



Report of an inspection of a Designated Centre for Disabilities (Adults).

Issued by the Chief Inspector

Name of designated centre:	Ti Geal
Name of provider:	Ability West
Address of centre:	Galway
Type of inspection:	Short Notice Announced
Date of inspection:	24 February 2021
Centre ID:	OSV-0004074
Fieldwork ID:	MON-0031037

About the designated centre

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

The designated centre provides a residential and respite service for up to six adults who have an intellectual disability. The centre can cater for residents with some medical healthcare needs, behaviour that is challenging and who may also attend the services of the mental health care team. A combination of social care workers and care assistants support residents during day and night-time hours.

The centre is a two-storey house which is located in a suburban area of a large city. Each resident has their own bedroom and there is also ample communal, kitchen and dining facilities for residents. Public transport links are available to residents and transport is also made available by the provider.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	5
--	---

This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 - 2015 as amended. To prepare for this inspection the inspector of social services (**hereafter referred to as 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
Wednesday 24 February 2021	10:30hrs to 14:30hrs	Ivan Cormican	Lead

What residents told us and what inspectors observed

Overall, the inspector found that residents were supported to enjoy a good quality of life in which their rights and well being were actively promoted.

The inspection was conducted in an office location which was separate to the designated centre. Here, a review of documentation occurred and the person in charge discussed care practices which were occurring in the centre. The inspector also visited the centre for a short period of time and met with four residents. This approach to inspecting this centre was implemented to meet the needs of residents, to maintain social distancing which was affected by physical layout of the premises.

The inspector met with four residents for a short period of time towards the conclusion of the inspection, during this time, residents were supported by day centre staff. The inspector observed that residents were engaging in art and improving their writing skills and they chatted freely with the inspector, staff and the person in charge. Residents showed the inspector scrap books which they had created during national restrictions which contained art and pictures of their favourite foods. Residents appeared very proud of these scrap books and they were happy to show them to the inspector. All residents indicated that they liked their home and they were relaxed when interacting with each other and members of staff. One resident spoke about how they missed seeing their family as frequently as they used to prior to national restrictions and they all explained how they enjoyed going for walks and getting a take away at the weekends. A staff member also talked about how residents had also helped to make a healthy lunch and residents went on to say that they enjoyed cooking and helping out in their home.

Staff who met with the inspector described how residents were supported to pass the time during national restrictions and they explained how residents had enjoyed virtual tours of New Zealand and Scotland and that all residents enjoyed baking and cooking. The inspector also reviewed a sample of residents' individual plans which also outlined goals and activities which residents enjoyed such as flower arranging, learning to make video calls, walks and making cards for special occasions or events. One resident also enjoyed having breakfast in bed every weekend.

It was clear that residents were actively involved in decisions about their care and they attended weekly house meetings in which the running and operation of their home was discussed. Topics such as meals, advocacy, complaints and planning for special events such as pancake Tuesday. A review of minutes of these meetings indicated that residents were very happy with their home and the staff who supported them. The inspector also noted that these minutes offered an account of the personalised service which was in place with a resident explaining how they were really looking forward to a window visit to a friend who was residing in a nursing home.

Overall, the inspector found that residents enjoyed living in this centre and that their

rights and inclusion in decisions about their care was actively promoted. The inspector also found that the provider had put systems in place which promoted residents' awareness of COVID-19 and this will be discussed in a subsequent section of the report.

Capacity and capability

Overall, the inspector found that the governance arrangements in this centre ensured that residents received a service which was adequately resourced and promoted their safety and well being. The inspector also found that all reviews and audits as stated in the regulations had been completed which assisted in improving the quality and safety of the service which was provided.

The person in charge facilitated the inspection and they had a good knowledge of the service which was provided and of resident's individual care needs. They were supported in their role by two senior managers which was outlined in the centre's statement of purpose.

The provider had a centre response plan in place which aimed to promote the safety of residents in regards to COVID-19. This plan outlined two separate teams which would prepare the centre in regards to infection prevention and control and also assist in responding to safety concerns should and outbreak occur. Each team had specific roles with one team of senior managers delegated within the designated centre and another team delegated to offer support from the provider. This plan also outlined the arrangements for monitoring for signs and symptoms of the disease and the arrangements which were implemented to ensure that staff shortages would not occur.

The provider had completed the centre's six monthly audit which was detailed in nature and found some areas for improvement in regards to personal planning and it also detailed that further clarity was required in regards to a safeguarding issue. The person in charge had addressed the actions in regards to the safeguarding issue and other small areas for improvements were being addressed at the time of inspection. The inspector found that these measures and the information which was gathered as part of this auditing process was used to better the lives and overall aimed to improve the quality of the service. Likewise, the centre's annual review had been completed following a consultation process with residents and their representatives which further promoted the person centred care which was found on this inspection.

The person in charge also maintained an accurate rota which indicated that residents received continuity of care from staff members who were familiar to them. There was a training programme in place which assisted in ensuring that staff could assist residents with their individual needs. The provider had also ensured that staff had completed additional training in hand hygiene, personal protective equipment (PPE) and infection prevention and control which also promoted the quality and

safety of care which residents received.

Overall, the inspector found that the operation of this centre promoted the safety and welfare of residents and that the governance arrangements ensured that this level of care could be consistently delivered.

Regulation 15: Staffing

The provider ensured that residents were supported by a staff team who were familiar to them. The person in charge also maintained an accurate staff rota and information in regards to COVID-19 was freely available in te centre.

Judgment: Compliant

Regulation 16: Training and staff development

Staff were up-to-date with their training needs and additional training in regards to hand hygiene, infection prevention and control and personal protective equipment had been completed.

Judgment: Compliant

Regulation 23: Governance and management

The centre had a clear governance structure which promoted to safety and well being of residents. All required audits and reviews had been completed and the information gathered was used to improve the quality if the service which was provided.

Judgment: Compliant

Quality and safety

The inspector found that residents were supported to enjoy a good quality of life. The arrangements which the provider had put in place assisted in promoting their rights and also ensured that they were involved in the running of their home.

Each resident had a comprehensive personal plan which was reviewed on a regular basis. These plans also gave a detailed insight into residents' care needs and how they preferred to be assisted with these needs. The provider also had a planning process in place which promoted goal setting for residents which helped to improve their lives and the overall quality of the service. For example a planning meeting for one resident assisted them in deciding goals which they would like to achieve when national restrictions are eased, such as attending sporting events, going out to restaurants and attending shows. This resident also loved shopping and a review of notes indicated that they missed this activity during the COVID-19 restrictions; however, staff members had supported them to shop on-line which showed that a person centred approach to care was offered.

The provider ensured that residents were informed in regards to COVID-19 and residents' meetings included coverage of restrictions and a general discussion on this disease. The provider had also introduced a range of easy read information which aimed to assist residents in understanding the changes which were occurring nationally. Easy read information covered areas such as the use of face masks, and the importance of hand hygiene and cough and sneeze etiquette. The easy read information also helped residents to prepare for COVID-19 testing and the provider had implemented a consent process for testing which was based on resident's individual communication needs which assisted in promoting their rights.

There was an increased hygiene regime in place in response to COVID-19 and daily checks were occurring which promoted good infection prevention and control practices within the centre. Additional signage had also been placed in the centre which reminded residents and staff of social distancing and of the importance of good hand hygiene. Staff were also observed to wear PPE when working in the centre and there were regular PPE stock control practices in place. The person in charge also explained how specific areas for the donning and doffing of PPE had been identified should a future outbreak of COVID-19 occur. There were also resident specific risk assessments completed which aimed to determine if a resident could self isolate within the centre should they become suspected of confirmed as having COVID-19. The inspector found that this was a positive aspect of care which proactively promoted the safety of residents. The person in charge also made some adjustments to these risk assessments on the day of inspection which added additional information as to the supports and measures which would be implemented to assist the resident with isolating.

The inspector found that residents enjoyed living in this centre which they considered their home. Their well being, welfare and safety were also actively promoted and overall the centre appeared like a pleasant place in which to live.

Regulation 26: Risk management procedures

The person in charge maintained a risk register which promoted the safety of residents. Risk assessments had been completed in response to COVID-19 and

issues which also impacted on individual residents. A review of adverse events also indicated that the person in charge was responsive to incidents which had occurred.

Judgment: Compliant

Regulation 27: Protection against infection

The provider had introduced increased hygiene regimes and regular signs and symptom checks of COVID-19 were occurring. Staff also had access to PPE and additional signage was distributed throughout the centre to remind residents and staff of the importance of hand hygiene.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

Residents had comprehensive personal plans in place which were reviewed on a regular basis. Residents were supported to remain active during national restrictions and planning was in place to support residents with future goals.

Judgment: Compliant

Regulation 6: Health care

Residents had good access to their general practitioner of choice and they were reviewed by specialists in health care as and when required.

Judgment: Compliant

Regulation 8: Protection

Residents appeared happy in the centre and there were no active safeguarding plans in place.

Judgment: Compliant

Regulation 9: Residents' rights

Residents were actively involved in decisions about their care and they also attended regular house meetings which promoted their inclusion in the operation and running of their home.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 - 2015 as amended and the regulations considered on this inspection were:

Regulation Title	Judgment
Capacity and capability	
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Quality and safety	
Regulation 26: Risk management procedures	Compliant
Regulation 27: Protection against infection	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant