



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

## Issued by the Chief Inspector

Name of designated centre:	Binn Eadair
Name of provider:	St Michael's House
Address of centre:	Dublin 5
Type of inspection:	Unannounced
Date of inspection:	18 July 2022
Centre ID:	OSV-0002371
Fieldwork ID:	MON-0035591

## About the designated centre

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

Binn Eadair is a designated centre operated by St. Michael's House. The centre comprises a six bedroom bungalow in a small North Dublin suburb. Each of the residents have their own bedroom and there are two sitting rooms and a kitchen come dining room. There is a large spacious garden to the rear of the centre. It provides residential care and support to up to five adults with mild to moderate intellectual disabilities. The centre is located in close proximity to a range of local amenities and services. These include public transport, pharmacy, church, shops, coffee shops, restaurants and pubs. The staffing arrangements for the centre consists of a social care leader who is the person in charge and a team of social care workers, with access to nursing support if required.

**The following information outlines some additional data on this centre.**

Number of residents on the date of inspection:	5
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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
Monday 18 July 2022	09:10hrs to 15:25hrs	Jennifer Deasy	Lead

## What residents told us and what inspectors observed

This inspection was carried out to assess the arrangements in place in relation to infection prevention and control (IPC) and to monitor compliance with the associated regulation. This inspection was unannounced. The inspector met and spoke with staff who were on duty and had the opportunity to meet with all residents on the day of inspection. The inspector wore a face mask and maintained social distancing whenever possible during interactions with staff and residents.

The inspector saw, on arrival to the centre, that it was clean, well-presented and welcoming. Staff who greeted the inspector were wearing appropriate personal protective equipment (PPE) and checked with the inspector for any COVID-19 related symptoms. The inspector saw that a wall mounted hand sanitiser was available inside the front door along with accessible signage relating to COVID-19 and hand hygiene.

The inspector met one resident on arrival who was getting ready to access the community independently. This resident chatted with staff and asked about making contact with their family. Staff assured the resident that they would support this. The inspector saw staff assisting this resident to get ready to go out in a kind and respectful manner. The inspector saw that this resident had their own keys and chose to keep their bedroom locked.

The inspector met two other residents who were retired from day service. They chose to engage in their preferred activities in the house on the day of inspection. The inspector saw these residents chatting to staff in a familiar manner and making their own lunches, snacks and cups of tea during the day.

Other residents came and went during the course of the day. These residents were seen to be comfortable in their home and in the company of staff. Residents told the inspector about recent community activities such as attending concerts and going out for dinner. Residents told the inspector that they were very happy with recent works that were completed in the centre. They were particularly happy with a new kitchen that had been fitted.

Some residents showed the inspector their bedrooms. The inspector saw that these were personalised in line with individual preferences and were generally well maintained. The residents also showed the inspector their ornaments and photographs that decorated communal areas.

The premises was clean and homely. Residents had access to two sitting rooms, two large accessible bathrooms, a toilet, utility and kitchen. These areas were all seen to be clean. There was adequate availability of hand sanitiser and hand washing facilities throughout the house. The inspector also saw guidance for staff and residents relating to laundry in the utility room and cleaning procedures in the utility

and kitchen.

A large, well-maintained garden was available to residents. This was well presented and contained garden dining furniture, a barbecue and plant pots with flowers. The residents commented that they felt a garden swing would be a nice addition to their garden.

Residents told the inspector that they enjoyed receiving visitors in the designated centre and that their family and friends were free to visit without restrictions. Residents spoke about how difficult it was for them during the recent pandemic. Some residents contracted COVID-19 early in the pandemic and required additional medical intervention in an isolation centre. Residents spoke about how upsetting this was for them at the time and how relieved they were to return to their home. Residents were well informed regarding measures to protect themselves from contracting COVID-19 including mask wearing and hand hygiene.

Overall, the inspector found that the centre was operating at a high standard for infection prevention and control practices and that the registered provider had implemented measures to protect residents from acquiring a healthcare-associated infection.

The following sections of the report will present the findings of the inspection with regard to the capacity and capability of the provider and the quality and safety of the service.

## Capacity and capability

The inspector found that the registered provider had implemented effective governance and management procedures to mitigate against the risk of residents acquiring a healthcare-associated infection. The inspector saw that infection prevention and control (IPC) was prioritised in this designated centre and that there was effective communication from senior management to staff and residents in relation to IPC.

The provider had nominated a responsible person at the highest level to support oversight of IPC. Staff were knowledgeable regarding how to contact this person.

The inspector was informed that the provider had recently hosted a series of webinar trainings for staff in IPC. IPC was a standing item for discussion at staff and resident meetings. Staff were informed regarding the updated IPC policy and had signed off as having read this within the last two months.

The inspector saw that the centre cleaning schedules and guidance for staff in the management of soiled linen had been updated in line with provider's policy. There was clear guidance for staff in how to clean different areas of the centre and which

products to be used.

There were a series of audits in place in the designated centre which captured general risks as well as IPC related risks. These audits included an annual review, six monthly unannounced visits, monthly health and safety reports and a monthly infection control checklist. These audits reflected risks and comprehensive action plans were derived from these. The inspector saw that actions were progressed across audits. This demonstrated that audits were being used to drive service improvement.

The person in charge had also completed additional audits including a recent audit of hand sanitiser and PPE stocks in the designated centre. This had resulted in actions which were implemented. These actions included removing out of date hand sanitiser and ordering new supplies.

The inspector saw that there was a centre specific outbreak preparedness plan as well as a contingency planning assessment for COVID-19. These plans had been recently reviewed and updated in line with the provider's policy and current public health guidance. There was clear guidance on the procedure for staff to follow in the event of a confirmed or suspected case of COVID-19. Staff spoken with were knowledgeable regarding the process to be followed. The inspector also saw that there were emergency PPE stations which could be positioned outside resident bedrooms in the event of a resident becoming symptomatic of COVID-19.

The centre benefited from a well-established staff team. The majority of staff had worked in the centre for many years and knew the residents and the service needs well. A review of the roster demonstrated that the staffing levels and skill mix were as per the statement of purpose and were in line with the residents' assessed needs. Gaps in the roster were filled by a small panel of relief staff. This supported continuity of care for residents.

Staff reported that they felt well supported in their roles. They were aware of their roles and responsibilities in reducing the risk of residents acquiring a healthcare-associated infection. It was clear to the inspector that staff had good knowledge of standard precautions. There was generally a very high level of mandatory and refresher training maintained in the centre. All staff had completed training in IPC. This was completed every six months by staff. All staff had also completed training in other areas relating to IPC such as food safety.

## Quality and safety

The inspector found that the services provided in this centre were person-centred and that residents were well informed, involved and supported in taking responsibility for the prevention of healthcare-associated infections in their home.

It was clear, from talking to residents, that they had been supported to understand

why certain IPC practices were in place. Residents could describe the measures they took to protect themselves and others from COVID-19. Easy to read information relating to hand hygiene and COVID-19 was also available. IPC was regularly discussed at resident meetings.

Individual residents were supported to understand IPC precautions to be taken in the management of their own laundry. Some residents chose to launder their own clothes and linen. The inspector saw that these residents had been provided with education regarding the management of soiled linen and had been supplied with alginate bags for this purpose. There was an up-to-date risk assessment in place in this regard.

Other residents chose to have individual keyworking meetings with staff rather than attend the residents' meeting. The inspector saw that minutes were maintained of these meetings and that IPC was regularly discussed. Broader IPC and health-related issues were discussed including access to the Influenza vaccinations and health care appointments.

A walk through of the house was completed by the inspector with the person in charge. The house was very clean and well maintained. The centre had recently been fitted with a new kitchen. Residents stated that they were happy with their kitchen. Food was stored in the fridge in a hygienic manner. The inspector saw that there was a handwash sink available with soap and disposable hand towels in the kitchen. The inspector saw staff adhering to good hand hygiene practices throughout the day.

Cleaning schedules were in place for day, night and weekly cleaning. Schedules included information on specific high touch items to be regularly cleaned and on the products to be used for disinfection. Additionally, a cleaning schedule was maintained for the washing machine and tumble dryer and these were seen to be clean on inspection.

Equipment required for residents' activities of daily living was also regularly cleaned. There was minimal medical equipment required in the centre. There was one blood pressure cuff. The inspector was informed that this was cleaned between use by residents. Single use catheter flushes were available for those residents who required them. These were disposed of in a safe manner. Staff were knowledgeable regarding the standard precautions to be taken in relation to catheter care. Staff had received training in this regard.

A review of residents' files demonstrated that they had access to healthcare professionals as per their assessed needs. Residents had a hospital passport on file to support sharing of important information across services.

There had been no outbreaks of COVID-19 or any other notifiable disease in the centre within the last year. The inspector saw, from reviewing notifications, that staff were proactive in notifying senior management in relation to suspected symptoms of COVID-19. Staff followed the provider's procedures by isolating themselves and seeking a PCR test.

Staff reported that they were diligent in relation to mask wearing and hand hygiene and that residents also took measures to protect themselves. Staff described supporting residents to take positive risks when accessing the community. For example, requesting a table in a restaurant that was an appropriate distance away from other tables.

## Regulation 27: Protection against infection

The inspector found that the practices in the designated centre were in line with the National Standards for Infection prevention and control in community services (HIQA, 2018).

There were effective management arrangements in place which ensured oversight of IPC in the centre.

There was clear communication of the provider's IPC policies and procedures to staff and residents.

Documentation was available to guide staff in their roles and responsibilities in relation to general IPC measures as well as additional measures to be taken in the event of an outbreak of infection.

Staff demonstrated comprehensive knowledge of IPC in general, and as it related to their roles and responsibilities. This supported the delivery of safe and quality services in the centre.

The centre was operating a person-centred service where residents were informed and knowledgeable regarding IPC. Residents were supported to understand IPC risks and take responsibility for the management of their own healthcare and laundry in line with the provider's policy and as per their preferences.

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
<b>Capacity and capability</b>	
<b>Quality and safety</b>	
Regulation 27: Protection against infection	Compliant