



# Report of a Restrictive Practice Thematic Inspection of a Designated Centre for People with Disabilities.

## Issued by the Chief Inspector

Name of designated centre:	West County Cork 6
Name of provider:	COPE Foundation
Address of centre:	Cork
Type of inspection:	Unannounced
Date of inspection:	14 January 2020
Centre ID:	OSV-0003716
Fieldwork ID:	MON-0028620

## What is a thematic inspection?

The purpose of a thematic inspection is to drive quality improvement. Service providers are expected to use any learning from thematic inspection reports to drive continuous quality improvement which will ultimately be of benefit to the people living in designated centres.

Thematic inspections assess compliance against the National Standards for Residential Services for Children and Adults with Disabilities. See Appendix 1 for a list of the relevant standards for this thematic programme.

There may be occasions during the course of a thematic inspection where inspectors form the view that the service is not in compliance with the regulations pertaining to restrictive practices. In such circumstances, the thematic inspection against the National Standards will cease and the inspector will proceed to a risk-based inspection against the appropriate regulations.

## What is 'restrictive practice'?

Restrictive practices are defined in the *Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) with Disabilities) Regulations 2013* as **'the intentional restriction of a person's voluntary movement or behaviour'**.

Restrictive practices may be physical or environmental<sup>1</sup> in nature. They may also look to limit a person's choices or preferences (for example, access to cigarettes or certain foods), sometimes referred to as 'rights restraints'. A person can also experience restrictions through inaction. This means that the care and support a person requires to partake in normal daily activities are not being met within a reasonable timeframe. This thematic inspection is focussed on how service providers govern and manage the use of restrictive practices to ensure that people's rights are upheld, in so far as possible.

**Physical** restraint commonly involves any manual or physical method of restricting a person's movement. For example, physically holding the person back or holding them by the arm to prevent movement. **Environmental** restraint is the restriction of a person's access to their surroundings. This can include restricted access to external areas by means of a locked door or door that requires a code. It can also include

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<sup>1</sup> Chemical restraint does not form part of this thematic inspection programme.

limiting a person’s access to certain activities or preventing them from exercising certain rights such as religious or civil liberties.

## About this report

This report outlines the findings on the day of inspection. There are three main sections:

- What the inspector observed and residents said on the day of inspection
- Oversight and quality improvement arrangements
- Overall judgment

In forming their overall judgment, inspectors will gather evidence by observing care practices, talking to residents, interviewing staff and management, and reviewing documentation. In doing so, they will take account of the relevant National Standards as laid out in the Appendix to this report.

**This unannounced inspection was carried out during the following times:**

Date	Inspector of Social Services
14 January 2020	Elaine McKeown

## What the inspector observed and residents said on the day of inspection

During the day the inspector met with 11 residents who are currently availing of services in the designated centre. From speaking with the residents and from what the inspector observed over the course of the day, it was very clear that residents were happy and at ease in the centre. Residents were facilitated to engage in activities that were meaningful to them and were not restricted unnecessarily; this enhanced their quality of life. Residents who spoke with the inspector indicated they were very happy with the people they lived with.

The designated centre is a single storey large bungalow that provides residential services Monday to Friday to adults, both male and female with an intellectual disability and complex needs as outlined in the statement of purpose. The centre can provide accommodation for a maximum of ten residents. At the time of the inspection 11 adults were being supported each week. Two residents avail of residential services in the designated centre two nights each week, all other residents are supported for four nights.

The house is located in a large town in West Cork in a residential cul-de-sac. It is centrally located and close to amenities such as shops, pharmacies and other community facilities. There is parking at the front of the house, a large secure garden area to the rear and additional space surrounding the property which residents are supported to access. All residents can access the secure garden area through a door that has a push bar release handle. There is a level patio area where residents can sit and a swing seat, the garden area contains mature trees and shrubs. The person in charge outlined plans to further develop the garden area to include composting facilities and a herb garden. There are also discussions taking place to further develop the garage located at the front of the property. The inspector was informed this area may be developed into an exercise space in the future.

The designated centre is a purpose built bungalow with large communal areas that include a spacious kitchen-dining room and a sitting room. The residents also had access to a day service activation centre connected to the designated centre where they could participate in educational and recreational programmes. There are four double shared bedrooms, two single rooms and one staff bedroom with en-suite. There are also two bathrooms and three separate toilet facilities. All the windows and some flooring in the designated centre had recently been replaced to a high standard. The centre was warm, clean and decorated with art work and awards belonging to the residents. There were also many visual aids to support residents which included daily menu choices, activity schedules and information for residents to independently exit the building using the keypad, if they chose to.

On arrival to the designated the inspector was informed some residents were attending a qualification event for the Special Olympics. Another resident was supported by family members to attend a medical appointment, while another resident was attending Mass with a relative. All these residents had returned to the centre before lunch on the day of the inspection. Residents were supported by the staff team to participate in different activities in the designated centre of their choosing for the afternoon and some of the group had plans to go to the cinema in the evening.

Throughout the day residents spoke with the inspector outlining what they like to do and how they felt about the designated centre. They spoke fondly of staff members including a staff member who had recently left after many years working in the centre. One resident introduced themselves to the inspector and chatted about their interests in road bowling and golf. The resident also explained how staff supported them to attend qualifying events for the Special

Olympics. The resident was encouraged by staff to tell the inspector about the household chores they had responsibility for.

Other residents acknowledged the inspector but choose to complete their chores before sitting down to chat in a group with the inspector in the dining room. The residents were assisting the staff to clean up the kitchen and prepare the lunch time meal at the time the inspector introduced themselves. There was a lot of activity but it was evident the group were working as a team. There was wonderful home cooking smells permeating the centre which enhanced the setting. During a group chat with three residents, the inspector listened to lists of activities which included baking, swimming, attending the cinema and bowling that the residents enjoyed each week. One resident spoke of the awards they had won and another explained how they like helping out around the centre. They were also responsible for updating the menu board in the kitchen. The third resident spoke of their enjoyment of taking part in bowling activities. The conversation was relaxed and each resident respected their peers by not interrupting one another as they spoke. They supported each other when the inspector was unsure what had been said. One resident assured the inspector that they liked sharing their bedroom with their friend. The residents also spoke of the activities they liked to do at the weekends when they go home to their families. It was evident this group had developed friendships and enjoyed each other's company.

Another resident spoke of their interests in foreign countries. Staff supported the resident to explain what they had done to learn about different countries and their plans for the next country which they were going to learn about. This resident had also enjoyed attending a third level college where they attended modules on law and advocacy. The person in charge explained how the resident has been invited to be part of the advocacy group in the designated centre.

The inspector sat with another resident as they completed a 1000 piece jigsaw. Staff had framed a previously completed jigsaw which was displayed in a hallway in the centre. The inspector was shown another large jigsaw that the resident had recently completed, staff were planning to get this framed for the resident. The resident indicated that they might consider putting that jigsaw in their bedroom as it matched the colour scheme of the room. This resident had recently celebrated a birthday both at home with family members and in the designated centre with their peers and staff team. Staff supported the resident to explain what activities they enjoy to participate in which included bocce.

One resident liked to sit in a particular chair in the reception area of the centre. This allowed them to see and hear all the activity going on but within their own space. Staff supported this by placing family photos on a shelf nearby and a music system. Staff informed the inspector that the resident would turn off the music when they no longer chose to listen to it. Later in the afternoon some other residents and staff enjoyed some table top games with music playing in the reception area nearby and the resident was encouraged to join in, staff were seen to include everyone in the conversation and offered all individuals choice. It was evident the staff team were familiar with individual preferences and choices regarding activities. Another resident was assisted by staff to engage in a large sorting game in the sitting room as they preferred to complete this activity on their own. The inspector observed the resident to close the door that led out into the reception area so that the other residents wouldn't be disturbing them.

Residents were supported to engage in regular meetings where a variety of topics were discussed, which included menu and activity planning for the coming week. Residents were given the opportunity to raised concerns, which could include any issues relating to restrictions. Residents had access to advocacy and the person in charge informed the inspector

that an advocacy officer was scheduled to visit the centre later in the month to meet with the residents and staff team.

The inspector also spoke with family members of two residents during the day. Both outlined the invaluable support the staff team provide to their relative. They are assured that their relative is well looked after and the individuals are happy in the designated centre. One resident has been attending the centre since it opened in 1992, the other resident has been availing of the service for over 20 years. While the families are very happy with the service available, one relative outlined how a full time residential service in the designated centre would benefit their relative as the person will require additional support in the future.

The person in charge outlined the support needs for the group of residents who range in age from 35 to 56 years. A number of residents have been diagnosed with dementia and some residents express themselves using non-verbal communication methods. The staff team were observed to support and interact in a familiar and pleasant manner with the residents. Staff were knowledgeable of residents' preferences regarding food, activities and routines. It was clear to the inspector that staff were aware of individual supports required by residents. Staff were observed to use alternative methods of communication, visual aids and sign language, when interacting with residents during the inspection. In addition, staff were supported with on-going training which guided their practice to promote a restraint-free environment where possible. The person in charge outlined that a new staff resource was now available in the centre which facilitated additional activities in the evening time. The centre also has support from volunteers within the community which further assists the residents partaking in activities both locally and nationally. A group of the residents had been supported to attend a week long All-Ireland road bowling event in Armagh in 2019.

The person in charge outlined the restrictive practices that were in place in the designated centre. These included a key pad on the front door, window restrictors on all windows, a sounder alarm on an emergency exit door located in a bedroom, a light key switch in the kitchen-dining area, locked press in the kitchen and store room and in one bathroom. One resident required a lap strap while being propelled in their wheel-chair. There was evidence in the restrictive practice log of on-going review by the staff team in the designated centre and the restrictions in place did not adversely impact other residents. For example, residents were supported with visual aids at the front door to assist them to independently exit the centre if they chose to do so. Residents could open the windows for ventilation purposes if they chose to. The secure garden area at the rear was easily accessible to all residents. If a resident chose to access the garden beyond the secure area they could exit the centre via the front door and access the remainder of the grounds. To ensure the safety of all residents a key light switch was installed in the kitchen-dining area, as one resident likes to turn off the switch, however; other residents can access an over-ride switch located in another part of the room. The person in charge also evidenced a review of restrictions placed on residents while upgrading works were taking place in the designated centre in recent months. These restrictions were in place for a minimal amount of time and contractors worked with the staff team to ensure any disruption was kept to a minimum with advance planning meetings. The restrictions included residents accessing their bedrooms while the windows were being replaced. The restrictions were removed once the works were completed and the restrictive practice log updated to reflect this change.

## Oversight and the Quality Improvement arrangements

Overall, this designated centre had a welcoming and relaxed home for home atmosphere which used minimal and proportionate restrictive practices to keep residents safe both in the centre and in the community.

The person in charge spoke in detail about each restrictive practice that was in the restrictive practice log and outlined the practices that were specific to each resident. The inspector was satisfied that these were in place for a legitimate reason and subject to regular and on-going review by the staff team.

During the inspection through observations and in speaking with the person in charge, the inspector was satisfied that there was a positive culture in the centre which was focussed on maximising residents' choices and autonomy. Staff informed the inspector that the restrictive practices had been reviewed with consideration given to national policy and the guidance provided by the Health Information and Quality Authority in conjunction with the self-assessment questionnaire that had been completed prior to this inspection. In addition, an audit on restrictive interventions had been carried out by the provider in December 2019 in the designated centre. Actions identified in this audit had been completed or were being progressed. As part of the provider's review of restrictive practices the person in charge had completed a "rights checklist" for all residents in the designated centre which contained details of the restriction, the date of review, the name and position of the reviewer and additional comments if applicable.

At the time of the inspection the provider had reviewed the restrictive practice policy for the organisation. The inspector was shown a copy of this policy which had been received by the staff in the designated centre on the morning of the inspection. The inspector was also informed that the management structure and internal committees within the organisation were actively being reviewed. This has resulted in the organisation reviewing their Quality Improvement Plan. The provider had scheduled the first meeting of a new Rights Oversight Committee for the day after this inspection and the inspector was given an outline of the proposed committee members and role for this committee. It is proposed that the committee would be responsible for bi-annual reports to be compiled and these are to be reviewed by the executive team. Also, the provider plans to formalise a Quality Improvement Committee in the weeks following this inspection as part of the restructuring taking place in the organisation.

The person in charge outlined the reason why the update of one behaviour support plan was delayed. The staff team were supporting the resident and knew the resident very well. The resident had required increased support aligned to a medical condition and had acted out of character, however, at the time of inspection the resident was reportedly coping well.

The centre is well resourced with ample staffing to facilitate and support residents during the day and night. However, the staff and family members who spoke with the inspector outlined

the need to increase the service to seven days a week for the current residents in order to continue to support them in the future as their needs and support requirements change. All staff had received positive behaviour support training and this promoted the culture of positive behaviour support within the centre and reduced the need for restrictions that impacted on residents other than those for whom they were intended. Staffing arrangements enabled the centre to support residents with individualised requests. These staffing arrangements were key supports for residents to access meaningful community activities as seen during the inspection and verified through conversations with residents, family members and staff. In addition, the support received by the designated centre from volunteers in the local community was of great assistance to the staff team. The person in charge also spoke of the dedication of the staff team with fund raising events to improve facilities for the residents.

While the provider is progressing with governance and oversight on the use of restrictive practices in all of their designated centres, structures had yet to be formalised within the organisation. The recent review of the restrictive policy by the provider meant that not all staff in the organisation were aware of proposed changes to documentation regarding restrictive practices. While the inspector was assured by management that sub-groups will continue to meet to review safeguarding incidents until the new structures are in place, the re-organisation requires to be implemented to ensure residents are supported to live in environments where their safety is assured and restrictions are sanctioned when needed with regular review by the Rights Oversight Committee.



## Overall Judgment

The following section describes the overall judgment made by the inspector in respect of how the service performed when assessed against the National Standards.

<b>Substantially Compliant</b>	Residents received a good, safe service but their quality of life would be enhanced by improvements in the management and reduction of restrictive practices.
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### The National Standards

This inspection is based on the *National Standards for Residential Services for Children and Adults with Disabilities (2013)*. Only those National Standards which are relevant to restrictive practices are included under the respective theme. Under each theme there will be a description of what a good service looks like and what this means for the resident.

The standards are comprised of two dimensions: Capacity and capability; and Quality and safety.

There are four themes under each of the two dimensions. The **Capacity and Capability** dimension includes the following four themes:

- **Leadership, Governance and Management** — the arrangements put in place by a residential service for accountability, decision making, risk management as well as meeting its strategic, statutory and financial obligations.
- **Use of Resources** — using resources effectively and efficiently to deliver best achievable outcomes for adults and children for the money and resources used.
- **Responsive Workforce** — planning, recruiting, managing and organising staff with the necessary numbers, skills and competencies to respond to the needs of adults and children with disabilities in residential services.
- **Use of Information** — actively using information as a resource for planning, delivering, monitoring, managing and improving care.

The **Quality and Safety** dimension includes the following four themes:

- **Individualised Supports and Care** — how residential services place children and adults at the centre of what they do.
- **Effective Services** — how residential services deliver best outcomes and a good quality of life for children and adults , using best available evidence and information.
- **Safe Services** — how residential services protect children and adults and promote their welfare. Safe services also avoid, prevent and minimise harm and learn from things when they go wrong.
- **Health and Wellbeing** — how residential services identify and promote optimum health and development for children and adults.

List of National Standards used for this thematic inspection (standards that only apply to children's services are marked in italics):

## Capacity and capability

Theme: Leadership, Governance and Management	
5.1	The residential service performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each person and promote their welfare.
5.2	The residential service has effective leadership, governance and management arrangements in place and clear lines of accountability.
5.3	The residential service has a publicly available statement of purpose that accurately and clearly describes the services provided.

Theme: Use of Resources	
6.1	The use of available resources is planned and managed to provide person-centred, effective and safe services and supports to people living in the residential service.
6.1 (Child Services)	<i>The use of available resources is planned and managed to provide child-centred, effective and safe residential services and supports to children.</i>

Theme: Responsive Workforce	
7.2	Staff have the required competencies to manage and deliver person-centred, effective and safe services to people living in the residential service.
7.2 (Child Services)	<i>Staff have the required competencies to manage and deliver child-centred, effective and safe services to children.</i>
7.3	Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of people living in the residential service.
7.3 (Child Services)	<i>Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of children.</i>
7.4	Training is provided to staff to improve outcomes for people living in the residential service.
7.4 (Child Services)	<i>Training is provided to staff to improve outcomes for children.</i>

Theme: Use of Information	
8.1	Information is used to plan and deliver person-centred/child-centred, safe and effective residential services and supports.

## Quality and safety

<b>Theme: Individualised supports and care</b>	
1.1	The rights and diversity of each person/child are respected and promoted.
1.2	The privacy and dignity of each person/child are respected.
1.3	Each person exercises choice and control in their daily life in accordance with their preferences.
1.3 (Child Services)	<i>Each child exercises choice and experiences care and support in everyday life.</i>
1.4	Each person develops and maintains personal relationships and links with the community in accordance with their wishes.
1.4 (Child Services)	<i>Each child develops and maintains relationships and links with family and the community.</i>
1.5	Each person has access to information, provided in a format appropriate to their communication needs.
1.5 (Child Services)	<i>Each child has access to information, provided in an accessible format that takes account of their communication needs.</i>
1.6	Each person makes decisions and, has access to an advocate and consent is obtained in accordance with legislation and current best practice guidelines.
1.6 (Child Services)	<i>Each child participates in decision making, has access to an advocate, and consent is obtained in accordance with legislation and current best practice guidelines.</i>
1.7	Each person's/child's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.

<b>Theme: Effective Services</b>	
2.1	Each person has a personal plan which details their needs and outlines the supports required to maximise their personal development and quality of life, in accordance with their wishes.
2.1 (Child Services)	<i>Each child has a personal plan which details their needs and outlines the supports required to maximise their personal development and quality of life.</i>
2.2	The residential service is homely and accessible and promotes the privacy, dignity and welfare of each person/child.

<b>Theme: Safe Services</b>	
3.1	Each person/child is protected from abuse and neglect and their safety and welfare is promoted.
3.2	Each person/child experiences care that supports positive behaviour and emotional wellbeing.
3.3	People living in the residential service are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.
3.3 (Child Services)	<i>Children are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.</i>

<b>Theme: Health and Wellbeing</b>	
4.3	The health and development of each person/child is promoted.

