



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

Name of designated centre:	Farmhill
Name of provider:	Health Service Executive
Address of centre:	Sligo
Type of inspection:	Unannounced
Date of inspection:	12 November 2018
Centre ID:	OSV-0005533
Fieldwork ID:	MON-0024572

About the designated centre

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

Farmhill service supports four female adults with a diagnosis of intellectual disability, who require a range of supports. Farmhill service is open seven days a week and provides full-time residential care. This service comprises of two apartments in an urban residential area. The apartments are centrally located and are close to amenities such as, restaurants, public transport, pharmacist and a church. All residents in the centre have their own bedrooms. The apartments are comfortably furnished and have communal areas to the front and rear of the buildings. Residents are supported by a staff team which includes the person in charge, nurses and care assistants. Staff are based in the centre as directed and whenever residents are present.

The following information outlines some additional data on this centre.

Current registration end date:	02/07/2021
Number of residents on the date of inspection:	4

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
12 November 2018	11:00hrs to 15:30hrs	Catherine Glynn	Lead

Views of people who use the service

The inspector met with two residents who lived at the centre and spent time speaking with them both. These residents indicated that they were happy with the care and support they received there. The inspector also observed that residents were comfortable, relaxed, and happy in the company of staff, and their environment.

Capacity and capability

Governance and management arrangements ensured that a good quality and safe service was provided for residents living at the centre. In addition, the inspector found that the provider had put measures in place to ensure that the service was monitored effectively.

The provider ensured that the service was subject to ongoing monitoring, review and development. This had resulted in an improved standard of care, support and safety being provided to residents living at the centre. Six-monthly audits of the centre's practices were being carried out by the management team and staff carried out regular audits of areas such as, medication management, and residents' finances. Records showed that audit findings had been addressed in a timely manner.

The provider had measures in place to ensure that staff were competent to carry out their roles. Staff had received training relevant to their roles, in addition to mandatory training in fire safety, manual handling, safeguarding and behaviour management. There was a range of policies, including, all required schedule 5 policies, to guide staff in the delivery of a safe and appropriate service.

The management team ensured that safe and effective recruitment practices were in place so that staff had the required skills, experience and competencies to carry out their roles and responsibilities. They ensured that all staff had undergone vetting as a primary safeguarding measure ensuring that residents were safe and protected from abuse.

The provider had measures in place to review and evaluate risks, and for the recording of accidents, incidents and complaints and there had been no serious accidents involving residents.

Any issues arising from the previous inspection of the centre had been taken seriously and had been suitably addressed, and measures had been introduced to reduce risk to residents. For example, fire safety measures were in place which included daily checks of doors and emergency lighting. Furthermore, fire drills had been completed with all residents living at the centre and emergency evacuation plans were in place.

Regulation 14: Persons in charge

The role of the person in charge was full-time and the person who filled the post was suitably qualified and experienced. The person in charge was not based in the centre but worked in an office close by.

Judgment: Compliant

Regulation 15: Staffing

Staffing levels and skill-mixes were sufficient to meet the assessed needs of residents at the time of inspection. Planned and actual staff rosters were in place and these were found to be accurate at the time of inspection.

Judgment: Compliant

Regulation 16: Training and staff development

All staff working in the centre had received mandatory training and a range of other training relevant to their roles.

Judgment: Compliant

Regulation 19: Directory of residents

There was a directory of residents which included the required information relating to each resident who lived in the centre.

Judgment: Compliant

Regulation 21: Records

The provider had ensured that all records required under the regulations were maintained.

Judgment: Compliant

Regulation 23: Governance and management

There were effective governance, leadership and management arrangements to govern the centre. There were systems in place, such as audits, staff supervision, availability of operational policies and management meetings, to ensure that the service was provided in-line with residents' needs and as described in the statement of purpose.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

There were written agreements in place for each resident. These agreements stated the fees to be charged, and the required information as specified in the regulations.

Judgment: Compliant

Regulation 3: Statement of purpose

There was a statement of purpose that described the service being provided to residents and met the requirements of the regulations.

Judgment: Compliant

Regulation 31: Notification of incidents

The person in charge and staff kept a register of accidents and incidents that occurred at the centre. Any events that required notification, including quarterly returns, had been submitted to the Chief Inspector as required.

Judgment: Compliant

Quality and safety

The provider's practices ensured that each resident's well-being was promoted at all times and that residents were kept safe. Residents in the centre had opportunities for community involvement and to take part in activities that they enjoyed.

There was a good level of compliance with regulations relating to the quality and safety of residents' care. During the course of the inspection, the inspector found that residents received person centred care and support, which ensured that they could enjoy daily activities suited to their preferences, capabilities and assessed needs on a daily basis.

The centre suited the needs of residents. The apartments was clean, comfortably furnished and well-maintained. Residents had their own bedrooms, which were decorated to their preferences. There was adequate furniture such as wardrobes and other furniture where residents could store their clothing and belongings.

The provider had ensured effective measures were in place to protect residents and staff from the risk of fire. These included up-to-date servicing of fire fighting equipment and the fire alarm system. Staff also carried out a range of fire safety checks. Staff had received formal fire safety training and effective fire evacuation drills were carried out.

The personal planning process ensured that residents' assessed needs and preferences were identified and that suitable supports were in place to ensure that these were met. In a sample of personal plans viewed the inspector found that progress in achieving personal goals was being recorded and that many of the goals had been achieved, while others were in progress. Residents' goals and plans prioritised their quality of life. The inspector could see that residents were supported to attend events such as cinema, concerts, outings and family visits.

There were safe medication management process in place. Medication was suitably stored and administered and staff had training in the safe administration of medication. All residents had been assessed for suitability to take control of their own medication.

Regulation 11: Visits

The provider had measures in place to ensure that residents were supported to have visitors in the centre.

Judgment: Compliant

Regulation 13: General welfare and development

Suitable support was provided to residents in-line with their individual choices and

interests, as well as their assessed needs as described in their personal plans. Residents took part in, and enjoyed, a wide range of social and developmental activities both at the centre and in the community. Activities that the residents enjoyed, and were taking part in, included visiting family and friends, shopping, attending concerts, dining out and art classes.

Judgment: Compliant

Regulation 17: Premises

The design and layout of the centre was suitable for its stated purpose and met the residents' individual and collective needs. The centre was comfortably furnished and decorated, clean and suitably equipped.

Judgment: Compliant

Regulation 20: Information for residents

Information was provided for residents in central areas in the centre. This included information, in user friendly format, about staff on duty each day, residents' rights, how to make complaints, meal plans, social events and activities.

Judgment: Compliant

Regulation 26: Risk management procedures

Risk management arrangements ensured that risks were identified, monitored and regularly reviewed. The controls in place to reduce risks in the centre were found to reflect staff practices and knowledge.

Judgment: Compliant

Regulation 27: Protection against infection

The provider had practices in place that ensured the residents were protected from the risk of healthcare associated infections.

Judgment: Compliant

Regulation 28: Fire precautions

The provider had ensured that effective measures were in place to protect residents and staff from the risk of fire. These included up-to-date servicing of fire safety equipment, internal safety checks by staff, fire safety training for all staff, completion of fire evacuation drills involving residents and staff and individualised emergency evacuation plans.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

There were safe medicines management practices in place in the centre. Residents' medication was securely stored at the centre and all staff had received training in the safe administration of medication. The suitability of residents to administer their own medication had also been assessed.

Judgment: Compliant

Regulation 6: Health care

The health needs of residents were assessed and they had good access to a range of healthcare services, such as general practitioners, healthcare professionals and consultants. Plans of care for good health had been developed for residents based on each person's assessed needs.

Judgment: Compliant

Regulation 7: Positive behavioural support

The provider had a positive approach to the support and management of behaviours that challenge. Behaviours support plans had been developed when required with input from a psychologist and behaviour support specialist. These plans were being implemented and occurrences of incidents arising from behaviours that challenge had reduced considerably.

Judgment: Compliant

Regulation 8: Protection

The provider had ensured that appropriate arrangements were in place to safeguard residents from harm or abuse. All staff had received training in safeguarding and there was an up-to-date policy in place to guide staff.

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
Regulation 19: Directory of residents	Compliant
Regulation 21: Records	Compliant
Regulation 23: Governance and management	Compliant
Regulation 24: Admissions and contract for the provision of services	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 31: Notification of incidents	Compliant
Quality and safety	
Regulation 11: Visits	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 20: Information for residents	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 27: Protection against infection	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 6: Health care	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant