



# Report of an inspection of a Designated Centre for Disabilities (Children)

Name of designated centre:	St Paul's Dromawling
Name of provider:	St. Paul's Child and Family Care Centre Designated Activity Company
Address of centre:	Dublin 9
Type of inspection:	Announced
Date of inspection:	07 May 2019
Centre ID:	OSV-0003768
Fieldwork ID:	MON-0022666

## About the designated centre

The following information has been submitted by the registered provider and describes the service they provide.

The service provided was described in the provider's statement of purpose, dated March 2019. The centre provided a respite service for five children between the ages of 8 and 18 years. A maximum of four children attended at any one time. Since the last inspection, the service had been remodelled to provide up to three nights respite per week for children assessed as requiring an extended respite service versus the previous one night per week. This had necessitated 10 children being transferred to another centre and two children being admitted to this centre. The composition of children's groups attending together for respite was influenced by age, peer suitability, dependency levels and gender mix. Two children who availed of respite in the centre attended on their own due to their assessed needs but attempts were being made to identify if a peer could be compatible to avail of respite on the same days as these children. On the day of inspection, there were two children availing of respite. Each of the children had their own bedroom, with adequate storage facilities and there was adequate communal space in the centre which included a well equipped sensory room. There was a well proportioned garden to the rear of the centre with a seating area, swing, slide and other play equipment for children to play with. The purpose of this inspection was to monitor the providers compliance with the regulations and to inform an application by the provider to the re registration of the centre. The provider is a limited company with its own board which is closely associated with a large teaching hospital. The chief executive officer of the hospital chairs the board of the service, which in turn reports into the board of the hospital. The hospital provides support services to the centre, such as human resources, risk management and payroll function.

**The following information outlines some additional data on this centre.**

Number of residents on the date of inspection:	2
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## How we inspect

To prepare for this inspection the inspector or inspectors reviewed all information about this centre. This included any previous inspection findings, registration information, information submitted by the provider or person in charge and other unsolicited information since the last inspection.

As part of our inspection, where possible, we:

- speak with residents and the people who visit them to find out their experience of the service,
- talk with staff and management to find out how they plan, deliver and monitor the care and support services that are provided to people who live in the centre,
- observe practice and daily life to see if it reflects what people tell us,
- review documents to see if appropriate records are kept and that they reflect practice and what people tell us.

In order to summarise our inspection findings and to describe how well a service is doing, we group and report on the regulations under two dimensions of:

### **1. Capacity and capability of the service:**

This section describes the leadership and management of the centre and how effective it is in ensuring that a good quality and safe service is being provided. It outlines how people who work in the centre are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service.

### **2. Quality and safety of the service:**

This section describes the care and support people receive and if it was of a good quality and ensured people were safe. It includes information about the care and supports available for people and the environment in which they live.

A full list of all regulations and the dimension they are reported under can be seen in Appendix 1.

**This inspection was carried out during the following times:**

Date	Times of Inspection	Inspector	Role
07 May 2019	10:00hrs to 15:00hrs	Maureen Burns Rees	Lead

## Views of people who use the service

As part of the inspection, the inspector met briefly with the two children availing of respite on the day of inspection. Although the children were unable to tell the inspector their views of the service, warm interactions between the children and staff caring for them were observed. Both of the children were in high spirits and appeared to be enjoying spending time in the company of staff and in the centres sensory room. Each child, availing of respite, had a full time school placement, with a number of the children attending a school affiliated with the provider. Staff spoken with outlined how they considered that the centre met each of the children's care and support needs whilst they were availing of respite.

There was evidence the children, and their family representatives, were consulted and communicated with, about decisions regarding the care provided and the running of their house. The inspector did not have an opportunity to meet with the parents of any of the children attending for respite but it was reported that they were happy with the service provided. The parents of one of the children completed a questionnaire from the Office of the Chief Inspector which indicated that they were happy with the quality of care which their child received whilst availing of respite in the centre.

## Capacity and capability

There were management systems in place to ensure that the service provided was safe, consistent and appropriate to the children's needs.

The centre had two named persons in charge, on a job sharing basis to fill a whole-time position. The governance, operational management and administration of the centre was overseen by the persons in charge. One of the persons in charge had been in the position for more than four years. The other person in charge had taken up the position in April 2019 as an interim role whilst the previous person in charge had taken up the position of the interim director of service to cover a leave period. Both of the persons in charge held a management qualification and had suitable management experience. Staff members spoken with told the inspector that the persons in charge supported them in their role and supported a culture of openness where the views of all involved in the service were sought and taken into consideration.

There was a clearly defined management structure in place that identified lines of accountability and responsibility. This meant that all staff were aware of their responsibilities and who they were accountable to. The persons in charge, worked

opposite each other on a one week rotational basis with face to face handover one day per week. The persons in charge reported to the interim director of service who in turn reported to the chief executive officer of the hospital associated with the service. There was evidence that the interim director of service, who had recently taken up the post, had visited the centre and proposed to visit at regular intervals to assure herself of the quality of the service being provided.

The provider had completed an annual review of the quality and safety of services and unannounced visits to assess the quality and safety of the service as required by the regulations. There was evidence that a number of audits had been completed on a regular basis. Examples of these audits included, hygiene and environmental, health and safety, person centred plans, incident categorisation, medication management, fire, behaviour interventions, restrictive practices and supervision. There was evidence that actions were taken to address issues identified in these audits.

There was a recruitment and selection policy, dated September 2018. The full complement of staff were in place and had worked in the centre for a satisfactory period. The staff team were found to have the right skills, qualifications and experience to meet the assessed needs of the children availing of respite. There was an actual and planned staff rota in place which was well maintained.

Training had been provided to staff to support them in their role and to improve outcomes for the children availing of respite. There was a staff training and development policy, dated August 2018. Additional specific training had been provided for staff to assist them in care for children with specific needs. A training programme was in place which was coordinated centrally. There were no volunteers working in the centre at the time of inspection.

There were suitable staff supervision arrangements in place. There was a supervision policy in place, dated August 2017. The inspector reviewed a sample of staff supervision files for supervision completed by each of the persons in charge and found they were of a good quality and undertaken in line with the frequency proposed in the providers policy. This was considered to support staff to perform their duties to the best of their abilities.

#### Regulation 14: Persons in charge

The centre had two named persons in charge, on a job sharing basis to fill a whole time position. The persons in charge were found to be competent, with appropriate qualifications and management experience to manage the centre and to ensure it met its stated purpose, aims and objectives.

Judgment: Compliant

### Regulation 15: Staffing

The full complement of staff were in place and found to have the right skills, qualifications and experience to meet the assessed needs of the children availing of respite.

Judgment: Compliant

### Regulation 16: Training and staff development

Training had been provided for staff to improve outcomes for the children availing of respite in the centre. Staff received appropriate supervision to support them to perform their duties to the best of their abilities.

Judgment: Compliant

### Regulation 23: Governance and management

The governance and management systems in place promoted the delivery of a high quality and safe service.

Judgment: Compliant

### Regulation 3: Statement of purpose

The centre had a publicly available statement of purpose, dated March 2019, that accurately and clearly described the services provided.

Judgment: Compliant

### Regulation 31: Notification of incidents

There were systems in place for the recording and management of all incidents. All required incidents were notified to the chief inspector as per the requirements of the regulations.

Judgment: Compliant

## Quality and safety

The children availing of respite in the centre received care and support which was of a good quality, person centred and promoted their rights.

The children's well-being and welfare was maintained by a good standard of evidence-based care and support. Personal support plans in place reflected the assessed needs of the individual children and outlined the support required to maximise their personal development in accordance with their individual health, personal, communication and social needs and choices. 'Vision' and 'daily living' goals were set for each child. There was evidence that progress in achieving these goals was monitored at regular intervals. Goal daily progress notes were maintained. Personal plans in place were reviewed at regular intervals with the involvement of the children's multidisciplinary team, the child and family representatives. Transition plans had been put in place for children transitioning from this centre and for the two children being admitted to the centre. Overall, the transition of children appeared to have gone well with the two new children admitted to this centre being well settled on their respite stays.

Children were each supported to engage in meaningful activities in the centre and within the community. Each child attended a school placement with a small number of the children attending a school affiliated with the provider. Individual education plans were available on a sample of files reviewed by the inspector and it was noted that staff were supporting children to adhere to these plans. This promoted consistency for the children whether in school, home or respite. There was a good range of craft materials and board games available in the centre. Examples of other activities that children engaged in during their respite stay included, outings on public transport, cinema, home cooking, bowling, walks in number of local parks, meals out and shopping trips. There was a nice sized garden to the rear of the centre which had a number of play and recreational facilities including swings, slide and seating area. A record was maintained of activities that children engaged in.

Children were assisted and supported to communicate in accordance with their needs and wishes. There was a policy on communication. Individual communication requirements were highlighted in children's personal plans and reflected in practice. There were communication tools, such as picture exchange and object of interest in place, to assist children to choose diet, activities, daily routines and journey destinations.

The centre was found to be suitable to meet the children's individual and collective needs in a comfortable and homely way. Each child had their own bedroom with suitable storage facilities. This promoted the children's independence, dignity and respect. There was a sensory room and soft play area which children appeared to



enjoy.

Children attending the service were provided with a nutritious, appetising and varied diet. The timing of meals and snacks throughout the day were planned to fit around the needs of the children. There was evidence that a healthy eating programme was promoted. On admission to respite each child agreed with staff what they wanted to eat for their overnight stay and this was facilitated.

The health and safety of the children, visitors and staff were promoted and protected. There were risk management arrangements in place which included a detailed risk management policy, and environmental and individual risk assessments for children. These outlined appropriate measures in place to control and manage the risks identified. Health and safety audits were undertaken on a regular basis with appropriate actions taken to address issues identified.

Suitable precautions were in place against the risk of fire. There was a fire safety policy and a fire risk assessment had been completed. There was documentary evidence that fire fighting equipment and the fire alarm system were serviced at regular intervals by an external company and checked regularly as part of internal checks in the centre. There were adequate means of escape and a fire assembly point was identified in an area to the front of the centre. A procedure for the safe evacuation of children in the event of fire was prominently displayed. Each child had a personal emergency evacuation plan in place which adequately accounted for the mobility and cognitive understanding of the child. Staff who spoke with the inspector were familiar with the fire evacuation procedures and had received appropriate training. Fire drills involving children had been undertaken. Since the last inspection measures had been put in place to ensure that all children attended a fire drill in line with the frequency proposed in the providers policy. This meant that children, and therein staff were adequately prepared to quickly, calmly and safely evacuate the centre in the event of fire.

There were arrangements in place for investigating and learning from incidents and adverse events involving the children. The risk management department in the hospital, associated with the governance of the centre, provided advice and support to the centre on the management of incidents and near misses. Analysis reports on the number and types of incidents were made available at regular intervals. Overall, low number of incidents and near misses were reported in the centre. There was evidence that incidents were discussed at monthly staff team meetings. This promoted opportunities for learning to improve services and prevent incidences.

There were measures in place to protect the children from being harmed or experiencing abuse. There were no allegations or suspicions of abuse in the preceding 12 month period.

Children were provided with appropriate emotional and behavioural support. The inspector found that the assessed needs of the children were being appropriately responded to. Positive behaviour support plans were in place for children identified to require same. These provided a good level of detail to guide staff in meeting the needs of the individual children. There was evidence that plans in place were

regularly reviewed by the provider's psychologist. Incidents associated with challenging behaviour were found to have been appropriately responded to. A log was maintained of all restrictive practices in use and there was evidence that these were subject to regular review.

### Regulation 10: Communication

The children's communication needs were being met.

Judgment: Compliant

### Regulation 17: Premises

The centre was homely, accessible and promoted the privacy, dignity and safety of each of the children availing of respite in the centre.

Judgment: Compliant

### Regulation 18: Food and nutrition

The children were provided with a nutritious, appetizing and varied diet.

Judgment: Compliant

### Regulation 26: Risk management procedures

The health and safety of children, visitors and staff were promoted and protected.

Judgment: Compliant

### Regulation 28: Fire precautions

Precautions were in place against the risk of fire.

Judgment: Compliant

### Regulation 5: Individual assessment and personal plan

Each child's well-being and welfare was maintained by a good standard of evidence-based care and support.

Judgment: Compliant

### Regulation 7: Positive behavioural support

The children were provided with appropriate emotional and behavioural support.

Judgment: Compliant

### Regulation 8: Protection

There were measures in place to keep children availing of respite in the centre safe and to protect them from abuse.

Judgment: Compliant

## Appendix 1 - Full list of regulations considered under each dimension

Regulation Title	Judgment
<b>Capacity and capability</b>	
Regulation 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 31: Notification of incidents	Compliant
<b>Quality and safety</b>	
Regulation 10: Communication	Compliant
Regulation 17: Premises	Compliant
Regulation 18: Food and nutrition	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant