

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

Name of designated centre:	St John of God Kildare Services – DC5
Name of provider:	St John of God Community Services Company Limited By
Address of centre:	Guarantee Kildare
Type of inspection:	Unannounced
Date of inspection:	13 June 2018
Centre ID:	OSV-0003642
Fieldwork ID:	MON-0024346

About the designated centre

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

St John of God, Designated Centre 5, provides services to adults whose primary disability is intellectual disability. According to the provider's statement of purpose, residents in this centre have a mild to moderate to severe intellectual disability and may have additional needs due to physical disability, sensory impairment, medical conditions and behaviours that challenge. This designated centre provided care for 13 residents with some residents planning on transitioning out of the centre in the coming months and years. There were five vacancies. The physical, emotional, social and spiritual needs of each person are addressed using a holistic approach according to the providers statement of purpose.

The following information outlines some additional data on this centre.

Current registration end date:	31/10/2018
Number of residents on the date of inspection:	13

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
13 June 2018	09:00hrs to 17:00hrs	Conor Brady	Lead

Views of people who use the service

The inspector had the opportunity to meet three of the residents who resided in this designated centre. One resident spoke to the inspector about his day and highlighted he had been on an outing to a local restaurant and presented as very happy and content. All residents were observed to be well supported by staff who presented as caring and knowledgeable in their roles.

Staff presented as knowing residents very well and residents who were observed presented as very comfortable at the time of inspection.

Capacity and capability

The inspector followed up on the previous inspection findings regarding workforce and staffing issues. The inspector met with staff members and a social care leader who worked in the designated centre. The person in charge highlighted the current staffing levels and rostering support arrangements that were operating in the centre. Mandatory training was up to date and supervision was taking place. The staffing and workforce arrangements in place were found to be meeting the resident's assessed needs.

The inspector sought follow up regarding a notification of concern pertaining to alleged staff misconduct that occurred in this designated centre in 2017. A conclusive report was not yet completed and the inspector requested this report be immediately submitted to HIQA. The provider highlighted this would be complete in the days following inspection.

Regulation 14: Persons in charge

The person in charge was highly qualified, experienced and competent in their role. Good oversight systems were in place and management of the centre was effective.

Judgment: Compliant

Regulation 15: Staffing

Staffing arrangements in the centre at the time of inspection were appropriate.

Judgment: Compliant

Regulation 16: Training and staff development

Staff training and supervision arrangements were in place.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

Regulation Title	Judgment
Capacity and capability	
Regulation 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant