

Health Information and Quality Authority

An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte

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

Issued by the Chief Inspector

Name of designated centre:	Claddagh House
Name of provider:	Resilience Healthcare Limited
Address of centre:	Galway
Type of inspection:	Unannounced
Date of inspection:	06 June 2023
Centre ID:	OSV-0008085
Fieldwork ID:	MON-0040350

About the designated centre

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

Claddagh House is in a quiet location, set back from the main road. The house is decorated and furnished to a very a high quality, modern style that promotes independence, comfort and relaxation. Claddagh house is set in a tranquil area on a mature site. It is located 40 minutes to the city of Galway. Claddagh House provides a Home from Home, high support, residential service for children/young people with an Autism spectrum disorder, intellectual disabilities and physical & sensory needs. The centre provides full time support to a maximum of four service users at any one time and can accommodate either male or female. Claddagh House residential care services are provided to individuals under 18 years, with comprehensive transitioning and preparation for adulthood commencing at seventeen years of age.

The following information outlines some additional data on this centre.

Number of residents on the	3
date of inspection:	

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 (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
Tuesday 6 June 2023	11:00hrs to 17:00hrs	Cora McCarthy	Lead

What residents told us and what inspectors observed

This was an unannounced thematic inspection to monitor compliance with Regulation 27: Protection against infection.

On arrival at the centre the inspector met the person in charge who checked the inspector's identification and the inspector signed into the centre. On the day of inspection the inspector met the three young people who resided in the centre, the person in charge and two staff members.

The centre was undergoing some building works at the time of inspection and as such was dusty and unclean. A new sensory room had been developed with double doors put in for safe and quick evacuation in the event of a fire. The kitchen, bathrooms and overall house required cleaning and the external garden area also required improvement. There was a good system in place for laundry management. There were full and clean hand sanitizer units and paper towels dispensers and adequate personal protective equipment available for staff use. While the house was not fully clean, the inspector noted that the person in charge had contracted specialist cleaners to do a deep clean of the building on completion of the building works and they were due the following day. The young people each had their own bedrooms and had chosen to decorate them to their taste.

The young people were in and out throughout the day and the inspector had the opportunity to observe staff supporting them at mealtimes and with activities. Some of the young people engaged in behaviours of concern during the inspection and the inspector observed staff managing the situation effectively. Although some of the young people exhibited anxiety during the inspection, staff who knew them well explained that they found the warm weather overwhelming and that this was the cause of some of the behaviours. The staff were noted to fill a paddling pool for one young person to cool off to help them to relax. Overall the young people seemed happy and content in the centre and indicated this through gestures and vocalisations and in their interactions with staff. The care and support provided to them was observed to be from a kind and respectful staff. The staff with whom the inspector met were very knowledgeable about their needs and responded appropriately to those needs.

From review of activity charts, observation and speaking with staff the inspector was able to ascertain that the young people led active lives and were supported to engage in meaningful activities in a person-centred environment. Photographs and daily notes indicated that the young people engaged in activities in the community such as eating out, horse riding, walks and one young person had recently received their confirmation. The children enjoyed cooking and baking, messy play and days out at the beach. There were notes around family engagement and visits were encouraged and supported. The young people also attended school daily.

The young people's rights were promoted in the centre as there was regular

consultation with them, there was easy-to-read documentation on the notice board regarding the complaints officer and advocacy. There was a poster regarding the confidential recipient and the support they offered. There were posters throughout the centre explaining hand hygiene and cough etiquette. The young people were consulted regularly regarding what activities and meals they would like. There was also a house vehicle and the young people could request outings and trips home to see family as they wished.

In summary, the inspector found that the young people in the centre received a good quality of care and support and there was a visible person-centred culture within the designated centre.

The next two sections of the report outline the findings of this inspection in relation to the governance and management arrangements in place in the centre and how these arrangements impacted on the quality and safety of the young peoples lives.

Capacity and capability

The provider was in compliance with the requirements of Regulation 27 and procedures that were consistent with the National Standards for infection prevention and control in community services (HIQA, 2018).

The designated centre had a clearly defined management structure which identified the lines of authority and accountability. There was a full-time person in charge in the centre who ensured that the service provided was safe, appropriate to the three young people needs. There was full awareness among the staff team regarding infection, prevention and control and their responsibility to ensure the safeguarding of the young people. There was an infection prevention and control audit completed in the centre in May 2023 which indicated that the provider is assured through staff supervision, monitoring and review that managers and members of staff understand their infection prevention and control responsibilities. Infection prevention and control issues were highlighted, escalated and addressed in an appropriate time frame and deep cleaners had been contracted as a result of this audit. The provider had completed the self-assessment tool on a quarterly basis also. The person in charge had responsibility for infection prevention and control within the centre and escalated issues as they arose.

The provider had ensured an annual review had been completed for 2022 and two six monthly unannounced audits also. These audits ensured that staff have access to education and suitable training in infection prevention and control appropriate to their role and in line with national, HSE and HPSC guidance. They ensured that infection prevention and control were discussed at team meetings and supervision and supervision meetings were planned ahead with either team leader or manager and these occur six weekly or more often where required. Staff team meetings were scheduled monthly and there was evidence of minutes of the team meeting and infection prevention and control was on the agenda and any issues that arose were addressed. There was also rosters and easy-to-read documents about infection, prevention and control and social stories in place for service users.

The inspector reviewed the rota over a four week period and found that there were adequate staff to support the young people with their assessed needs. The inspector noted that there was continuity of care provided from a core staff team and that the qualifications and skill-mix of staff was appropriate to the assessed needs of the young people, the statement of purpose and the size and layout of the designated centre. Staff were observed supporting the young people with meals and activities and were noted to be very person centred and respectful of them.

The inspector reviewed the training records and found that all staff had received training in infection prevention and control, hand hygiene and personal protective equipment. The staff with whom the inspector spoke had a very good knowledge of the training they received and how to apply it in practice. The staff were very aware of the reporting systems in place in the event of an infection outbreak and the isolation procedures to follow to prevent transmitting infection. The staff team were able to outline their responsibilities in terms of cleaning and maintenance of good infection prevention and control. They were observed to support the young people with hand hygiene and also to practice good hand hygiene themselves on the day of inspection.

The provider had an infection prevention and control policy in place and the National Standards for infection prevention and control in community services (2018) was also available to staff for guidance. There was a range of guidance documents available to staff from the Health Service Executive, the Health Protection and Surveillance Centre and, the Health Information and Quality Authority. An infection prevention and control strategy was in place that takes into account: contingency planning, emergency plans, outbreak management plans, allocation of resources and deputising arrangements.

There was enhanced cleaning schedules available if required and advice on young people isolating and staffing difficulties in the event of an infection outbreak.

Quality and safety

Overall, the inspector found that the service provided in this centre was to a good standard and was person-centred. However the centre required a deep clean following completion of building work and for this standard of cleanliness to be maintained going forward.

The inspector completed a walk through of the centre and found it to be bright and modern. However the centre was unclean due to building works. The building work was being completed on the day of inspection and the person in charge had booked

a contract cleaner to do a deep clean the day after the inspection. A new room was being developed as a sensory room for the young people. The young people's bedrooms were personalised with bed linen and curtains chosen by them. The laundry area had signage up regarding coloured mops and cloths and what temperature they were to be laundered at. The person in charge had put a cleaning schedule in place which outlined the areas to be cleaned, how often and the products to be used. There was a policy and cleaning protocol which provided guidance for staff on cleaning the centre.

Overall there were good laundry management practices in the centre and clear protocols in terms of use of alginate bags and transfer of soiled clothing. There was guidance in relation to temperatures which the clothes were to be washed at and the use of a clean and soiled linen basket. There was guidance available regarding products to be used, temperatures to wash cloths and mops at and what colours were for each area. There was a cleaning schedule in place for the centre and house vehicle and systems in place for waste management and disposal.

The person in charge required greater oversight of cleaning schedules as while building work was underway the cleaning of the centre had slipped somewhat. The staff team had a good understanding of their responsibilities in relation to infection prevention and control and were familiar with the process in the event of an outbreak of infection. Staff were observed to practice hand hygiene and cough etiquette throughout the day of inspection

The person in charge had ensured there was risk management system in relation to risks associated with infection. Identified risks had been assessed and proportionate control measures put in place to support positive risk taking.

The young people residing in the centre were supported to maintain good health. Records indicated that the young people were facilitated to attend doctors' appointments as necessary and families were supported with referrals and follow up recommendations. Infection prevention and control had been discussed with the young people and they were supported to understand changes in guidance such as staff no longer having to wear face masks on a daily basis. The young people had all chosen with support from family and staff to take the vaccination for COVID-19. They were given the option of taking the booster vaccination also; these were explained through use of a social story.

Regulation 27: Protection against infection

The provider was in compliance with the requirements of Regulation 27 Infection prevention and control.

The inspector found the house was unclean on the day of inspection however the centre was undergoing building works and was dusty and dirty, the person in charge had arranged a deep clean of the centre the day after the inspection. The staff team had been provided with all the mandatory training and there was a policy available

which was reviewed regularly and provided clear guidance for staff in infection, prevention and control. There was guidance in how to recognise the signs and symptoms of infection and what steps to take to safeguard the young people from the risk of transmissible infection. There was a clear reporting pathway for escalating issues around infection prevention and control as they arose.

There were adequate supplies of personal protective equipment for staff and for supporting the young people with personal care.

There were posters and social stories in the centre regarding infection prevention and control and it was also discussed with the young people and with the staff at their team meetings and supervision.

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 (as amended) and the regulations considered on this inspection were:

Regulation Title	Judgment	
Capacity and capability		
Quality and safety		
Regulation 27: Protection against infection	Compliant	