



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

Issued by the Chief Inspector

Name of designated centre:	Kilfenora
Name of provider:	St Michael's House
Address of centre:	Dublin 13
Type of inspection:	Unannounced
Date of inspection:	16 February 2023
Centre ID:	OSV-0002343
Fieldwork ID:	MON-0039043

About the designated centre

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

Kilfenora is a designated centre operated by Saint Michael's House located in North Dublin. It provides residential care to six adults with a disability. The centre comprises of a two storey house and a self-contained apartment which is located to the rear of main house. The house consists of two sitting rooms, a kitchen/dining room, utility room with laundry facilities and six bedrooms of which five are used by residents, office/staff sleepover room and two bathrooms. The apartment consists of a sitting room with kitchenette facilities and a bedroom with an en-suite. The centre is staffed by a person in charge and social care workers. In addition, the provider has arrangements in place to provide management and nursing support outside of office hours and at weekends if required.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	6
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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 (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 16 February 2023	10:15hrs to 15:15hrs	Jennifer Deasy	Lead
Thursday 16 February 2023	10:15hrs to 15:15hrs	Karen McLaughlin	Support

What residents told us and what inspectors observed

This unannounced inspection took place to assess the provider's compliance with Regulation 27: Protection against Infection and the associated National Standards for Infection Prevention and Control (IPC) in Community Settings (HIQA, 2018).

As part of this inspection, the inspectors met the residents who lived in the centre, staff on duty and the person in charge. The inspectors also observed the care and support interactions between residents and staff at throughout the day. Measures were taken by staff and inspectors to reduce the risk of transmission of infection. This included wearing face masks and regular hand hygiene.

On arrival at the centre, one resident was getting ready to attend an appointment. Another resident was going for coffee with them after the appointment. The inspectors had the opportunity to meet with the residents when they returned from the outing and when the others returned from day services. One resident showed inspectors the new kitchen when he returned from work. At this time there was no restrictions on visitors.

The inspectors found that the residents were receiving a good quality service in a homely and suitably decorated house, supported by a staff team in line with the residents assessed needs. The inspectors were shown around the house by the person in charge, who was knowledgeable and familiar with the organisation's infection, prevention and control policies and procedures. The centre was observed to be a clean and tidy, warm and comfortable environment.

The person in charge was responsible for ensuring that the provider's systems and policies regarding infection control were implemented. The inspectors were informed that there was an up-to-date outbreak contingency plan and that the residents were aware of IPC measures throughout the centre. From speaking with the person in charge and staff, it was evident that many precautions had been taken to keep residents safe from the risk of infection without negatively impacting their quality of life.

It was also clear that the management and staff had supported residents in understanding infection prevention and control measures in an appropriate format that suited their needs. For example, the inspectors observed picture instructions located in the bathroom, demonstrating good hand hygiene. Staff also modelled good hand hygiene practices and this was observed throughout the inspection. Inspectors spoke to one resident who demonstrated his understanding of good cough etiquette.

The remainder of this report will present the findings from the walk-around of the designated centre, discussions with staff and a review of the providers' documentation and policies and procedures in relation to infection prevention and control. The findings of this review will be presented under two headings before a

final overall judgment on compliance against regulation 27: Protection against Infection is provided.

Capacity and capability

Overall, it was found during this inspection that the provider's management arrangements ensured that a good quality and safe service was provided for the residents living in this centre. The residents quality of life was well supported and that the residents were safeguarded from infectious diseases, including COVID-19.

There were systems in place for reviewing and monitoring the service to ensure that a high standard of care, support and safety was being provided and maintained, which included six monthly provider-led audits and various other internal audits completed by the person in charge and staff. These monitoring systems looked extensively at many aspects of the service delivered to the resident and included the assessment framework against which regulation 27 Protection against Infection is linked. In addition, as well as the required six-monthly unannounced provider reviews of the centre, the registered provider had a nominated person for Infection Control.

There was a clear organisational structure to manage the centre. There was a suitably qualified and experienced person in charge who reported to the service manager. The person in charge commenced their role in June 2022, and this was their only designated centre. They worked a regular shift pattern with the staff team but had assigned specific management days throughout the roster.

The inspectors found that both the person in charge and the service manager were involved in the oversight of infection control management in the centre. The person in charge was found to be present in the centre, knew the residents and their support needs, and was available to staff as required. Infection control and COVID-19 documentation viewed during the inspection was informative and up to date. There was a nominated person on the staff team identified to oversee IPC measures within the centre.

The centre had the necessary resources to provide care and support to the resident in an effective manner. These resources included the provision of suitable, secure, and comfortable equipment and furnishings, suitable transportation for the resident's use and sufficient staffing levels to support the resident. Couches in the communal living areas were deep-cleaned once a year by an outside service as were the sky-lights throughout the centre.

The provider had developed an infection, prevention and control policy which was up to date. The policy referred to the roles and responsibilities of staff, staff training and education, hand hygiene, sharps and waste management. In addition to the infection prevention and control policy, the provider had developed a suite of internal controls to support good practice and adherence to these policies and

procedures, including requiring staff to complete mandatory training in infection prevention and control, environmental audits, and daily and weekly cleaning checklists.

Under the national standards, it is important that providers ensure their staff have the competencies, training and support to enable safe and effective infection prevention and control. The centre had a full complement of staff whose IPC training was all up to date, with refresher training completed within the last 6 months. Staff members spoken with were aware of how and to who to raise any infection prevention and control concerns. Staff were knowledgeable regarding standard and transmission based infection precautions.

The inspectors looked at a sample of recent staff meeting minutes and observed that COVID-19 and the infection control measures in place were frequently discussed. Staff were also in receipt of regular supervision. There was also an on-call service in operation outside of normal working hours for staff to raise concerns or seek guidance if required. The person in charge was also in receipt of regular supervision and support from the wider management team.

Quality and safety

With regards to infection prevention and control, the registered provider and management team were ensuring that the service provided was safe and in line with national guidance for residential care facilities. It was evident that infection control was a focus in the centre and that the quality of care was regularly reviewed to ensure compliance with best practice and the National Standards for infection prevention and control in community services (HIQA, 2018).

A key measure for minimising the risks that can come with infectious diseases is ensuring that effective cleaning is carried out consistently. It was seen that there were schedules in place for routine cleaning of different rooms, and from what inspectors observed, there was a high level of cleanliness maintained. During the walk around of the centre, the inspectors noted the centre was clean and maintained in a hygienic condition throughout and was well maintained. The centre was also decorated and furnished in a manner that suited the needs and preferences of the residents who lived there.

There was a comprehensive cleaning schedule in place. Staff members completed the necessary daily and weekly cleaning chores according to the provider's cleaning schedules. These schedules were regularly spot-checked by the person in charge. Staff spoken with were clear on the practises and procedures required and how these tasks were carried out, and these were observed by inspectors during the inspection.

Documentation relating to the residents was also reviewed during this inspection, primarily from an infection prevention and control perspective. The resident's health,

personal and social care needs were regularly assessed, and care plans were developed based on the residents assessed needs. Isolation plans for each resident were personalised and took into account each residents needs. The plans of care viewed during the inspection were up-to-date, informative and relevant. Family members of residents who provided feedback for the annual review said the quality of care was 'exemplary' with another saying 'creating a family ethos-wonderful'.

The person in charge discussed developments made towards the resident to achieve the best possible health by being supported to attend medical and healthcare appointments as required. Residents were informed of what appointments they were attending, with all residents having received their last COVID-19 booster.

The provider had implemented systems to support the provision of information, escalation of concerns and responses to infection prevention and control matters. The provider produced a current contingency plan in response to COVID-19, which outlined how the centre prepared for and would respond to an outbreak of COVID-19. The contents of this plan were reviewed regularly at staff meetings and with the providers IPC committee to reflect and include any changes against national guidance.

To reduce the risk of infection spread, the centre was additionally equipped with many physical facilities. These included hand sanitiser dispensers placed throughout the centre, disposable gloves and aprons, cleaning supplies, thermometers for temperature monitoring, pedal-operated bins and single-use hand towels. There was a press full of cleaning products and PPE with clear instructions for use displayed clearly on inside of door. The contents of the press was audited regularly to check for expiry dates of the stock and to replenish any stock used. The cleaning system was colour coded and the kitchen equipment and utensils (including crockery and cutlery) were deep cleaned every Friday.

The inspectors observed appropriate infection control practices in place concerning waste disposal and laundry management. Alginate bags were provided for soiled laundry, there was suitable storage of towels and the washing machine and tumble dryer were observed to be clean. The centre had a sharps bin for use of disposal of needles used by a resident. This was stored appropriately, audited regularly and had clear instructions for use.

Regulation 27: Protection against infection

The purpose of the inspection day was to monitor the centre's levels of compliance with Regulation 27 and the National Standards for infection prevention and control in community services (HIQA, 2018). The provider was able to clearly demonstrate how they were ensuring they had implemented the national standards for infection prevention and control in accordance with regulation 27. This was evident by the following:

- There was evidence of quality assurance audits being performed on a regular basis to check on the safety and effectiveness of the care being provided. This included the annual review from 2022, which identified areas for improvement, in particular to premises and maintenance issues.
- There were effective systems in place for workforce planning that ensured there were suitable numbers of staff employed and available with the right skills and expertise to meet the centre's infection prevention and control needs.
- There was good local oversight with the person in charge carrying out regular spot checks.
- There was a full staff team who were up to date in IPC training. Staff members spoken with had a good knowledge of standard and transmission-based precautions. Staff were seen adhering to standard precautions throughout the day in the form of mask wearing and appropriate hand hygiene.
- Residents were informed and teaching/guidance was in place regarding infection transmission in the form of easy-to-read information displayed throughout the centre. This support was also evident in the residents care plans which were comprehensive and personalised and created in consultation with the individual resident.
- There was a system in place for identifying and mitigating potential and actual infection control risks in the centre. The premises and the environment was visibly clean and well maintained. Schedules were in place to ensure that all aspects of the premises was regularly cleaned and deep cleaned.
- Policies and procedures were in place to guide safe practices in areas including laundry procedures, hand washing facilities and cleaning procedures.
- There was regular and consistent communication between staff, management and residents regarding infection prevention and control measures in the centre.

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