



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

Issued by the Chief Inspector

Name of designated centre:	Liskennett Centre
Name of provider:	St Joseph's Foundation
Address of centre:	Limerick
Type of inspection:	Unannounced
Date of inspection:	24 May 2022
Centre ID:	OSV-0004263
Fieldwork ID:	MON-0036064

About the designated centre

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

The centre is a congregated setting and provides a home to 14 residents. It is based in a community setting in county Limerick. The campus is based around an equestrian centre. All of the residents have high support needs and are supported individually by a high staff complement, mostly on a one-to-one basis. The designated centre is purpose built and comprises of 14 individual apartments, divided into three sections. Each resident's apartment has its own front door and all the apartments have been finished to a very high standard, with a kitchen, living, dining area, bedroom and shower facilities.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	12
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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
Tuesday 24 May 2022	10:00hrs to 15:00hrs	Laura O'Sullivan	Lead
Tuesday 24 May 2022	10:00hrs to 15:00hrs	Lucia Power	Support

What residents told us and what inspectors observed

This inspection was focused on the area of infection prevention and control. The inspection incorporated visiting a number of areas of the centre, meeting with residents and staff. A review of documentation and systems in place in the areas of infection prevention and control was also completed to review compliance with Regulation 27.

The inspectors were greeted at the centre by the person in charge. They had recently been appointed to this role, it was evident that the person in charge had a good knowledge of the support and care needs of residents in the registered centre. Upon entering the centre the inspectors were requested to complete hand hygiene and take a temperature check. This was completed for all staff and visitors as a means of monitoring COVID-19 symptoms. A conversation was had with the person in charge with respect to COVID 19 and infection control measures within the centre.

During the initial stage of the pandemic an isolation unit had been in place for the centre. Now within the centre each resident had an individualised plan which would support the resident to isolate in their own space within the centre. Should additional supports be required these would be reviewed and initiated by the provider. This information was available for all staff to review to ensure a consistent approach was implemented.

An online folder had been uploaded for staff to review all infection control measures. This was available for all staff to review and was linked to the most up to date guidance to ensure current best. Staff spoken with were aware of guidance and procedures that needed to be adhered to, they were also observed adhering to infection control measures including hand hygiene and correct use of facemasks. Staff supported residents in the areas of infection control measures and it was observed that staff guided residents in a respectful manner in relation to personal space.

The inspectors had the opportunity to meet with a number of residents during the day of the inspection. When asked if one resident would like to show us around their apartment they stated no and this was respected. Another resident was present in their area after participating in a reflexology session. There was a number of accessible information leaflets present within the area to encourage the resident to participate and comply with infection control measures. This included effective hand washing procedures. All areas of the centre visited were clean and tidy and in state of good repair. It was evident from the inspectors interactions, observations and discussions that residents were very happy in the centre and were involved in decisions about their lives.

The governance systems within the centre ensured that residents were supported in the area of infection control. These systems will be further discussed within the next

section of the report which included legionella checks, environmental audits and self-assessment of COVID- 10 measures. The person in charge had ensured the staff team within the centre had received ongoing training in such areas as infection control, the use of personal protective equipment and hand hygiene.

A number of residents currently residing within the centre had support needs which required infection control supports. This included supports in the area of stoma care and diabetic care. Resident whom required these additional supports had clear guidance within their personal plan. These were reviewed regularly by the staff team in place. The person in charge also completes a review of this information to ensure the current healthcare needs of the residents are met.

Whilst reviewing one personal plan it was noted that one resident had yet to recommence a social role which has paused during the pandemic due to national restrictions. Whilst these restriction had been removed the social role for the resident had not yet recommenced. The person in charge did state that this was a work in progress and would be reviewed post the inspection.

It was also noted during the inspection that the statement of purpose was not present in the centre in accordance with Regulation 3. When an up to date version was requested from the person in charge to reflect the current function of the centre this was not available. This included the function of rooms in the centre and the provision of respite services in the centre. This was requested to be submitted following the inspection.

Capacity and capability

Liskennett Centre was a designated centre which provides both respite and residential supports for a maximum of 14 residents. As part of a programme of inspections commenced by HIQA in October 2021, focusing on infection and control practices, it was decided to carry out such an inspection of this centre to assess the discipline and practice in this area in more recent times. Key areas of focus on this inspection included staffing, monitoring of the infection prevention and control practices by the provider and the leadership, governance and management of the centre.

The registered provider had appointed a clear governance structure the centre. The person in charge was suitably qualified and experienced to fulfil their role. They were also the allocated IPC lead person in the centre. They reported directly to the person participating in management appointed to the centre and were supported by a team leader. The inspectors had the opportunity to meet with the person in charge on the day of the inspection. They clearly articulated the measures which were in place within the centre in the area of infection prevention and control

Given the ongoing COVID-19 pandemic, it was evidenced that the provider had a documented contingency plan. This included the ongoing review of the plan to

ensure this met the assessed needs of all residents currently residing within the centre. Staff members spoken with were aware of the potential COVID-19 symptoms to be observant to and were aware of the on call system in place for additional assistance. Staff met with on the day of inspection were observed adhering to infection control measures such as social distancing, hand hygiene and the correct use of facemasks. Staff were also observed encouraging resident to also adhere to these measures.

The inspectors were assured that the monitoring systems in place were utilised to capture all areas for improvement related to infection prevention and control in the centre and to ensure these were addressed in a timely manner. The monitoring systems in operation included environmental audits, the HIQA issued self-assessment tool that was to be completed every 12 weeks, internal hand hygiene assessments, cleaning schedules and personal plan reviews. A system was in place within the centre for hygiene checks and cleaning records to be reviewed daily and any actions implemented immediately. The person in charge also completed environmental spot-checks to ensure compliance with infection control measures were ongoing. Staff were praised in the areas of compliance identified such as maintaining a clean environment.

The registered provider had appointed suitably qualified and experienced persons to the staff team within the centre. Staff had received training in aspects of IPC including hand hygiene, the use of personal protective equipment and infection control. The person in charge maintained oversight of the training matrix to ensure all staff completed refresher training as required. The area of infection control including COVID 19 was discussed at staff meetings to ensure compliance to regulation 27 and best practice. This was also a platform for staff to raise any queries or concern related to infection control.

The provider had developed policies to help guide and direct staff members in the area of IPC to promote good practice by all members of the staff team. This included the infection control policy which provided standard infection control guidance and additional guidance required during an infectious outbreak and the COVID 19 pandemic. This policy was used in conjunction with national guidance issued by the Health Service Executive and the Health Protection and Surveillance Centre and regularly reviewed to reflect any change in guidance. The organisational policy was provided to staff through an online platform to ensure all information provided was the most up to date and reflected the current local and national guidelines.

Quality and safety

During the inspection, the inspectors found that the registered provider was implementing effective measures in the area of infection prevention and control. Both residential and respite support to a maximum of fourteen residents. Residential

supports were build amidst a farm environment with a number of farm animals on the grounds. Residents were consulted with in the area of infection prevention and control through keyworker meetings and resident meetings. Social stories were also used to promote awareness and understanding in such areas as hand hygiene, vaccinations and COVID 19.

The centre consist of three main building. All residents are provided with individualised living spaces over these three areas. Both inspectors had the opportunity to walk around the centre and visit some areas of the centre. All areas visited presented as warm and clean. In areas which were not currently in use cleaning was also carried out and water was run weekly as part legionella prevention. Each area of the centre had a cleaning list to be completed daily by the staff team. These included cleaning of toilets, kitchens and communal areas. These checked were reviewed daily by the senior staff on duty.

The registered provider had ensured an ample supply of PPE equipment was present within the centre. This included surgical masks, respiratory masks and hand sanitiser. Checks were maintained of stock levels. Additional stock was available in the event of an infection control outbreak. Each area of the centre also had an area assigned to don and doff PPE. On entering the centre all visitors and staff were provided with a COVID 19 questionnaire, hand hygiene products and appropriate face masks.

The person in charge had developed a risk register with respect to the designated centre. All identified areas of infection prevention and control were addressed including the vaccination status of some individuals and measures in place to support this. Where control measures were documented to be in place with respect to IPC measures these were regularly reviewed by the person in charge. This included the individual isolation needs of each resident.

Each resident had been supported to develop and review an individualised personal plan. These plan incorporated areas of infection prevention and control as appropriate to the assessed needs of each resident. For example, one resident did not like the use of gloves, this had been reviewed and required supports in place. Where additional health care support was required infection control measures required had been clearly set out in each plan to promote staff adherence. This include stoma and diabetic care.

Regulation 27: Protection against infection

On the day of the inspection inspectors observed effective Infection prevention and control measures to ensure effective systems were in place. This included:

Effective governance oversight from members of the management team.
Effective monitoring systems including ongoing review of practice.
Staff training and awareness.

Guidance and support for residents

Organisational policy.

The premises presented as clean and tidy with effective ventilation systems.

Individualised supports in place for residents in the area of infection prevention and control.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

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