

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

Issued by the Chief Inspector

Name of designated centre:	Woodside
Name of provider:	Brothers of Charity Services Ireland CLG
Address of centre:	Clare
Type of inspection:	Unannounced
Date of inspection:	19 January 2023
Centre ID:	OSV-0004636
Fieldwork ID:	MON-0037627

About the designated centre

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

Woodside Services is run by Brothers of Charity Services Ireland. The centre is based near a town in Co. Clare. The centre provides respite care for up to three male or female children, who are under the age of 18 years and have an intellectual disability. The centre comprises of one two-storey house where children have their own bedroom, some en-suite facilities, sitting room, kitchen, conservatory, sensory room and staff offices. A large garden offers plenty of space for play and recreation and the centre is also close of a range of amenities. Staff are on duty both day and night to support the children who avail of this service.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	2
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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 19 January 2023	12:00hrs to 18:00hrs	Cora McCarthy	Lead

What residents told us and what inspectors observed

This was an unannounced inspection carried out to assess ongoing compliance with the regulations. The inspector was met on the day by the team leader and followed good practice by donning a face mask and completing hand hygiene as directed by the team leader. The team leader showed the inspector around the centre.

On entering the house it was noted that there was beautiful, welcoming artwork on the walls in the hallway. The children were clearly involved in this as their photographs formed part of the artwork and there were drawings by the children also. The children were at school when the inspector arrived, the inspector used this opportunity to do a walk through of the centre and review the children's personal plans and documentation.

The centre was warm, clean and cosy and there were children's toys, arts and craft materials available for the children to play with. The centre required painting and there was a plan to do this and to replace the flooring in some areas. The centre was fully wheelchair accessible with ceiling hoists available in some rooms. One bedroom had a specialised bed with an enclosed frame around it for one child when they came to stay. A new high support chair with a tray for eating or doing table top activities had just been purchased for one child also. The centre had a sensory room with soft, padded sensory equipment with sensory lighting for the children to relax in. There was a secure well maintained back garden which was a welcoming space with swings, slides, a go kart and a vegetable garden for the children.

The children returned from school in the afternoon and the inspector had the opportunity to meet and interact with them. They were very pleasant, happy children who appeared excited about coming into respite. They had a snack, attended to personal care and changed their clothes and engaged in their chosen activities. The children were very active in the centre and the inspector observed one child outside with a staff member on the go kart and playing in the garden. The second child was inside doing Lego with a staff member. There was evidence to indicate that the children went swimming, bowling and to the cinema when in on respite. The staff knew the children very well and attended to all their needs in a respectful manner.

The children used visuals to support their communication and they choose meals and activities through picture exchange communication, objects of reference while one child wrote down their preferences. The children brought in personal items, toys, photographs and electronic tablets when they came on a respite stay and personalised their rooms in this way. The children were in the centre for short periods but they were facilitated to contact family members via phone and video call if they wished. The went for walks and drives and attended school while at the centre. The children seemed very happy to be in respite and were enjoying the company of staff. The children actively engaged in their local community and were

known in cafes and restaurants.

In summary, the inspector found that the children's had a very good quality of life in the centre and received very good care and support from the staff. The centre was very individualised and children were able to engage activities of personal interest.

The next two sections of the report present 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 service being delivered to each children living in the centre.

Capacity and capability

Overall the care and support received by the children in this centre was to a very high standard. There was a clear governance and management structures in place and very clear reporting pathways. There was a proactive approach to management in this centre.

The person in charge was well known to parents and children and had the appropriate qualifications and skills for the role. They had been in the role for many years, were full time and proved to be an effective person in charge. Staff rotas were reviewed on the day of inspection and the inspector found there was consistent care from a regular staff team. No agency staff were used in the centre.

A training record indicated that all staff received mandatory and refresher training. The inspector spoke with three staff on the day of inspection and they were very familiar with fire precautions in the centre and safeguarding protocols as a result of their training.

This centre had an effective governance and management structure in place. The person in charge had good oversight of the centre and had ensured an annual review and two six month unannounced inspections were completed. There was an action plan developed from the audits and the actions had been either completed or were actively being addressed on the day of inspection. The staff team were well supported by their manager.

The statement of purpose was reviewed by the inspector and found it gave a clear overview of the centre including age range, staffing skills and numbers, facilities and supports provided.

Notifications were reviewed by the inspector and discussed with the team leader. There was a good understanding of the reporting systems and requirements for reporting adverse incidents outlined by the team leader.

There was an effective, accessible complaints system in place and both children, their parents and staff were familiar with it. Records were maintained of any

complaint received and the circumstances that had led to the complaint and the outcome.

The sample of policies and procedures reviewed by the inspector were found to be in date, reviewed in the last two years and contained the required information.

Regulation 14: Persons in charge

The person in charge was experienced in the role, had the required qualifications and worked full-time. They demonstrated that they had good oversight and monitoring of the centre and ensured effective governance, operational management and administration of the designated centre.

Judgment: Compliant

Regulation 15: Staffing

The staffing numbers on the day of inspection were in line with the rota and needs of the children. There were two staff members on duty during on the day of inspection and this was sufficient to support the number of children in respite. The inspector viewed the actual and planned rota over a period of 4 weeks and found consistent staff numbers in line with the statement of purpose. There was a regular social care team that had worked with the children for years and were very knowledgeable regarding their care.

Staff members received supervision every three months and could request further support if they so wished. Staff were spoken with during the providers unannounced visit and were given the opportunity to raise concerns about the quality and safety of the care provided, they said they felt that they were very well supported by the person in charge and they had no concerns regarding the care the children received.

Judgment: Compliant

Regulation 16: Training and staff development

The training record was reviewed by the inspector and it was noted that all mandatory training was completed by the staff team. These included fire safety, managing behaviours that challenge, safeguarding of vulnerable adults, infection prevention and control and manual handling training. The training record also indicated that staff had completed refresher training as required. There was a good system of maintaining accurate records and it was very clear to staff when a training

was about to expire and they could book training in as necessary.

Judgment: Compliant

Regulation 23: Governance and management

The provider had ensured that the centre was resourced to ensure the effective delivery of care and support in accordance with the statement of purpose and the assessed needs of the children. There was a clearly defined management structure within the centre which identified the lines of authority and accountability. There were robust management systems in place in the centre to ensure that the service provided was safe, appropriate to the children's needs, consistent and effectively monitored. There was an effective audit system in place in the centre which the person in charge had oversight of. For example there was an Infection prevention and control and a cleaning audit in place.

The provider had carried out an annual review of the quality and safety of care and support in the centre in 2022; families were also sent questionnaires to give their opinion. The families were given different options of returning feedback, they could return the completed form, phone with their feedback or send in a written copy. There was very positive feedback overall, some families chose the phone in option and gave very positive feedback saying the the service was 'outstanding' and 'they felt like they had won the lotto' and the 'child's lights up when they are going into respite'.

An unannounced visit to the centre was carried out in November 2022 and a plan put in place to address any concerns which arose. Some of the issues that were highlighted were that wall and roof insulation is required for the house, there was a plan in place for this to be addressed on the day of inspection. A car parking area at the front of the house had also been highlighted, there was new car parking area on the day of inspection which indicated this action had been completed.

Judgment: Compliant

Regulation 3: Statement of purpose

There was a statement of purpose available for the inspector to review which contained all the information from schedule 1, it had been reviewed and updated in April 2022.

Judgment: Compliant

Regulation 31: Notification of incidents

The person in charge and the team leader were fully aware of their responsibilities in terms of reporting adverse incidents that occurred in the centre. Notifications were reviewed on this inspection and the inspector found that all incidents had been reported as per requirements and in the required time frame.

Judgment: Compliant

Regulation 34: Complaints procedure

The provider had an effective complaints process in place, it was in a visual format which was accessible to the children. There were no open complaints at the time of inspection. As this was a respite centre the children were in the centre for one to two nights and the centre staff acted as a support to the families and also as advocates for the children. Previous complaints had been resolved locally.

Judgment: Compliant

Regulation 4: Written policies and procedures

There was suite of policies in place and available to staff for guidance, a sample were reviewed. These included policies on staff training and development, Children's First and behaviour support. The sample of policies were all in date and were reviewed regularly.

Judgment: Compliant

Quality and safety

This centre had a very person centred approach to care and support and the inspector found that the quality and safety of care provided to the children in this centre was to a very high standard. The provider had ensured that the assessed needs of the children were met and a personal plan had been developed.

The children's communication needs were met in the centre, there was evidence of communication assessment by the speech and language therapist and subsequent recommendations. These recommendations were being fully met by the staff team

and visuals were noted to be used with the children during the course of the inspection.

The children engaged in meaningful activities during their stay in respite as evidenced in their activity records. The children were in school on the day of inspection and on return played in the garden and with toys in the house, they watched tv and had their main meal together. There was evidence of ongoing positive engagement in the local community.

The centre was very comfortable and homely for the children and they could bring in personal items with them on respite to personalise their space. The provider had a plan to upgrade the centre which included new flooring and insulation. The inspector was able to view documentation and emails in relation to the plan to confirm that the provider was actively addressing the issues found.

The provider had ensured that there was a system in place for hazard identification and assessment of risks and control measures put in place to minimise the risk for children and staff. Risk assessments included those attached to the unexpected absence of a child or injury to a child.

This centre maintained good IPC, the IPC audit which was completed monthly confirmed that there was good oversight in this area. The person in charge had implemented good practices in relation to cleaning, laundry management, clinical waste disposal and training.

There were strong fire precautions in the centre. There was yearly servicing of the fire equipment and regular fire drills completed. The staff were familiar with the protocols surrounding safe and timely evacuation of the children including the children's individual PEEP.

A needs assessment was completed for each child and a personal plan developed. Assessments available for review on the day of inspection include speech and language, occupational therapy, educational assessments and personal development and care. Recommendations from these assessments formed part of the personal plan and provided clear guidance for the staff team on the areas each child required support. Good health care was facilitated for each child in the centre. Parents and children received support when attending appointments and there was evidence of attendance at appointments with allied health professionals.

There was a comprehensive behaviour support plan in place for one child and it outlined that a functional analysis had been completed and provided the staff with proactive and active strategies to support the child if upset or anxious. The staff were all trained in positive behaviour support and in de-escalation and intervention techniques.

The provider had safeguarding policies and procedures available to staff for guidance. All staff had completed safeguarding training. The inspector was advised that there were no active safeguarding risks or plans in place.

The children were facilitated and encouraged to exercise their rights in the centre.

There was evidence of active decision making through activity and meal planners.

Regulation 10: Communication

The children were actively supported with communication using specialised communication tools such as picture exchange communication. There was a range of visuals available to each child and some used a 'first and then' board for plan their day. Menu planning visuals were also observed. The children watched tv when they were in respite and also had an electronic tablet available to them to video call family if they wished.

Judgment: Compliant

Regulation 13: General welfare and development

The children had access to facilities for recreation and opportunities to engage in activities of personal interest to them. The children were observed on the day of inspection utilising the outdoor space and using a go kart, swings and toys. The children were noted to direct the day and there was evidence that children on respite had gone to the cinema, bowling and for meals out. The children attended school and had an individual education plan in place to support them with their education. There was also transition support available when children reached school leaving age.

Judgment: Compliant

Regulation 17: Premises

The premises were laid out to meet the needs and number of children attending respite. The centre was warm, cosy and personalised with artwork and toys. While the centre was clean and tidy it required painting and the hall floor needed to be upgraded. The provider informed the inspector of a wider plan to do up the entire property including a new kitchen, flooring and wall and ceiling insulation. The outdoor area of the centre was well maintained and welcoming for the children.

Judgment: Substantially compliant

Regulation 26: Risk management procedures

There were arrangements in place for identifying risks, assessing the level of risk and controlling risks. These risk assessments were regularly reviewed and the effectiveness of the control measures assessed. There was also an emergency response plan in place which took account of continuity of care in the event of an emergency. There was a risk management policy in place and it had been reviewed in the last two years.

Judgment: Compliant

Regulation 27: Protection against infection

The person in charge had ensured that there were systems in place for maintaining good Infection prevention and control in the centre. There were cleaning checklists and an Infection prevention and control audit in place. The house was clean, there were hand sanitising units throughout the centre and staff were noted to clean their hands regularly and wear a face mask. There was adequate stocks of personal protective equipment and cleaning products available. There were clear protocols in place for completion of children's laundry and mop cleaning and storage. The staff were all trained in IPC, hand hygiene, cough etiquette and community infection control. There was an up to date policy on IPC in place which was regularly reviewed.

Judgment: Compliant

Regulation 28: Fire precautions

There was a good fire management system in place in the centre. There were servicing records available for the emergency lighting, alarm system and fire extinguishers. The staff team had undertaken fire evacuation drills in January 2023 on two occasions so that a number of children would be familiar with the procedure in the event of a fire. The most recent fire evacuation drill indicated that the children could be safely evacuated in under 30 seconds. Each child who attended respite had a personal emergency evacuation plan (PEEP) in place. Some children required prompting to leave the building and one child was an absconding risk and had to be supervised. These issues were accounted for in the children's PEEP.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

The person in charge had ensured that a needs assessment was completed when each child came into respite and a personal plan prepared. It was difficult for the person in charge and staff team to maintain this personal plan given the complexities of a respite service where the children were only in on one or two occasions per month. There were some areas such as the individual education plan where the staff were reliant on external bodies to provide documentation. This sometimes delayed the personal planning process for the team. However given the complexities of a respite service the team had a detailed personal plan in place and were actively addressing areas which required external input. The personal plans the inspector reviewed made provision for the children's assessed needs and outlined the supports required to maximise the child's personal development. For example some children had support plans in place for toileting and personal care.

Judgment: Compliant

Regulation 6: Health care

Each child's health care was very well provided for in the centre. There were protocols in place for administration of emergency medication for epilepsy. There was clear guidance for staff around seizure activity and the type of seizure the child experienced and how to support them. There was occupational therapy input and exercise programmes in place such as chair push ups and resistance exercise using 'body sox' equipment. Each child had a general practitioner (GP) chosen with their family and the team supported each child to attend appointments with either their GP or psychiatric consultant. A medical information form outlined all medical details regarding each child and this form would have been taken to meetings with the children's early intervention service.

Judgment: Compliant

Regulation 7: Positive behavioural support

Staff in the centre had up to date knowledge and skills, to respond to behaviour that is challenging and to support children to manage their behaviour. The staff team had all been trained in positive behaviour support and were able to outline to the inspector the plans in place for some of the children. The inspector reviewed a sample of positive behaviour support plans and found there was very clear guidance for staff indicating how the child may present and what support to offer. There was a particular focus in one plan on supporting a child with transitions and this appeared to be very effective as there was a reduction in incidents surrounding transitions. The functional analysis completed as part of every plan gave a good overview of why the child was presenting in this manner and what they were

communicating.

Judgment: Compliant

Regulation 8: Protection

All staff were trained in Children First and the children were given information, understanding and skills on how to protect themselves at regular house meetings. There were currently no safeguarding concerns and no safeguarding plans or guidelines were required. The staff and team leader were able to clearly outline to the inspector what they would do if they had a concern, who to report it to and where and how to record the concern. There was an up to date policy on safeguarding of children in place also.

Judgment: Compliant

Regulation 9: Residents' rights

Children's rights were upheld in this centre. The children were very involved in the running of this centre and had choice in their activities and meals during their stay as evidenced in house meeting minutes and activity boards and meals planners. There were ample visuals for the children to use to support their understanding and to make choices. Overall it was a very person centred service.

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	
Regulation 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 31: Notification of incidents	Compliant
Regulation 34: Complaints procedure	Compliant
Regulation 4: Written policies and procedures	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Substantially compliant
Regulation 26: Risk management procedures	Compliant
Regulation 27: Protection against infection	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant

Compliance Plan for Woodside OSV-0004636

Inspection ID: MON-0037627

Date of inspection: 19/01/2023

Introduction and instruction

This document sets out the regulations where it has been assessed that the provider or person in charge are not compliant with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

This document is divided into two sections:

Section 1 is the compliance plan. It outlines which regulations the provider or person in charge must take action on to comply. In this section the provider or person in charge must consider the overall regulation when responding and not just the individual non compliances as listed section 2.

Section 2 is the list of all regulations where it has been assessed the provider or person in charge is not compliant. Each regulation is risk assessed as to the impact of the non-compliance on the safety, health and welfare of residents using the service.

A finding of:

- **Substantially compliant** - A judgment of substantially compliant means that the provider or person in charge has generally met the requirements of the regulation but some action is required to be fully compliant. This finding will have a risk rating of yellow which is low risk.
- **Not compliant** - A judgment of not compliant means the provider or person in charge has not complied with a regulation and considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of residents using the service will be risk rated red (high risk) and the inspector have identified the date by which the provider must comply. Where the non-compliance does not pose a risk to the safety, health and welfare of residents using the service it is risk rated orange (moderate risk) and the provider must take action *within a reasonable timeframe* to come into compliance.

Section 1

The provider and or the person in charge is required to set out what action they have taken or intend to take to comply with the regulation in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that regulation, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. The response must consider the details and risk rating of each regulation set out in section 2 when making the response. It is the provider's responsibility to ensure they implement the actions within the timeframe.

Compliance plan provider's response:

Regulation Heading	Judgment
Regulation 17: Premises	Substantially Compliant
Outline how you are going to come into compliance with Regulation 17: Premises: The provider has completed an assessment of works needed. Works to be completed by 29/9/2023	

Section 2:

Regulations to be complied with

The provider or person in charge must consider the details and risk rating of the following regulations when completing the compliance plan in section 1. Where a regulation has been risk rated red (high risk) the inspector has set out the date by which the provider or person in charge must comply. Where a regulation has been risk rated yellow (low risk) or orange (moderate risk) the provider must include a date (DD Month YY) of when they will be compliant.

The registered provider or person in charge has failed to comply with the following regulation(s).

Regulation	Regulatory requirement	Judgment	Risk rating	Date to be complied with
Regulation 17(1)(b)	The registered provider shall ensure the premises of the designated centre are of sound construction and kept in a good state of repair externally and internally.	Substantially Compliant	Yellow	29/09/2023