

**Health Information and Quality Authority
Regulation Directorate**

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



Centre name:	Community Living Area 12
Centre ID:	OSV-0002716
Centre county:	Kildare
Type of centre:	Health Act 2004 Section 38 Arrangement
Registered provider:	Muiríosa Foundation
Provider Nominee:	Margaret Melia
Lead inspector:	Conor Brady
Support inspector(s):	None
Type of inspection	Announced
Number of residents on the date of inspection:	1
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.

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 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: 11 January 2017 09:30 To: 11 January 2017 16:00

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 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 11. Healthcare Needs
Outcome 12. Medication Management
Outcome 14: Governance and Management
Outcome 17: Workforce

Summary of findings from this inspection

Background to the inspection:

This inspection report sets out the findings of an announced monitoring inspection, the purpose of which was to monitor the centre's compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres' for Persons (Children and Adults with Disabilities) Regulations 2013. This monitoring inspection took place over one day.

How we gathered our evidence:

The inspector met with the resident, staff members on duty and the management team during the inspection process. The inspector reviewed practices and documentation such as residents' personal plans, healthcare plans, accident and incident reports, risk assessments, safeguarding practices, audits and policies and procedures. The person in charge was interviewed on a separate day to this inspection. The governance and management systems in place in this centre were found to be of a good standard which was reflected in the high levels of compliance found in this centre.

Description of the service:

This service was managed by the Muiriosa Foundation and was an individualised community based service specifically designed for the care needs of one resident. According to the statement of purpose, the aim of the service was to provide a home like environment and to encourage the individual to live to their full potential by encouraging choice, providing adequate resources to function at an independent level as possible for the individual.

This designated centre was a large bungalow that consisted of four bedrooms, was finished to a high standard and had a large garden to the front and rear of the house. The resident was supported on a 1:1 staffing ratio on a 24/7 basis. The resident was found to have a very individualised service based on their needs, wishes and preferences.

Overall judgment of our findings:

The inspector found this was a well managed centre that provided very good care to the resident living there. The standard of service provision and overall quality of care delivered to the resident was found to be person centred and of a very good standard in all areas inspected. The resident was found to be well cared for and supported to enjoy a good standard of care in accordance with their assessed needs. The requirements of the Regulations and Standards were well met in this centre. All findings are discussed in more detail in the main body of this report. There is no action plan as there was no non compliance found.

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):

No actions were required from the previous inspection.

Findings:

The inspector found that the resident's rights, choice, dignity and levels consultation were upheld and well promoted in this designated centre.

This was an individualised service that provided 1:1 care to one resident on a 24/7 basis. The inspector found that the service was completely based on the resident's needs, wishes and preferences and delivered a high quality of care to the resident. The resident in this centre primarily communicated non verbally so staff awareness and knowledge of the resident's behaviours and non verbal cues was crucially important.

Staff were very knowledgeable of the resident's needs and highlighted the choices offered to the residents around activities, tea making, sensory activity and nature walks. The resident was well consulted and familiar with staff. A consistent staff were integral to the care delivery to this resident. This was very evident in this centre whereby the inspector found a high quality of care delivered.

The inspector found that the resident's privacy and dignity were well promoted as the resident had a large home to themselves and had privacy in all aspects of their care. On the morning of inspection the inspector joined the resident while having breakfast and found a relaxed and calm home environment. The resident presented as very happy in this centre and appeared very comfortable with the staff on duty who were caring, professional and knowledgeable in their approach.

The inspector found a clear complaints process in place and effective system to manage complaints. Two compliments from the resident's family members were reviewed.

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.

Theme:
Individualised Supports and Care

Outstanding requirement(s) from previous inspection(s):
No actions were required from the previous inspection.

Findings:
The inspector found that the resident was well communicated with and that staff knew the resident's communication needs very well. The resident communicated mainly non verbally through using some key words but primarily communicated through gestures, sounds and physical/behavioural movements.

The resident had communication care planning in place and was observed using objects of reference and hand over hand prompting over the course of this inspection. Staff were observed engaging and communicating with the resident in a caring and respectful manner throughout this inspection and demonstrated a very close professional and caring relationship with the resident. The resident had access to phone, internet and television and staff had developed relaxation and activity rooms to support the resident's individual needs.

Judgment:
Compliant

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):
No actions were required from the previous inspection.

Findings:

The inspector found the resident had a contract in place and this contract reflected the service provided and fees charged. The provider managed the residents finances and had systems in place locally to ensure the residents finances were protected. The inspector reviewed the arrangements regarding the residents finances with the staff in this designated centre and found account balances reviewed matched documentation and cash balances. There were no admissions planned for this centre as it was a registered centre for one resident.

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):

No actions were required from the previous inspection.

Findings:

The residents well being and welfare was maintained by a good standard of evidence based care and support.

The resident was observed engaging with staff and going on activities over the course of the inspection. The resident presented as content and happy with their service.

The resident participated in activities of their own choosing such as walks, engaging with nature, sensory gardens, one to one activities, art, outings and caring for pets. The inspector found a good standard of social care provision and personal planning in this centre. The resident had an individually tailored service and the inspector reviewed the resident's personal plan, person centred support plan and 'My Well Being' folder.

The resident had achieved goals and objectives such as putting up a bird table in the garden, designing a garden and planting flowers, purchasing a fish tank, building a chicken coop and chickens and maintaining same and completing household chores such as laundry.

The inspector found the resident had been recently supported on an outing to the beach and sensory gardens in a neighbouring county. Overall plans were found to be

comprehensive, multi-disciplinary, up to date and appropriately reviewed for the resident.

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):

No actions were required from the previous inspection.

Findings:

The location, design and layout of this centre were found to be suitable for its stated purpose and met the resident's support needs to a very good standard. The centre consisted of a modern country dwelling on a large site with ample space and room for the resident. The centre had developed a sensory garden, chicken coop and sensory/relaxation room with wall mural since the last inspection. There were further plans to build a nature themed hot tub for the resident. The premises were found to be spacious, clean and homely and met the requirements of the regulations and standards to a high standard.

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):

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

Findings:

The health and safety of residents, visitors and staff was well promoted and protected in this centre. A risk management policy was in place that was in line with regulatory

requirements. The centre had a safety statement and health and safety policy and procedures were in place.

A risk register outlined risk management procedures and all areas of risk prevalent in the centre. Risks outlined included individual risks, behavioural risks and environmental risks. There was control measures in place to mitigate risks that were reviewed regularly.

The inspector reviewed accident and incident reports and found all incidents reviewed had been followed up appropriately.

There was evidence of learning applied and corrective action post incident. For example, following the resident removing their seat belt (while in transit) continually and putting themselves at risk a new seatbelt device that was the least restrictive was purchased and implemented. This measure removed this risk and there have not been incidents since its implementation.

There were local protocols in place in the form of a monitoring company whereby staff wore emergency bracelets to ensure staff that were lone working had a safe system of working in place. The centre also had a check in system with another centre located very closely.

There were policies and procedures in place regarding fire safety and the inspector found fire detection, fire fighting and safety equipment in place. There was evidence of up to date fire evacuation drills demonstrating the safe evacuation of the centre. There were emergency plans in place in the event of such evacuations being necessary.

Judgment:

Compliant

Outcome 08: Safeguarding and Safety

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.

Theme:

Safe Services

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

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

Findings:

Measures in place to protect residents from being harmed or suffering abuse were in

place. The provider had a clear system in place for the management of allegations, disclosures or suspected abuse. There were good systems in place to ensure the resident was provided with positive behavioural support and therapeutic input when and where required.

All staff were knowledgeable of the types of abuse and systems of reporting in place. A designated liaison person was identified and staff were aware of same. There were clear reporting and recording systems for all safeguarding issues inclusive of unknown injuries and body marks. There were no active safeguarding concerns in this centre at the time of inspection.

A high quality positive behavioural support plan and therapeutic support system was found to be in place for this resident. The resident had made substantive progress in their development since moving from a congregated setting to an individually supported community service. There were daily reports submitted to a behavioural therapist who was available to this resident and had offered considerable support to date. Overall the resident was found to be well supported from a safeguarding and therapeutic perspective.

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):

No actions were required from the previous inspection.

Findings:

The resident in this centre was supported on an individual basis to achieve and enjoy best possible health. The inspector found appropriate access to allied health professionals and support was continually provided to this resident.

The inspector found that the resident had regular access and appointments to their general practitioner, dental and gum care, dietician, ear and throat specialist, elimination and personal care review, psychology and mental health review.

Assessments of the resident's healthcare needs were reviewed and staff were very familiar with resident's healthcare and support needs. Whereby the resident refused medical treatment this was clearly recorded in their personal plan.

The resident was supported to enjoy home cooked and nutritious meals. The inspector

observed breakfast and the resident had free access to the kitchen to make tea and refreshments as they wished. The residents dietary needs were monitored and monthly weights, nutritional screening tool and dietician led healthy eating plans/menus were in place for this resident.

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):

No actions were required from the previous inspection.

Findings:

The resident was protected by the designated centres policies and procedures for medicines management. There were written operational policies relating to the ordering, prescribing, storing and administration.

The inspector observed medication being administered appropriately by staff on duty. All staff had completed mandatory training in the safe administration of medicines.

The inspector found medicines to be securely stored and there were detailed protocols in place for all medications including the use of short term 'as required' PRN medicines. The person in charge and management had auditing in place and a comprehensive system to follow up on any medication errors.

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):

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

Findings:

The quality of care and experience of the resident were well monitored and developed in this centre.

A new person in charge was in place that was full time and suitably experienced to manage the designated centre. While this person in charge was not present for this inspection the inspector found the quality of local management evident in the centre to be compliant with the requirements of the regulations.

The systems of auditing and review captured the needs of the resident and the service was designed to completely revolve around the resident's needs, wishes and preferences. Areas of practice audited included health and safety, personal care planning, fire safety, medicines management and resident finances.

An unannounced provider audit completed on 22 December 2016 was also reviewed as part of this inspection and monitored the centre across the regulatory requirements. The inspector found that the centre was well managed and clear lines of authority existed that were known and understood by staff.

The inspector reviewed a DVD that was compiled by the centre that captured the resident's journey from a congregated setting into a community home which was a very positive piece of work and offered a very clear indication of the resident's experiences of living in this designated centre.

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):

No actions were required from the previous inspection.

Findings:

There were appropriate staff numbers and skill mix to meet the assessed needs of the resident. The resident was in receipt of good continuity of care with an experienced and consistent staff team. The staff team was individually recruited and matched to the residents needs.

The inspector reviewed detailed analysis and work on the part of the provider to match staff to the centre and careful planning and preparation was evident to comprehensively induct staff into the centre. House and staff meetings took place weekly and monthly and minutes were maintained in the centre.

Staff were appropriately supervised in their roles and informed the inspector there were good managerial support systems in place.

Staff were up to date in mandatory training that included safeguarding vulnerable adults, fire safety, managing behaviours of concern and safe administration of medicines.

Staff presented as very knowledgeable, caring and professional and were found to deliver a very high standard of individualised care to the resident in this designated centre.

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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