



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

Issued by the Chief Inspector

Name of designated centre:	Innisfree
Name of provider:	Health Service Executive
Address of centre:	Sligo
Type of inspection:	Announced
Date of inspection:	23 August 2023
Centre ID:	OSV-0002627
Fieldwork ID:	MON-0031856

About the designated centre

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

Innisfree is a centre run by the Health Service Executive and is located on the outskirts of a town in Co. Sligo. The centre provides residential care for up to four male and female residents, who are over the age of 18 years and have an intellectual disability. The centre comprises of one bungalow with residents having access to their own bedroom, shared bathrooms, communal areas and garden space. Staff are on duty both day and night to support the residents who live here.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	3
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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
Wednesday 23 August 2023	10:15hrs to 16:30hrs	Jackie Warren	Lead

What residents told us and what inspectors observed

The residents who lived in this centre had a good quality of life, had choices in their daily lives, were supported with personal development, and were involved in activities that they enjoyed. The person in charge and staff were very focused on ensuring that a person-centred service was delivered to these residents.

The inspector met with the residents, who were happy to talk about what it was like to live there. They said that they were very happy living in the centre and enjoyed their daily lives there. Residents told the inspector that they had good involvement in the community and referred to some of the social and leisure activities that they took part in and enjoyed.

Resident said that they enjoyed going out in the community for meals, outings to various activities and places of interest, meeting up socially with friends, gardening, going to social gatherings, eating out, bingo and going for walks. They also enjoyed taking part in everyday community activities such as going to the hairdresser, bank, recycling centre and church, attending medical appointments and going to the supermarket for grocery shopping. Family was also very important to these residents and family visits and communication were being widely supported by staff. Transport was available so that residents could go for leisure activities and to attend local amenities.

On arrival at the centre, residents welcomed the inspector, and were very clear about what the inspection involved and why it was taking place. A resident showed the inspector around the house. All residents invited the inspector to see their bedrooms, which was decorated to their liking, and were suitably furnished and personalised. Residents then invited the inspector to join them for a cup of tea and a chat in the kitchen. During this time, residents told the inspector that they were very comfortable and happy in the centre.

One resident talked about the importance of religion to them and proudly told the inspector about having completed the pilgrimage to 'The Reek' four times. The resident was also being frequently brought to Mass in Knock, religious celebrations in the local areas and to attend funerals. Another resident was involved in a fishing group and a greenhouse gardening project both of which were taking place in the local community. A resident who enjoyed rural lifestyles often attended local agricultural shows and had been to the ploughing championships with staff. Residents also talked about the house meetings and said that they really enjoyed these and found them useful.

The residents told the inspector that they had good relationships with staff. They stressed that they had no complaints or concerns, but also knew and that they could raise any issue with staff and were confident that it would be addressed. Residents knew who was in charge in the centre, and they said that they trusted the staff. Residents told the inspector that they enjoyed their meals in the centre. They

explained that they had choices around their food shopping and meals, and that staff prepared meals that they liked, at the times that suited them. They also said that they often went out to the town for a meal, coffee or a drink and that they enjoyed this.

Residents said that they all get on well together in the centre, and it was clear during the inspection that there was a good rapport between the residents themselves and between residents and staff. Holidays and outings were also important to residents and they discussed holidays that they had been on, and they were planning to go on holidays again this year. They also talked about places of interest that they go to for outings.

Staff were observed spending time and interacting warmly with residents, supporting their wishes, ensuring that they were doing things that they enjoyed and offering meals and refreshments to suit their needs and preferences. Throughout the inspection, all residents were seen to be at ease and comfortable in the company of staff, and were relaxed and happy in their homes. During the inspection, one resident sang for the inspector, while another recited poetry.

The centre consisted of one house and was centrally located close to a busy city, which gave residents good access to a wide range of facilities and amenities.

The next sections of this report present the inspection findings in relation to the governance and management in the centre, and how this impacts the quality and safety of the service and quality of life of residents.

Capacity and capability

The provider had measures in place to ensure that this centre was well managed, and that residents' care and support was delivered to a high standard. These arrangements ensured that a good quality and safe service was provided to residents who lived there.

There was a clear organisational structure in place to manage the service. There was a suitably qualified and experienced person in charge who worked closely with staff and with the wider management team, and was very knowledgeable regarding the care and support needs of residents. There were effective arrangements in place to support staff when the person in charge was not on duty.

The provider ensured that the service was subject to ongoing monitoring and review to ensure that a high standard of care, support and safety was being provided. These included ongoing audits of the service in line with the centre's audit plan, and six-monthly unannounced audits by the provider. These audits showed a high level of compliance and any identified actions had been addressed as planned. A review of the quality and safety of care and support of residents was being carried out annually. This review was comprehensive and detailed, and included consultation

with the residents.

The person in charge was very clear about the requirement for notification of certain absences of the person in charge to the Chief Inspector of Social Services.

The centre was suitably resourced to ensure the effective delivery of care and support to the resident. These resources included the provision of suitable, safe and comfortable accommodation and furnishing, transport, access to Wi-Fi, television, and adequate staffing levels to support residents' preferences and assessed needs. The centre was also suitably insured.

Documents required by the regulations were kept in the centre and were available to view. Documents viewed during the inspection included personal planning records, policies, directory of residents, audits, and service agreements. There was a statement of purpose which gave a clear description of the service and met the requirements of the regulations. There was a range of policies to guide staff, all of which were up to date.

Registration Regulation 5: Application for registration or renewal of registration

The prescribed documentation for the renewal of the designated centre's registration had been submitted to the Chief Inspector of Social Services as required.

Judgment: Compliant

Regulation 14: Persons in charge

The role of person in charge was full-time and the person who filled this role had the required qualifications and experience. The person in charge was very knowledgeable regarding the individual needs of each resident.

Judgment: Compliant

Regulation 19: Directory of residents

There was a directory of residents which included the required information relating to each resident who lived in the centre.

Judgment: Compliant

Regulation 21: Records

The provider had ensured that records were maintained in a clear and orderly fashion and were kept up to date.

Judgment: Compliant

Regulation 22: Insurance

There was a current insurance policy in effect for the service.

Judgment: Compliant

Regulation 23: Governance and management

There were effective leadership and management arrangements in place to govern the centre and to ensure the provision of a good quality and safe service to residents.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

Written agreements for the provision of service had been developed for all residents. These agreements included the required information about the service to be provided, and had been agreed and signed by residents.

Judgment: Compliant

Regulation 3: Statement of purpose

There was a statement of purpose which described the service being provided to residents and met the requirements of the regulations. The statement of purpose was being reviewed annually and was up to date.

Judgment: Compliant

Regulation 30: Volunteers

The provider does not use volunteers in their services.

Judgment: Compliant

Regulation 32: Notification of periods when the person in charge is absent

The provider was aware of the requirement to notify the Chief Inspector of absence of a person in charge, and suitable notification had been made as required.

Judgment: Compliant

Regulation 33: Notifications of procedures and arrangements for periods when the person in charge is absent

The provider was aware of the requirement to notify the Chief Inspector of the procedures and arrangements that would be in place for the management of the centre in the absence of the person in charge.

Judgment: Compliant

Regulation 4: Written policies and procedures

All policies required by schedule 5 of the regulations were available to guide staff and were up to date.

Judgment: Compliant

Quality and safety

There was a high level of compliance with regulations relating to the quality and safety of care and the provider ensured that residents received a good level of

person-centred care that allowed them to enjoy activities and lifestyles of their choice. The management team and staff in this service were very focused on maximising the independence, community involvement and general welfare of residents.

Residents were supported to take part in a range of social and developmental activities both at the centre, at day service and in the community. Suitable support was provided to residents to achieve these in accordance with their individual choices and interests, as well as their assessed needs. As this was a home based service, residents had the choice to attend day service activities as they wished.

The centre was located in a residential area and transport was available which enabled residents to visit the facilities and leisure amenities in the neighbouring areas. Some of the activities that residents enjoyed, and were involved in, included outings to local places of interest, visiting families, shopping, baking, using personal computer pads, pub visits, concerts, gardening and going out for meals. The staffing levels in the centre ensured that each resident could be supported by staff to do activities of their preference.

The centre suited the needs of the residents, and was spacious, warm, clean, comfortable and well maintained. All residents had their own bedrooms, all of which were comfortable and personalised. There was a well equipped kitchen and dining area where residents could gather and eat. There was also a spacious and accessible garden where residents could spend time outdoors.

Arrangements were in place for the safe management of residents' private property and finances, and residents' civil, political and religious rights were being supported. Information was supplied to residents through interaction with staff, easy to read documents and information sharing at residents' meetings. There was also a written guide for residents which contained relevant information about the service.

Family contact and involvement was seen as an important aspect of the service. The visiting restrictions which had been in place during the earlier part of the COVID-19 pandemic had been discontinued, and visiting has now fully returned to normal in line with national public health guidance. Arrangements were in place for residents to have visitors in the centre as they wished and also to meet family and friends in other places. There were also arrangements in place to manage any record any temporary absences of a resident from the designated centre, and there was an up-to-date policy to guide this practice.

The provider had ensured that residents had access to medical and healthcare services to ensure their well-being. Nursing staff were based in the centre, and were involved in the ongoing assessment of residents' health needs. Residents had access to general practitioners (GPs) and attended annual health checks. Additional professional services and medical specialist consultations were arranged as required. Residents were also supported to attend national health screen programmes.

Residents' nutritional needs were well met. Nutritional assessments were being carried out and suitable foods were made available to meet residents' assessed needs and preferences, and residents' weights were being regularly monitored.

There was also an up-to-date policy to guide practice and staff had been training in relevant aspects of nutritional care. Each resident could choose what they liked to eat each day.

Regulation 10: Communication

The provider had ensured that residents were supported and assisted to communicate in accordance with their needs and wishes. Although residents in the centre has good verbal communication skills, there was an up-to-date policy to guide practice, and it was clear that residents had ongoing opportunity to communicate with staff and with each other.

Judgment: Compliant

Regulation 11: Visits

Residents could receive visitors in accordance with their own wishes, and there was sufficient room in the centre for residents to meet with visitors in private. Furthermore, residents were supported to meet with, and visit, family and friends in other places.

Judgment: Compliant

Regulation 12: Personal possessions

Residents kept control of their own possessions and money, records of residents' belongings were being kept, and there were auditing systems in place to ensure that residents' finances were being safeguarded.

Judgment: Compliant

Regulation 13: General welfare and development

Residents were supported to take part in a range of social and developmental activities both at the centre, at day services and in the community. Suitable support was provided to residents to achieve this in accordance with their individual choices and interests, as well as their assessed needs.

Judgment: Compliant

Regulation 17: Premises

The design and layout of the centre met the aims and objectives of the service, and the needs of residents. The centre was well maintained, clean, comfortable and suitably decorated.

Judgment: Compliant

Regulation 18: Food and nutrition

Residents' nutritional needs were being supported. The resident chose, and took part in shopping for, their own food. Suitable foods were provided and prepared to cater for residents' preferences.

Judgment: Compliant

Regulation 20: Information for residents

Information was provided to residents. This included information in user friendly format, that was relevant to residents. There was also an informative residents' guide that met the requirements of the regulations.

Judgment: Compliant

Regulation 25: Temporary absence, transition and discharge of residents

There were arrangements in place to ensure that when any resident was temporarily absent from the designated centre that the hospital or other place was supplied with relevant information about the resident. All such absences were being recorded, and there was an up-to-date policy to guide this practice.

Judgment: Compliant

Regulation 6: Health care

The health needs of residents were assessed and they had good access to a range of healthcare services, such as general practitioners and medical consultants. Access to healthcare professionals were arranged as required. Plans of care for good health had been developed for residents based on each person's assessed needs.

Judgment: Compliant

Regulation 9: Residents' rights

The provider had ensured that residents' civil, political and religious rights were supported and that residents had freedom to exercise choice and control in their daily lives. Residents had the opportunity to vote and to practice their religion as they wished. They also had ongoing consultation in the running of the centre, and how they lived their lives.

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	
Registration Regulation 5: Application for registration or renewal of registration	Compliant
Regulation 14: Persons in charge	Compliant
Regulation 19: Directory of residents	Compliant
Regulation 21: Records	Compliant
Regulation 22: Insurance	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 30: Volunteers	Compliant
Regulation 32: Notification of periods when the person in charge is absent	Compliant
Regulation 33: Notifications of procedures and arrangements for periods when the person in charge is absent	Compliant
Regulation 4: Written policies and procedures	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 11: Visits	Compliant
Regulation 12: Personal possessions	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 18: Food and nutrition	Compliant
Regulation 20: Information for residents	Compliant
Regulation 25: Temporary absence, transition and discharge of residents	Compliant
Regulation 6: Health care	Compliant
Regulation 9: Residents' rights	Compliant