# **Health Information and Quality Authority Regulation Directorate**

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



Centre name:	Mullaghmeen Centre 2
Centre ID:	OSV-0005477
Centre county:	Westmeath
Type of centre:	Health Act 2004 Section 38 Arrangement
Registered provider:	Muiríosa Foundation
Provider Nominee:	Josephine Glackin
Lead inspector:	Louise Renwick
Support inspector(s):	None
Type of inspection	Announced
Number of residents on the date of inspection:	6
Number of vacancies on the date of inspection:	2

### **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 following an application to vary registration conditions. This monitoring inspection was announced and took place over 1 day(s).

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

From: To:

25 January 2017 09:00 25 January 2017 10:30

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

Outcome 06: Safe and suitable premises

Outcome 07: Health and Safety and Risk Management

#### **Summary of findings from this inspection**

Background to the inspection:

The designated centre was registered in October 2016 and comprised of one large bungalow. This inspection was following an application to vary the conditions of the registration to allow for an additional building to be included under the service which would cater for an additional two residents. A high level of compliance was found on the previous inspection, with strong governance and management systems evident and an agreed action plan was submitted which assured HIQA that any areas for improvement identified would be addressed.

#### Description of the service:

The written statement of purpose outlines that this centre will consist of two units. One a large detached bungalow catering for six residents, and one a large bungalow which has two self contained apartments which would cater for two residents. The centre offers services for residents over the age of 18 requiring support with moderate to high intellectual disability, high dependency needs, sensory impairments, autism spectrum disorder, behaviours of concern and mental health needs.

How we gathered our evidence:

The inspector visited the new unit as part of this inspection, and met with the person in charge and senior manager. The inspector reviewed documentary and photographic evidence such as care plans, transition plans, risk assessments, behaviour support plans and health and safety documentation.

#### Overall findings:

The purpose of this inspection was to visit the new premises and ensure that they met the requirement of Schedule 6 of the Regulations and were suitable to meet the needs of the proposed residents. The inspector also reviewed outcome 7 health and safety and risk management and determined that the provider was in compliance with the regulations and standards under both of these outcomes.

The person in charge and wider team had put significant work into the safe and planned transition of residents, with a clear process evident to identify, assess and manage any potential risks while ensuring residents had the appropriate skills to promote their independence. The expansion of the designated centre to two units allowed for greater independence for two residents, and a more suitable provision of care and support in line with their assessed needs.

Findings are under the two outcome headings, with no actions identified.

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 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):**

No actions were required from the previous inspection.

#### **Findings:**

The inspector determined that the design and layout of the new unit of the centre was in line with the assessed needs of residents. The location was within walking distance to local amenities and would promote community integration.

The bungalow was divided into two separate self contained apartments both of which were on one level and wheelchair accessible. One apartment was located at the back of the premises and had a large private bedroom with en suite facilities for a resident, a staff office/ bedroom, communal bathroom, hallway and an open plan living space with kitchen cum dining area. There were two exits from the apartment to the outside with ramps where necessary and handrails for ease of access. The garden yard had been installed with a frame for a swing and a shed had been ordered for storage.

The second apartment had a bright hallway, large bedroom for a resident with own door patio doors to the yard area, an accessible wet room bathroom, and an open plan living space with kitchen cum dining area. There was an ajoining door between the two apartments for the event of an emergency should it be required, but this was not an access point and served for emergency reasons only.

The inspector found that the premises were finished to a high standard, bright and well ventilated and had a suitable heating system. It was equipped with necessary appliances and each apartment would have its own transport for residents' use.

The inspector saw the lease agreement between the provider and the private landlord, outlining an agreement for a period of five years.

An assessment of the environment had been carried out by members of the multidisciplinary team to ensure the provider was promoting accessibility and catering

for residents' individual needs.

The inspector was satisfied that the requirements of Schedule 6 had been met, and the centre was suitable to meet the assessed needs of residents.

#### Judgment:

Compliant

#### **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):**

No actions were required from the previous inspection.

# **Findings:**

The inspector found that the health and safety of residents, staff and visitors had been planned for and promoted in the new unit of the designated centre.

Safe systems to monitor the health and safety and environmental risks were in place in this unit. There was a written safety statement and a risk register for both environmental and individual risks for residents. The person in charge and multidisciplinary team had been involved in assessing risks for the potential residents on the move into the centre in relation to road safety, smoking and the transition itself.

The inspector found appropriate fire detection and alarm systems were installed and certified by a relevant fire professional, along with emergency lighting and fire doors throughout the building. There were safety measures in place for the daily and weekly safety checks in relation to fire, and a contract was in place for quarterly reviews of all alarm and lighting equipment. Fire fighting equipment had also been installed and would be checked annual. Residents had personal evacuation plans which would be reviewed once a drill had taken place in their new home.

# **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:

Louise Renwick Inspector of Social Services Regulation Directorate Health Information and Quality Authority