

Outcome 15: Absence of the person in charge

The Chief Inspector is notified of the proposed absence of the person in charge from the designated centre and the arrangements in place for the management of the designated centre during his/her absence.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

There were appropriate arrangements in relation to the absence of the person in charge. No absences were currently anticipated.

Judgment:

Compliant

Outcome 16: Use of Resources

The centre is resourced to ensure the effective delivery of care and support in accordance with the Statement of Purpose.

Theme:

Use of Resources

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied that the centre appeared to be appropriately resourced. It was nicely furnished, equipped and decorated. A sample roster was available, and the suggested staffing levels were appropriate to the needs of those residents who had already been identified to move into the house.

Judgment:

Compliant

Outcome 17: Workforce

There are appropriate staff numbers and skill mix to meet the assessed needs of residents and the safe delivery of services. Residents receive continuity of care. Staff have up-to-date mandatory training and access to education and training to meet the needs of residents. All staff and volunteers are supervised on an appropriate basis, and recruited, selected and vetted in accordance with best recruitment practice.

Theme:

Responsive Workforce

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

A proposed staff roster was available, and appropriate number and skill mix had been identified within a shift system designed to meet the needs of residents, including social care needs.

There was an emphasis on continuity of care, and both the person in charge and a number of staff were currently working in the designated centre form which the residents would be moving. Staff engaged by the inspector were familiar with the residents, and could describe their assessed needs and the plans to meet these needs.

Staff files and volunteer files examined by the inspector contained all the information required by the regulations.

Judgment:

Compliant

Outcome 18: Records and documentation

The records listed in Part 6 of the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 are maintained in a manner so as to ensure completeness, accuracy and ease of retrieval. The designated centre is adequately insured against accidents or injury to residents, staff and visitors. The designated centre has all of the written operational policies as required by Schedule 5 of the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013.

Theme:

Use of Information

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

All the policies required in schedule 5 of the regulations were in place and available in the centre. A residents' guide had been developed, and the template for the directory of residents was presented.

Judgment:

Compliant

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:

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