



Office of the Chief Inspector

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

Name of designated centre:	St Stephen's Respite Service
Name of provider:	Western Care Association
Address of centre:	Mayo
Type of inspection:	Announced
Date of inspection:	24 April 2019
Centre ID:	OSV-0001772
Fieldwork ID:	MON-0022676

About the designated centre

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

St. Stephens can provide a respite service to male and female children and young people, ranging from seven to eighteen years of age. The service is provided to those with intellectual disability who have moderate to intense support needs, which may include physical disabilities, health issues, communication difficulties and feeding support needs. Respite care is provided on the basis of planned, recurrent, short stay placements. The service can accommodate up to four children per night, but usually accommodates a maximum of two based on compatibility assessments. St. Stephens is a large comfortable two-storey house with a garden, with two-fully wheelchair accessible bedrooms on the ground floor. The centre is located in a residential area in a rural village, close to a large town. Children are supported by a staff team which includes the person in charge, social care workers and social care assistants. Staff are based in the centre when children are present including at night.

The following information outlines some additional data on this centre.

Current registration end date:	27/09/2019
Number of residents on the date of inspection:	4

How we inspect

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
24 April 2019	12:00hrs to 17:45hrs	Jackie Warren	Lead

Views of people who use the service

The inspector met with two children who were availing of the respite service at the time of inspection. These children did not have the capacity to discuss the service with the inspector. However, the inspector observed that the children were relaxed and happy in the centre and in the presence of staff. It was evident that staff prioritised the welfare of the children, and ensured that they were supported to take part in activities that they enjoyed based on each child's individual abilities and preferences. The inspector received feedback and views from families on behalf of the children who used this respite service. These families expressed a high level of satisfaction with the service their children received, and all were very complimentary of staff.

Capacity and capability

There were effective governance and management arrangements in place to ensure that the service received by children taking respite breaks in the centre was safe and of a good quality.

On the day of inspection there were sufficient numbers of suitably trained staff on duty to support children's assessed health needs, and their activity preferences. It was evident that staff knew the children and their care needs well. During the inspection, staff focused on ensuring that children were happy and enjoying their stay at the centre. Staff were observed interacting warmly with children, playing, and bringing them outdoors for walks.

The provider had measures in place to ensure that staff were competent to carry out their roles. Staff had received training relevant to their work, such as safe administration of medication and epilepsy care, in addition to mandatory training. The person in charge was based in the centre and worked closely with the children and staff. The provider had also ensured that staff had been suitably recruited and Garda vetted. Throughout this registration cycle, inspectors had found the person in charge to be very familiar with children's care and support needs and competent in her role. There were effective cover arrangements in place to ensure that staff were adequately supported in the absence of the person in charge.

Since the last inspection, the provider and management team had ensured that any issues that required improvement had been addressed, which improved the overall quality and safety of service provided to the children. Some of these improvements included a revised risk management system, a planned approach to attendance at fire evacuation drills, structural changes to the building to improve the emergency

evacuation process, and provision of new garden equipment to increase accessibility for children with physical disabilities.

Registration Regulation 5: Application for registration or renewal of registration

The prescribed documentation for the renewal of the designated centre's registration had been submitted to the chief inspector as required.

Judgment: Compliant

Regulation 14: Persons in charge

There was a person in charge who had the required qualifications and experience, and who filled the role in a full-time capacity. The person in charge was based in the centre, and was very knowledgeable regarding the individual needs of each child and young person.

Judgment: Compliant

Regulation 15: Staffing

Staffing levels and skill-mixes were sufficient to meet the assessed needs of children and young people. Planned staffing rosters had been developed which had been updated to reflect actual staffing arrangements, and these were accurate at the time of inspection. Staff had also been suitably recruited.

Judgment: Compliant

Regulation 16: Training and staff development

Staff who worked in the centre had received mandatory training in fire safety, behaviour support, manual handling and safeguarding, in addition to other training relevant to their roles such as feeding, eating and drinking, and safe administration of medication. There was a training schedule to ensure that training was delivered as required.

Judgment: Compliant
Regulation 19: Directory of residents
There was a directory of residents that included the required information for each child or young person who received respite breaks in the centre.
Judgment: Compliant
Regulation 22: Insurance
There was a current insurance policy in effect for the service.
Judgment: Compliant
Regulation 23: Governance and management
There were effective management arrangements in place to govern the centre and to ensure the provision of a good quality and safe service to residents. There was an effective management structure, and there were systems in place, such as audits and reviews, to ensure that the service was provided in accordance with children's needs and wishes, and was 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 child. Overall, these agreements were informative. However, they did not clearly state details of the services to be provided.
Judgment: Substantially compliant
Regulation 3: Statement of purpose

There was an up-to-date statement of purpose which described the service being provided to residents. However, there was some minor adjustment required to the statement of purpose to meet all the requirements of the regulations. The person in charge reviewed and amended the statement of purpose, and a suitably revised version was sent to the chief inspector following the inspection. The statement of purpose was being reviewed annually by the person in charge.

Judgment: Compliant

Regulation 4: Written policies and procedures

All policies required by schedule 5 of the regulations were available to guide staff and were up-to-date.

Judgment: Compliant

Quality and safety

There was a good level of compliance with regulations relating to the quality and safety of resident care. The provider's practices ensured that children's well-being was promoted at all times and that they were kept safe. The inspector found that the children received person-centred care and support that allowed them to take part in activities that they enjoyed, to play, and to attend school during their respite breaks.

Children's quality of life was prioritised while they were in the centre, and their rights and choices were supported. The inspector noticed that staff assessed the children's preferences on an ongoing basis during the inspection and had also established children's likes, dislikes and preferences by discussion with their families.

The centre was warm, clean, comfortable and suitably furnished and suited the needs of the children who availed of respite breaks there. There was a selection of toys and sensory items supplied for the children. Each child had his or her preferred bedroom during respite stays. There was adequate furniture in which children could store their clothing and belongings while they were staying in the centre. Prior to each respite break, rooms were personalised with children's own bed linen. Assistive equipment, such as hoists, was also provided to enhance comfort and safety for the children. The centre had an enclosed garden equipped with swings and other toys, and a wheelchair swing had been provided since the last inspection.

The provider had measures in place to reduce the risks associated with fire. These included up-to-date servicing of fire fighting extinguishers and the fire alarm system, and the provision of fire doors in all bedrooms. All staff had received fire safety

training and took part in fire evacuation drills. Risks in centre had been identified and control measures were in place to manage these risks.

Personal planning arrangements ensured that each child's needs were met during the duration of their respite stays. Given the short duration of children's stays in the centre, their health and social care needs were supported jointly by their families, school staff and staff at this centre, who met annually to review each child's care and to develop personal plans for the coming year. The inspector could see that children were being supported to go out for walks, attend school and enjoy the facilities in the centre.

The provider had ensured that children's healthcare needs were supported while in the centre. All children were under the care of the family general practitioner, and children had good access to multidisciplinary services, including speech and language therapy, physiotherapy, psychology and behaviour support, as required. Plans of care for good health were developed, which identified the children's specific care needs. This ensured that each child's requirements for good health were identified, and that plans were in place to ensure that this care was appropriately delivered during respite stays. Staff were trained to administer children's medication as required, and there were robust procedures in place for the safe management of medication.

Regulation 10: Communication

Arrangements were in place to support children to communicate in accordance with each person's needs and wishes. These arrangements included assessments, information in user-friendly format, communication plans, and a communication policy to guide staff.

Judgment: Compliant

Regulation 13: General welfare and development

During respite breaks, suitable support was provided to children and young people to ensure that they could achieve their individual choices and interests, as well as their assessed needs as described in their personal plans. Arrangements were in place for children to attend school while availing of respite breaks, and they took part in social and developmental activities both at the centre and in the community. These included walks, sensory activities, playing with toys and books, and going to restaurants and the cinema.

Judgment: Compliant

Regulation 17: Premises

The design and layout of the centre was suitable for its stated purpose and met children's individual and collective needs. The centre was appropriately furnished and decorated, clean, suitably equipped, and was well maintained both internally and externally.

Judgment: Compliant

Regulation 18: Food and nutrition

Children's nutritional needs were well met. Residents' dietary needs had been assessed and suitable foods or nutritional systems were provided to suit any identified needs. Staff were very knowledgeable of children's dietary requirements and preferences.

Judgment: Compliant

Regulation 20: Information for residents

There was an informative residents' guide that met most of the requirements of the regulations. However, the terms and conditions relating to residency in the centre were not included.

Judgment: Substantially compliant

Regulation 26: Risk management procedures

There were arrangements in place to ensure that risks were identified, monitored and regularly reviewed, and there was a risk management policy to guide practice.

Judgment: Compliant

Regulation 28: Fire precautions

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

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

There were safe medication management practices in the centre. Children's medications were suitably and securely stored at the centre and there were suitable arrangements for the storage and disposal of out-of-date or discontinued medication. There was an up-to-date medication policy to guide staff.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

Personal plans had been developed for all children and young people, and were based on each person's assessed needs. Annual personal planning meetings, which included the children's parents, school staff, staff from the designated centre, and multidisciplinary supports, were being held. Children's personal goals were agreed at these meetings. As respite users were based in the centre at limited times, families, school staff, and staff in the designated centre worked together to progress these goals.

Judgment: Compliant

Regulation 6: Health care

Children's healthcare needs were well met in the centre. While children's families primarily took responsibility for their healthcare and appointments, detailed plans of care for good health had been developed for children based on each person's assessed needs, and staff supported the delivery of suitable care during respite breaks.

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
Views of people who use the service	
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 19: Directory of residents	Compliant
Regulation 22: Insurance	Compliant
Regulation 23: Governance and management	Compliant
Regulation 24: Admissions and contract for the provision of services	Substantially compliant
Regulation 3: Statement of purpose	Compliant
Regulation 4: Written policies and procedures	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 18: Food and nutrition	Compliant
Regulation 20: Information for residents	Substantially compliant
Regulation 26: Risk management procedures	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

Compliance Plan for St Stephen's Respite Service OSV-0001772

Inspection ID: MON-0022676

Date of inspection: 24/04/2019

Introduction and instruction

This document sets out the regulations where it has been assessed that the provider or person in charge are not compliant 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 document is divided into two sections:

Section 1 is the compliance plan. It outlines which regulations the provider or person in charge must take action on to comply. In this section the provider or person in charge must consider the overall regulation when responding and not just the individual non compliances as listed section 2.

Section 2 is the list of all regulations where it has been assessed the provider or person in charge is not compliant. Each regulation is risk assessed as to the impact of the non-compliance on the safety, health and welfare of residents using the service.

A finding of:

- **Substantially compliant** - A judgment of substantially compliant means that the provider or person in charge has generally met the requirements of the regulation but some action is required to be fully compliant. This finding will have a risk rating of yellow which is low risk.
- **Not compliant** - A judgment of not compliant means the provider or person in charge has not complied with a regulation and considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of residents using the service will be risk rated red (high risk) and the inspector have identified the date by which the provider must comply. Where the non-compliance does not pose a risk to the safety, health and welfare of residents using the service it is risk rated orange (moderate risk) and the provider must take action *within a reasonable timeframe* to come into compliance.

Section 1

The provider and or the person in charge is required to set out what action they have taken or intend to take to comply with the regulation in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that regulation, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. The response must consider the details and risk rating of each regulation set out in section 2 when making the response. It is the provider's responsibility to ensure they implement the actions within the timeframe.

Compliance plan provider's response:

Regulation Heading	Judgment
Regulation 24: Admissions and contract for the provision of services	Substantially Compliant
<p>Outline how you are going to come into compliance with Regulation 24: Admissions and contract for the provision of services:</p> <p>The P.I.C will review all individual Service Agreements to include specific details of services provided including food, laundry, transport, activities, payment arrangements, use of "pocket money" and details of the service to be provided related to each individual's support, care and welfare.</p> <p>Completion Date: 31/5/19</p> <p>Each Service Agreement will be reviewed and signed on an individual basis with each individual/their family.</p> <p>Completion Date: 30/6/19</p>	
Regulation 20: Information for residents	Substantially Compliant
<p>Outline how you are going to come into compliance with Regulation 20: Information for residents:</p> <p>The Residents Guide has been amended to provide a description of terms and conditions and a summary of the services and facilities provided as per the regulation, including</p> <ul style="list-style-type: none"> -Services and Supports provided -Cost of service -Length of time Service can be availed of. <p>The updated Residents Guide is available on site to children and families.</p> <p>Completed 16/5/19</p>	

Section 2:

Regulations to be complied with

The provider or person in charge must consider the details and risk rating of the following regulations when completing the compliance plan in section 1. Where a regulation has been risk rated red (high risk) the inspector has set out the date by which the provider or person in charge must comply. Where a regulation has been risk rated yellow (low risk) or orange (moderate risk) the provider must include a date (DD Month YY) of when they will be compliant.

The registered provider or person in charge has failed to comply with the following regulation(s).

Regulation	Regulatory requirement	Judgment	Risk rating	Date to be complied with
Regulation 20(2)(b)	The guide prepared under paragraph (1) shall include the terms and conditions relating to residency.	Substantially Compliant	Yellow	16/05/2019
Regulation 24(4)(a)	The agreement referred to in paragraph (3) shall include the support, care and welfare of the resident in the designated centre and details of the services to be provided for that resident and, where appropriate, the fees to be charged.	Substantially Compliant	Yellow	30/06/2019