



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

Issued by the Chief Inspector

Name of designated centre:	Sonas Services
Name of provider:	Ability West
Address of centre:	Galway
Type of inspection:	Announced
Date of inspection:	22 October 2019
Centre ID:	OSV-0004073
Fieldwork ID:	MON-0022563

About the designated centre

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

This centre consists of two semi-detached houses located in a housing estate of a large city in the west of Ireland. The centre can accommodate up to four residents both male and female who have an intellectual disability. The centre has adequate communal rooms, such as, two sitting rooms, three bathroom/toilets, two kitchens and a dining room and there are five bedrooms in the centre. The centre has a garden to the front and rear of the premise. The centre is vacant at present.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	0
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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
22 October 2019	13:00hrs to 15:00hrs	Thelma O'Neill	Lead

What residents told us and what inspectors observed

There are no residents residing in this centre at the time of the inspection.

Capacity and capability

This centre was last inspected on the 6th September 2016. However, following the last inspection, the provider took the decision to relocate the residents living in the centre to more independent apartments in the locality, and this centre has remained vacant since then. An extensive renovation of the property has taken place and the premise looks more modern and has been completely painted and refurnished.

The governance and management of this centre has changed since the last inspection. A new person in charge has been appointed to manage the centre, as well as an area manager and they are both suitably qualified and experienced to manage this centre.

The management team are currently assessing suitable candidates for admission to the centre and one person is expected to be admitted for respite in November 2019, from another designated centre. The person in charge told the inspector that once the decision was made, as to when the first admission will take place; appropriate staffing arrangements will be put in place to meet the resident's needs. In addition, as further admissions occur, the staffing allocation will be increased in line with new residents' assessed needs. The person in charge also advised the inspector that once the residents are admitted to the centre, a full review of their care and support needs will take place within 28 days of admission.

The inspector reviewed the 12 actions identified on the last inspection in 2016 and the provider had completed all of the actions as required.

Registration Regulation 5: Application for registration or renewal of registration

The provider had applied to renew the registration of this centre in line with statutory requirements.

Judgment: Compliant

Regulation 14: Persons in charge

The person in charge works full-time and manages another designated centre. She has the required the qualifications, skills and experience necessary to manage the designated centre.

Judgment: Compliant

Regulation 23: Governance and management

There was a clearly defined management structure in the designated centre, that identifies the lines of authority and accountability, and specifies the roles and details responsibilities for all areas of service provision.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

The provider had appropriate admissions procedures in place to ensure the service was suitable to meet the needs of prospective residents.

Judgment: Compliant

Regulation 3: Statement of purpose

The registered provider had prepared in a statement of purpose for the centre containing the information set out in Schedule 1 of the regulations.

Judgment: Compliant

Regulation 4: Written policies and procedures

The provider had ensured that staff had access to all schedule 5 policies as listed in the regulations in the centre.

Judgment: Compliant

Quality and safety

There were no residents admitted to the centre on the day of the inspection. The inspector focused on the safety and suitability of the premise and health and safety measures in place in relation to risk management. This included fire safety measures and environmental risks.

The premise consisted of two semi-detached houses. They were joined internally which allowed free access throughout the two houses. The centre had recently been completely renovated and all of the rooms were painted and the communal rooms were redecorated and modernised. For example, new furniture was purchased to decorate the communal rooms in both houses in the centre. The person in charge told the inspector that they would complete furnishing the bedrooms when the residents being admitted to the centre, had been offered a place. This would allow the residents to choose their own furniture and personalise their bedrooms in line with their wishes.

The provider had appropriate risk management systems in place to ensure residents admitted to the centre would be safe, and any individualised risks would be appropriately managed. There was a centre risk register and environmental risk assessments completed, these showed how the provider had identified and was managing environmental risks in the centre. The person in charge told the inspector that they would assess individual residents' risks on their admission to the centre, and put appropriate measures in place to address any concerns identified.

In addition, the registered provider had effective fire safety management systems in place in the centre. There was appropriate fire equipment installed in the centre, such as, fire extinguishers, fire blankets, fire doors, emergency lightening. In addition, fire evacuation procedures were in place which identified the fire exits and assembly point in the event of a fire. In addition all staff working in the centre had completed fire safety training and this was a continuous training as part of their professional development.

Regulation 17: Premises

The provider had renovated the premise to ensure it was designed and laid out to meet the aims and objectives of the service, of sound construction and kept in a good state of repair externally and internally, clean and suitably decorated.

Judgment: Compliant

Regulation 26: Risk management procedures

The provider had appropriate risk management policies in place.

Judgment: Compliant

Regulation 28: Fire precautions

The registered provider had effective fire safety management systems in place in the centre.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

Regulation Title	Judgment
What residents told us and what inspectors observed	
Capacity and capability	
Registration Regulation 5: Application for registration or renewal of registration	Compliant
Regulation 14: Persons in charge	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 4: Written policies and procedures	Compliant
Quality and safety	
Regulation 17: Premises	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant