



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

Issued by the Chief Inspector

Name of designated centre:	Colbert View
Name of provider:	RehabCare
Address of centre:	Limerick
Type of inspection:	Short Notice Announced
Date of inspection:	24 September 2020
Centre ID:	OSV-0007245
Fieldwork ID:	MON-0030465

About the designated centre

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

This centre is located within a site operated by the provider; the site accommodates a number of residential units as well as a resource centre; the accommodation units provide accommodation to those with Social Housing needs. Around the buildings are communal areas with lawns, paths, seating areas and car parking. The site is gated and secure and located adjacent to the railway and bus stations and a taxi rank. All of the amenities offered by the city are a short walk from the centre. The residents' apartment is comprised of 2 bedrooms, bathroom, a kitchen and an open plan living and dining room. The model of care is social and a long-term residential service is provided to a maximum of one resident. The centre is staffed continuously by a team of care staff supported by the team leader and the person in charge. The provider aims to provide the resident with a comfortable, clean and safe environment and support that is tailored to their individual needs. The support provided aims to support the resident in the fulfilment of their personal objectives as well as meeting their day to day needs.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	1
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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
Thursday 24 September 2020	11:00hrs to 17:30hrs	Cora McCarthy	Lead

What residents told us and what inspectors observed

The inspector met with the resident and had the opportunity to talk to them during the course of the inspection. The resident was very articulate and was able to speak openly with the inspector. They stated that they were very happy in the centre and loved their new home. The resident outlined the reasons why they were so happy in their apartment. They said it was because they were independent and had freedom and didn't have to live with anyone else. They made reference to where they had lived previously and said they did not want to go back there, as they had not been happy living there. The resident showed the inspector around their home and was very proud of bedroom furniture they had bought recently. There were concert tickets and programmes for shows on display indicating activities that the resident engaged in. The resident had been on a shopping trip to the local shopping centre on the day of inspection, had lunch there and told the inspector they did this regularly. They had made plans to go to a concert, out for dinner and drinks when restrictions lifted further. The resident was very excited about this planned outing. They also told the inspector they received good support from staff who were very kind to them and said that they felt safe in the centre. The resident was very positive when speaking about their new home and the friends they had made in the apartment complex.

Capacity and capability

Overall, the inspector found effective governance systems were in place and the centre was adequately resourced to meet the needs of the resident. There was a clearly defined management structure, which identified the lines of authority and accountability for all areas of service provision. The person in charge held the necessary skills and qualifications to carry out the role. The person in charge had ensured all the requested documentation was available for the inspector to review during the inspection.

The provider had ensured that staff numbers and skill mix at the centre were in line with the assessed needs of the resident. The inspector reviewed the actual and planned rota which indicated continuity of care from a core staff team. The person in charge demonstrated the relevant experience in management and was effective in the role. The staff members with whom the inspector spoke with were very knowledgeable around the residents' assessed needs and their individual methods of communication.

The person in charge had a training matrix for review and the inspector noted that all staff had received mandatory training while refresher training was also available as part of a continuous professional development programme. Some mandatory

training such as managing behaviours the challenge, had to be postponed due to COVID-19 however there was evidence that it had been scheduled and the person in charge had a training schedule for the inspector to view.

Clear management structures and lines of accountability were in place. The provider had also undertaken unannounced inspections of the service on a six monthly basis and a self assessment of the quality and safety of service was carried out in February 2020. These audits resulted in action plans being developed for quality improvement and actions identified had either been completed or were in the process of being completed.

The registered provider had a written statement of purpose in place for the centre, which contained all information required under Schedule 1 of the regulations. One amendment required to be made to the staffing whole time equivalent however the person in charge committed to addressing this immediately.

During the inspection incidents were reviewed and it was noted that the person in charge had notified the Chief Inspector of incidents that occurred in the designated centre.

Registration Regulation 5: Application for registration or renewal of registration

The registered provider had ensured an application to renew to the registration of the designated centre was submitted in a timely manner.

Judgment: Compliant

Regulation 14: Persons in charge

The person in charge was suitably qualified and experienced and was employed on a full-time basis.

Judgment: Compliant

Regulation 15: Staffing

The person in charge had an actual and planned rota which was in line with the statement of purpose.

Judgment: Compliant

Regulation 16: Training and staff development
The person in charge had a training matrix for review and the inspector noted that all staff had received mandatory training.
Judgment: Compliant
Regulation 23: Governance and management
Clear management structures and lines of accountability were in place. A range of audits were carried out. The provider had also undertaken unannounced inspections of the service on a six monthly basis and a self assessment of the quality and safety of service was carried out in February 2020.
Judgment: Compliant
Regulation 3: Statement of purpose
The registered provider had a written statement of purpose in place for the centre, which contained all information required under Schedule 1 of the regulations.
Judgment: Compliant
Regulation 31: Notification of incidents
The person in charge notified the Chief Inspector of incidents that occurred in the designated centre.
Judgment: Compliant
Quality and safety
The inspector reviewed the quality and safety of care and support in the designated centre and found that overall the quality of services provided to the resident was of

a very good standard. The inspector noted that the provider had implemented the necessary protocols and guidelines in relation to good infection prevention and control to ensure the safety of the resident during the COVID-19 pandemic. These guidelines were in line with the national public health guidelines and were reviewed regularly with information and protocols updated as necessary.

The provider had ensured that the premises were designed and laid out to meet the needs of the resident. The premises were clean, warm and homely. On the previous inspection it was noted the apartment had not been clean, on this occasion the apartment was very clean and personalised with the residents belongings. For example the resident had recently bought new furniture for their apartment and there were family pictures and concert tickets displayed which showed the resident was independent and engaged in activities.

The person in charge had ensured that all fire equipment was maintained and that there was emergency lighting and an L1 alarm system in place. The inspector reviewed evacuation drills and found that the resident evacuated without any issues, in a safe time period. The most recent fire drill in October took under a minute to evacuate.

The person in charge ensured that an assessment, of the health, personal and social care needs of the resident was carried out. While goals were in place for the resident and it was apparent through discussion with the resident that they had achieved these goals, this was not documented clearly. The person in charge addressed this immediately and the inspector reviewed same and found it satisfactory.

Appropriate user friendly information with visuals was provided to the resident to support their understanding of COVID-19 and the restrictions in place. For example hand washing instructions were placed over the wash hand basin to support the resident with hand hygiene. The resident had access to television, newspapers and radio.

The provider ensured that the resident received appropriate care and support in accordance with evidence-based practice, having regard to the nature and extent of the resident's disability, assessed needs and their wishes. The resident was supported to develop friendships and once COVID-19 restrictions were lifted the resident was hoping to do a course or gain supported employment.

The provider had a risk management policy in place and all identified risks had a risk management plan in place including the risks attached to COVID-19. The provider ensured that there was a system in place in the centre for responding to emergencies.

The provider had ensured that the resident who may be at risk of an infection such as COVID-19 was protected by adopting procedures consistent with the standards for infection prevention and control. Staff were observed to wear masks and practice appropriate hand hygiene during the inspection.

Overall the health and well-being of the resident was promoted in the centre. Staff

demonstrated a good knowledge of the residents' health care needs and how to support them. For example staff members with whom the inspector spoke were clearly able to outline the resident's weight management plan and also the resident had a recurring ingrown toenail infection, this was monitored by staff and resident received care from a podiatrist and the GP. The resident had access to a general practitioner and other health care professionals.

The inspector reviewed the medications procedures in the centre and observed a staff member administering medicines to the resident in an appropriate manner. The provider had ensured that there were appropriate practices in place in relation to ordering, receipt, prescribing, storage, disposal and administration of medicines.

The inspector observed that there were systems and measures in operation in the centre to protect the resident from possible abuse. Staff were facilitated with training in the safeguarding of vulnerable persons and were familiar with safeguarding plans in place.

Regulation 10: Communication

The resident had access to phone, television, radio, newspaper and the Internet.

Judgment: Compliant

Regulation 13: General welfare and development

The provider ensured that each resident received appropriate care and support in accordance with evidence-based practice, having regard to the nature and extent of the resident's disability, assessed needs and their wishes.

Judgment: Compliant

Regulation 17: Premises

The provider had ensured that the premises were designed and laid out to meet the needs of the residents and was clean, warm and homely.

Judgment: Compliant

Regulation 26: Risk management procedures

The provider had a risk management policy in place and all identified risks had a risk management plan in place including the risks attached to COVID-19. The provider ensured that there was a system in place in the centre for responding to emergencies.

Judgment: Compliant

Regulation 27: Protection against infection

The provider had ensured that residents who may be at risk of an infection such as COVID-19 were protected by adopting procedures consistent with the standards for infection prevention and control.

Judgment: Compliant

Regulation 28: Fire precautions

The provider ensured that effective fire management systems were in place in the designated centre.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

The provider had ensured that there were appropriate practices in place in relation to ordering, receipt, prescribing, storage, disposal and administration of medicines.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

The person in charge ensured that an assessment, of the health, personal and social care needs of the resident was carried out.

Judgment: Compliant

Regulation 6: Health care

Overall the health and well-being of the resident was promoted in the centre. Staff demonstrated a good knowledge of the resident's health care needs and how to support them.

Judgment: Compliant

Regulation 8: Protection

The inspector observed that there were systems and measures in operation in the centre to protect the resident from possible abuse. Staff were facilitated with training in the safeguarding of vulnerable persons.

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	
Registration Regulation 5: Application for registration or renewal of registration	Compliant
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
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	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 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant