



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

Issued by the Chief Inspector

Name of designated centre:	Mutual Breaks
Name of provider:	Brothers of Charity Services Ireland CLG
Address of centre:	Clare
Type of inspection:	Announced
Date of inspection:	01 October 2024
Centre ID:	OSV-0004867
Fieldwork ID:	MON-0036093

About the designated centre

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

Mutual Breaks is located in a residential area on the outskirts of a town in Co. Clare close to public transport routes, shops and recreational services. A respite service is provided, the centre is funded to open 48 weeks of the year and, extended periods of respite can be provided dependent on individual needs. The service is based on a social model of care and, can accommodate a maximum of three residents from the age of 18 years upwards. The house is a spacious two-storey, semi-detached property that. Each resident is provided with their own bedroom one of which is on the ground floor with a fully accessible en-suite facility. The respite service is usually planned in advance and the number of residents supported at any one time is dependent on individual support needs. Residents are afforded the choice if they wish, to share their respite break with a peer. Residents regularly attend external day services and are not usually present in the centre between 09:30 – 16:00 Monday to Friday. The model of support provides residents with a seamless service and a smooth transition between the day service and the respite service. Residents are supported by the same staff team who know them well with a sleep over staff present in the centre at night time. The centre works closely with the families of all residents to provide individualised care and support.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	2
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How we inspect

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 1 October 2024	09:00hrs to 17:00hrs	Jackie Warren	Lead

What residents told us and what inspectors observed

The residents who received respite care in this service had a good quality of life during their stays in the centre. They 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.

This inspection was carried out to monitor the provider's compliance with the regulations relating to the care and welfare of people who reside in designated centres for adults with disabilities. As part of this inspection, the inspector met and spoke with both residents who were taking respite breaks in the centre that day. The inspector also met with the person in charge and a member of the management team, and viewed a range of documentation and processes. The inspector also read three surveys that had been completed by residents or their representatives. This feedback indicated a high level of satisfaction with the service. No areas for improvement had been identified in the surveys.

The person in charge, management team and staff prioritised the wellbeing, autonomy, human rights and quality of life of residents during their respite breaks. It was clear from observation in the centre, conversations with residents, and information viewed during the inspection, that residents had a good quality of life, had choices in their daily lives, and were supported by staff to live their lives as independently as possible.

Two individuals were having respite breaks in the centre on the day of inspection, and both were out at day service activities during the day, although the inspector had the opportunity to meet with both residents on their return in the late afternoon.

These residents knew the purpose of the inspection and were happy to tell the inspector about their experience of the respite service. Residents said they very much enjoyed their respite breaks. Residents told the inspector that they were very well supported by staff, who provided them with good care. Residents said that they would feel comfortable to raise any concerns with staff and were confident that any issues would be addressed. Residents knew who was in charge, and they said that they trusted the staff. There was a holistic approach to residents' care, with activities being continued through both day and respite services. As the same staff supported residents in both services, this ensured a consistent approach and follow through of activities, goals and plans.

Residents told the inspector that they were very much in control of how they spent their time during respite breaks and in how decisions were made. They said that their decisions and plans around evening activities and meal preferences were discussed each evening when they arrived back to the centre. A resident explained, 'We're grown up, so we make our own decisions'. The inspector observed residents

chatting together to plan the evening. They decided to go to play soccer and to have a meal out in restaurant that they liked. They also talked of attending bigger meetings twice each year, which were attended by all residents who used this respite service.

Residents said that they get on well together, and that they had their respite breaks with people whose company they enjoyed. It was clear during the inspection that there was a good rapport between the two residents who were present for this break. The person in charge confirmed that respite placings were arranged to accommodate residents to share with compatible peers.

Arrangements were in place for residents to develop and utilise a range of relevant skills. This mainly took place in day services. Residents told the inspector about some of the training they had completed and were currently taking part in. These included hand hygiene training, and courses in office skills, computers, public speaking and writing. Residents also explained that they were involved in household tasks, such as cooking, setting and clearing the table, recycling, emptying the dishwasher and making their own beds. Both residents had employment in the local community.

Activities that residents were involved in were worthwhile and meaningful to them. Residents had active social lives and talked about some of the social and leisure activities that they took part in and enjoyed. These included, outings to the cinema, swimming, going to the gym, sports, entertainment events such as discos, and weekly horse riding. Residents also went for outings and walks to beaches and woodlands. A resident who is involved in weekly Special Olympics training talked about having competed and won gold medals in the past.

Food was bought, prepared and cooked in line with residents' preferences. Both residents said that they very much enjoyed their meals in the centre. They explained that they could choose each day whether they wanted to eat their evening meals in the centre or to go out for something to eat. On the days they opted to eat in the centre, they explained that they chose what they would eat, shopped as necessary, and were involved in preparing the meals. They said that residents and staff all 'pitched in' to make the meals. Residents said that they had never had meals in the centre that they didn't like.

During the inspection, residents spoke about their rights, such as rights to vote, practice religious preferences and financial management, and explained that these were supported. They also explained that they could live their lives as they chose and received staff support as required to do this. It was clear, from observation and conversations with residents, that they had choices around how they spent their time, and how their lifestyles were being managed. Residents knew the complaints process and felt confident that if they made a complaint that it would be addressed. They were also aware of the advocacy processes available to them. A resident who was very involved in an advocacy forum told the inspector that they would be co-presenting at a forthcoming national advocacy conference and was very much looking forward to this.

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

Capacity and capability

There was a good level of compliance with regulations relating to the governance of the centre. The management arrangements ensured that a good quality service was provided to residents who received respite care in the centre.

There was a clear organisational structure to manage the centre. The inspector saw that this was clearly stated in the statement of purpose. The person in charge was not based in the centre, but called frequently to meet with residents and staff. It was clear that residents knew, and got on well with, the person in charge. The person in charge also worked closely with the wider management team and with day service managers. A senior manager who was the person in charge's line manager was present during the inspection and both demonstrated an in-depth knowledge of the residents who received respite care in this centre.

The service was subject to ongoing monitoring and review. This included six-monthly unannounced audits by the provider, and an annual review of the quality and safety of care and support. The inspector viewed these audits, which showed a high level of compliance.

Staffing levels and skill-mixes were sufficient to meet the assessed needs of residents at the time of inspection. Planned staffing rosters had been developed. These were being updated to reflect actual arrangements as required and were accurate on the day of inspection. The inspector's review of rosters indicated that staffing levels seen during the inspection were the norm. Training had been provided to staff to enable them to carry out their roles effectively.

Residents were supported by a consistent staff team who worked in both their day services and in the designated centre. This arrangement ensured continuity of care from day service to evening respite service, and ensured that staff were very familiar with residents' needs. On the day of inspection a staff who had worked with a resident during the day, accompanied the resident back to the centre and was based there to support them for the remainder of the evening and night.

The centre was suitably resourced to ensure the effective delivery of care and support to residents. 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 provider had also ensured that the service and residents' property were suitably insured.

Documents required by the regulations were kept in the centre and were available

to view. Some of the records viewed by the inspector included the residents' guide, medication records, personal plans, healthcare files, duty rosters, staff training records and recruitment information. The records and documents viewed were up to date, clear and accessible. There was also a statement of purpose which gave a clear description of the service and met the requirements of the regulations.

Registration Regulation 5: Application for registration or renewal of registration

The prescribed documentation and information required for the renewal of the designated centre's registration had been submitted to the Chief Inspector of Social Services. The inspector reviewed this documentation and found that it had been suitably submitted.

Judgment: Compliant

Regulation 14: Persons in charge

The provider had appointed a suitable person in charge of the designated centre.

The role of person in charge was full-time. The inspector read the information supplied to the Chief Inspector in relation to the person in charge and this indicated that they had the required qualifications and experience for this role. The person in charge called to the centre several times each week and was very knowledgeable regarding the individual needs of each resident, and was also knowledgeable of their regulatory responsibilities. The person in charge worked closely with the wider management team, and staff.

Judgment: Compliant

Regulation 15: Staffing

Staffing levels and skill-mixes were sufficient to meet the assessed needs of residents at the time of inspection. Staff had been appropriately recruited and suitable duty rosters were in place in the centre.

Planned duty rosters had been developed by the person in charge. The inspector viewed the rosters for August, September and October. These showed that current staffing levels were being consistently allocated and that sufficient staff were being rostered to support residents' needs and preferences. The rosters were being updated as required to provide actual rosters which were accurate at the time of

inspection.

Judgment: Compliant

Regulation 16: Training and staff development

Staff who worked in the centre had received appropriate training to equip them to provide suitable care to residents, and were being suitably supervised.

The inspector viewed the training records which recorded that all staff who worked in the centre had received mandatory training in fire safety, behaviour support and safeguarding. Staff had also received other training and refresher training relevant to the care of residents such as training in lifting and handling, epilepsy management safe administration of medication. Human rights and supported decision making training had commenced but had not yet been completed by all staff.

The person in charge ensured that all staff under her remit had access to support and supervision meetings. The person in charge showed the inspector a schedule and records which showed that the relevant staff had already attended three supervision meetings in 2024 and that another was scheduled to take place for each staff before the end of the year.

Judgment: Compliant

Regulation 22: Insurance

The provider had ensured that the centre was suitably insured for injury to residents. The inspector viewed the centre's insurance policy which was up to date at the time of inspection.

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.

The provider had developed a clear organisational structure to manage the centre and this was clearly set out in the statement of purpose. There was a suitably

qualified and experienced person in charge to manage the centre. She was very familiar with residents who availed of the respite service and focused on ensuring that these residents would receive high quality respite breaks that they really enjoyed.

The provider had 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 to residents during their respite breaks. Unannounced audits of the service were carried out twice each year on behalf of the provider. The inspector read the last two provider audits and these showed a high level of compliance with the regulations. Action plans had been developed to address any required improvements and these had been addressed as planned. A review of the quality and safety of care and support of residents was being carried out annually. The inspector read the most recent annual review and found that there was evidence that consultation with residents and or their representatives was taking place and was included in the report. Furthermore, the centre was suitably resourced to ensure the effective delivery of care and support during respite breaks. During the inspection, the inspector observed that these resources included the provision of suitable, safe and comfortable accommodation and furnishing, transport, Wi-Fi, television, and adequate staffing levels to support residents' preferences and assessed needs.

Judgment: Compliant

Regulation 3: Statement of purpose

The provider had prepared a written statement of purpose for the service that included the information set out in schedule 1 of the regulations and was up to date.

The inspector read the statement of purpose and found that it described the service being provided to residents, included the information required by the regulations and was available to view in the centre. The person in charge was aware of the requirement to review the statement of purpose annually, and the current statement of purpose was up to date.

Judgment: Compliant

Quality and safety

There was a high level of compliance with regulations relating to the quality and safety of the service, and all regulations examined were found to be compliant on the day of inspection. The provider had measures in place to ensure that the well being of residents who availed of respite breaks in the centre was promoted, that

residents were kept safe, and that their human rights were respected and supported.

The centre was a two-storey house in a residential area on the outskirts of a busy town. The house was clean, comfortable, spacious and nicely furnished. The house was equipped to meet the needs of all residents, and to enhance their levels of safety and comfort. For example, there was a fully-accessible bathroom and bedroom available to accommodate residents with higher physical needs. There was also a garden where residents could spend time outdoors.

The person in charge and staff were very focused on ensuring that residents' general welfare, development, community involvement and leisure activities were being prioritised. The location of the centre enabled residents to visit the shops, sporting facilities, coffee shops and restaurants and other leisure amenities in the area. The centre had dedicated transport, which could be used for outings or any activities that residents chose. Some of the activities that residents enjoyed included outings to local places of interest, going out for meals, cinema, swimming, music events and discos, and sports. While in the centre, residents were also involved in housekeeping tasks such as recycling, and cooking.

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Review meetings took place annually, at which residents' support needs for the coming year were planned. As residents' stays in this centre were for short breaks, their goals and plans were primarily supported by families and day service staff, although designated centre staff also supported these assessed needs and plans during respite stays. The personal planning process ensured that residents' social,

health and developmental needs were identified and that supports were put in place to ensure that these were met during respite breaks.

There were arrangements to ensure that residents' healthcare was being delivered appropriately. Due to the short and intermittent nature of residents' respite breaks in the centre, their healthcare arrangements were mainly supported by their families and at their day care services. However, residents' healthcare needs had been assessed and plans of care had been developed to guide the management of any assessed care needs. Suitable measures were also in place to ensure that residents' medicines were managed securely and appropriately during respite breaks.

Residents' nutritional needs were well met. A well equipped kitchen was available for the storage, preparation and cooking of residents' food. Residents were involved in the shopping, preparation and cooking of their own meals, which they could take at the times that suited them. Colourful, easy-to-read cookbooks were available in the kitchen for residents' use.

Measures were in place to ensure that residents' rights were being upheld. The provider had ensured that residents had freedom to exercise choice and control in their lives while taking respite breaks. Information was supplied to residents through ongoing interaction with staff, and the provider had also developed a written guide for residents with information about the service. The residents who the inspector met during the inspection said that they were registered to vote and to practice religion as they wished. They also said that they were very much in control of their lives and choices during their respite breaks, and they confirmed that they were supported to manage and take control of their personal property and finances.

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of their lives and choices during their respite breaks.

Regulation 13: General welfare and development

During their respite breaks, residents were supported to take part in a range of social and developmental activities that they enjoyed and suited their needs. These were supported both at the centre, at day services, and in the community.

Suitable support was provided for residents to achieve these in accordance with their individual choices and interests, as well as their assessed needs. Residents told the inspector that they were also involved in housekeeping tasks such as cooking and laundry, and were also offered the opportunities to attend developmental groups and training.

Judgment: Compliant

Regulation 17: Premises

The designated suited the needs of the residents, was of sound construction and well maintained, was clean, and was suitably decorated and equipped throughout.

The centre was made up of one house, which could accommodate up to three residents at a time for respite breaks. During a walk around the centre, the inspector found that the house was warm, clean, comfortable and suitably furnished. There was adequate furniture such as wardrobes, bedside lockers and chests of drawers in which residents could store their clothing and belongings while they were staying in the centre. Assistive equipment, such as an overhead hoist and adapted bathroom facilities, were also provided in one bedroom to enhance comfort and safety for residents with physical disabilities. There was a well-maintained enclosed garden behind the centre. The centre was served by an external refuse collection service and there were laundry facilities for residents to use. The centre was also equipped with Wi-Fi and televisions for residents' use.

Judgment: Compliant

Regulation 18: Food and nutrition

There were suitable facilities in the centre for food preparation and residents were supported to buy, prepare and cook their own meals as they so wished. This ensured that residents had meals that they enjoyed which suited their needs and

preferences.

The inspector visited the centre's kitchen, which was well equipped, and where food could be stored and prepared in hygienic conditions. There was adequate space for the storage of food, including refrigerated storage. As this was a respite service, residents told the inspector that they decided on their arrival each evening what they would like to eat and then shopped accordingly at one of the supermarkets nearby. There were colourful, easy-to-read cookery books in the kitchen for residents' use. Residents also explained that they had choices around eating in the centre, have a take-away or going out to eat which they enjoyed and did often.

Judgment: Compliant

Regulation 20: Information for residents

The provider had ensured that information was provided to residents. There was a residents' guide that met the requirements of the regulations. The inspector read this document and found that it had been developed in an easy-to-read format and met the requirements of the regulations. Other information that was relevant to residents was also provided in the centre. This included photographic information about human rights and access to a confidential recipient.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

There were safe medication management practices in the designated centre which ensured that medicines were being safely and appropriately administered to residents during their respite stays.

The inspector viewed the medication management processes in the centre, including storage and medication prescribing and administration records. The inspector found that prescription and administration records to be clear and legible, and provided the required information to guide staff in the safe administration of medication. During respite breaks, residents' medications were suitably and securely stored at the centre, and the person in charge showed the inspector the process that was used for keeping count of medicines at residents' arrival and on their return home.

As these residents primarily lived at their family homes, their medicines were administered in the centre in line with the arrangement that were in place at home. This was to ensure consistency during their respite breaks.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

There was a suitable personal planning process to ensure that residents' assessed needs were being met. Comprehensive assessment of residents' health, personal and social care needs had been carried out, and individualised personal plans had been developed for residents based on their assessed needs.

The person in charge explained that residents' plans were not managed exclusively by the designated centre but had been developed holistically with considerable involvement from residents' families and day service staff. As residents only spent time intermittently in the designated centre, their plans were shared between day service and the respite centre to guide staff in both places. This ensured that residents had continuity of care in both their support services.

The inspector viewed the personal plan of a resident who was having a respite break on the day of inspection. The information in the plan was very clearly stated and was up to date. Goals that were meaningful to the resident had been identified and achievement of these was being supported at day service, in the designated centre and at home.

Judgment: Compliant

Regulation 6: Health care

Residents' healthcare needs were being well met in line with their personal plans and residents had access to medical and healthcare services to ensure their wellbeing during respite breaks.

As residents' stays in the centre were for short and intermittent breaks, their healthcare needs were being managed mainly by their families with support as required from day service staff. However, the person in charge explained that, if medical intervention was required during a respite break that this would be supported.

The inspector viewed a resident's healthcare file which included records of the resident's medical assessments. Plans of care had been developed to manage any identified healthcare needs. The information viewed was clear and up to date. Hospital passports had been developed to share necessary information in the event of a hospital admission being required while a resident was attending day service or during a respite break.

Judgment: Compliant

Regulation 9: Residents' rights

There were systems in place to support residents' human rights. Throughout the inspection, it was clear that residents had choices around how they spent their days, and how their lifestyles were being managed during respite breaks.

During the inspection, residents spoke about their rights and how they were supported. They were very aware of their rights and explained how they made choices, and had access to support and advocacy. Residents told the inspector that they were very involved in decision making in the centre, and they were seen making plans for the evening and discussing these with staff. Relevant information was also being made available to residents. For example, all residents had attended safeguarding training. Residents also knew the complaints process and felt confident that if they made a complaint that it would be addressed. Residents told the inspector that they had the option of voting if they chose to. They also confirmed that their spiritual preferences were supported and that they could practice their religion as they wished during respite breaks. Residents told the inspector that they retained control of their own money and property.

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 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 22: Insurance	Compliant
Regulation 23: Governance and management	Compliant
Regulation 3: Statement of purpose	Compliant
Quality and safety	
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 18: Food and nutrition	Compliant
Regulation 20: Information for residents	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 9: Residents' rights	Compliant