

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

Issued by the Chief Inspector

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| Name of designated centre: | The Pines |
| Name of provider: | Nua Healthcare Services Limited |
| Address of centre: | Laois |
| Type of inspection: | Announced |
| Date of inspection: | 25 June 2024 |
| Centre ID: | OSV-0005303 |
| Fieldwork ID: | MON-0035159 |

About the designated centre

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

The Pines is a designated centre operated by Nua Healthcare Services Limited. The centre provides residential care for up to four male and female residents, who are over the age of 18 years and who have an intellectual disability. The centre comprises of one two-storey house located on the outskirts of a town in Co. Laois, close to all local amenities. Residents have their own bedroom, some en-suite facilities, bathrooms, sitting room, kitchen and dining area, utility and access to a rear 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.

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| Number of residents on the date of inspection: | 4 |
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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 25 June 2024 | 11:00hrs to 16:55hrs | Jackie Warren | Lead |

What residents told us and what inspectors observed

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 all residents who lived in the centre. The inspector also met with the person in charge, members of the management team and staff on duty, and viewed a range of documentation and processes.

The person in charge, management team and staff prioritised the wellbeing, autonomy, human rights and quality of life of residents. It was clear from observation in the centre, conversations with residents and staff, 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.

Although residents were out and about at various times during the day, the inspector had the opportunity to meet with all four residents during the course of the day. On the inspector's arrival at the centre, it was found that residents started the day at their own pace and got up at times that suited them. All residents knew the purpose of the inspection. Residents said they were very happy with all aspects of living there. Residents told the inspector that they were well supported by staff, who provided them with good care, and that they always made their own choices around their lives. 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.

As this was a home-based service, residents had choices around doing things in the centre, attending activities at external services, or going out to do things in the community. As the centre was centrally located, residents could go out independently for walks, shopping or refreshments and the inspector observed this on the day. The centre also had dedicated transport, which could be used for outings or any activities that residents chose.

Some of the activities that residents took part in and enjoyed included, weekly outings to the cinema, swimming, going to the gym, sports events, entertainment events, and bingo. Residents also went for outings to beaches and parks, some had been to places of interest such as the National Stud, and had attended events including the Ploughing Championships and the Saint Patrick's Day parade. In the community residents were involved in everyday activities such as going to the barber, hairdresser and library. Residents were also being supported to attend developmental activities at external services, and some residents attend weekly mindfulness and healthy eating groups. A resident is involved in Special Olympics training and has competed, and is part of a local writing club, and a resident who is part of an arts and crafts workshop has won a first prize for their craft work.

The centre consisted of a large house in a residential area of a rural town. The centre was laid out and equipped to provide residents with a safe and comfortable living environment. Each resident had their own bedroom. Residents invited the inspector to see their rooms, and these were comfortably furnished and personalised. A resident told the inspector that all the residents in the house got on well together, but that the house was spacious enough for each to have their own space when they wanted this. Another resident who was a big sports fan, showed the inspector a collection of sports memorabilia and pictures in their bedroom, and confirmed that they attend sporting events as well as watching sport on television. Residents also told the inspector of holidays that they had taken, trips that they were planning to make, and visits to see family members. A resident also told the inspector that they were very aware of their rights and of how to access advocacy, and that this had been explained to them by their key worker.

The kitchen was spacious, clean and well equipped. Residents told the inspector that they planned their own meals, and that they always had meals that they liked and enjoyed. Two residents explained that they all sat down together once a week and planned what they would like to prepare for their meals each day. They said that they took turns each weekday to prepare and cook the main evening meals. They said that weekend arrangements were more flexible, as they sometimes went out for something to eat, were visiting, or had a take-away and that they enjoyed this. On the day of inspection, a resident was cooking a meal of steak, onions and chunky chips for everyone. The centre had a colourful, well-kept garden. One resident, who was a keen gardener, brought the inspector to the garden and explained that they took care of the flowers, plants and edible produce. They said that they would be making jam when the gooseberries are ripe enough, and was looking forward to this.

Throughout the inspection, all residents were seen to be at ease and comfortable with each other, and in the company of staff. Staff were observed spending time and interacting warmly with residents, supporting their wishes, and discussing and facilitating their plans and preferences.

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 in this centre to ensure it 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 and this was clearly described in the centre's statement of purpose. The person in charge was based in the centre and was suitably qualified and experienced for this role. There were effective arrangements to support the person in charge in the management of the centre, and also to manage the service and support staff when the person in charge was not on duty.

There were a range of resources in place oversee the quality and safety of care in the centre. These included ongoing audits of the service in line with the centre's audit plan, six-monthly unannounced audits by the provider, and an annual review of the service which included consultation with residents. The centre was also 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, and access to Wi-Fi and televisions. Adequate staffing levels were being maintained in the centre to support residents' preferences and assessed needs, and these staff had received training to support them for their roles. 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. A sample of documents viewed during the inspection included a directory of residents, service agreements, records of temporary absences, audits, risk assessments and fire safety records records. The records 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 role of person in charge was full-time. The inspector read the information supplied to the Health Information and Quality Authority 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 was based in the centre 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. The inspector observed that there were adequate numbers of staff throughout the day to ensure that residents were supported to go out to activities that they enjoyed and to attend appointments. The person in charge and team leader had developed planned and actual rosters which were being updated as required. The inspector viewed a sample of three weeks staffing rosters which showed that a team of social care workers and social care assistants were consistently rostered to care for residents. The actual roster was accurate for the day of inspection.

Judgment: Compliant

Regulation 16: Training and staff development

The provider and person in charge had ensured that staff who worked in the centre had received appropriate training to equip them to provide suitable care to residents. There was a training plan to ensure that training needs were being monitored, identified and planned as required. The inspector viewed staff training records and saw that all staff had attended 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 infection control, medication management, risk assessment, human rights, food hygiene and first aid.

Judgment: Compliant

Regulation 19: Directory of residents

The provider was maintaining a suitable directory of residents. The inspector read the directory of residents and found that it included all the required information relating to each resident who lived in the centre.

Judgment: Compliant

Regulation 21: Records

The provider had ensured that records were suitably maintained. Although this regulation was not viewed in full at this inspection, the inspector read samples of records and documentation including audits, the directory of residents, the statement of purpose, fire safety records, service agreements and minutes of residents' meetings. The sample of records viewed were maintained in a clear and orderly fashion and were kept up to date.

Judgment: Compliant

Regulation 22: Insurance

The provider had ensured that the centre was suitably insured. There was a current insurance policy in effect 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 who was based in the centre on weekdays, while a deputy manager covered the management of the centre at weekends. The service was subject to ongoing monitoring and review. This included auditing of the service in line with the centre's audit plan, 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, all of which showed a high level of compliance. The centre was suitably resourced to ensure the effective delivery of care and support to residents. During the inspection, the inspector observed that these resources included the provision of suitable, safe and comfortable accommodation and furnishing, transport vehicles, Wi-Fi, television, and adequate staffing levels to support residents' preferences and assessed needs.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

The provider had developed written agreements for the provision of service for all residents. The inspector viewed the service agreements for all four residents who lived in the centre. The agreements included the required information about the service to be provided, such as the financial responsibility of the residents and the support that residents would receive. The service agreements had been agreed and signed by the residents and also on behalf of the provider.

Judgment: Compliant

Regulation 3: Statement of purpose

The provider had developed a statement of purpose and function for the service. 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 statement of purpose was being reviewed annually by the person in charge, and was about to be reviewed in the coming days to reflect a change that was about to take place.

Judgment: Compliant

Regulation 30: Volunteers

There were no volunteers being used in this service.

Judgment: Compliant

Quality and safety

The provider ensured that residents received a good level of person-centred care that allowed them to enjoy activities and lifestyles of their choice in a way that suited their preferences. The management team and staff in this service were very focused on maximising the independence, community involvement and general

welfare of residents.

There were measures in place to ensure that residents' general welfare was being supported. Residents had access to the local community and were also involved in activities and tasks that they enjoyed both in the centre and at activity groups locally. Family contact and involvement was seen as an important aspect of the service and residents had involvement with family and friends. Residents could have visitors in their home as they wished and were also supported to meet family and friends in other places.

The centre suited the needs of residents, and was clean, comfortable and well maintained. The house was spacious and each resident had their own bedroom. Laundry facilities were available in the centre for residents' use and there was a refuse collection service provided. There was a well-kept garden to the back of the house where residents could spend time outdoors. The garden was planted with flower beds around a central lawn. There was also a shed with seating. The centre was located in a residential area and residents could access their preferred activities independently on foot, by public transport or in the centre's transport.

The provider had good systems in the centre to manage and reduce the risk of fire. These included staff training, emergency evacuation drills, servicing of fire safety equipment by external experts and ongoing fire safety checks by staff. Fire doors were fitted throughout the building to limit the spread of fire.

Residents' nutritional needs were well met. A well equipped and accessible 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.

Residents' civil, political and religious rights were being well supported. Throughout the inspection, the inspector saw that each resident had choice and control in their daily life. Information was supplied to residents through ongoing interaction with staff and the provider had also provided a written guide for residents with information about the service. Residents communicated with each other and with staff at weekly house meetings, when they made plans and discussed topics of interest to them. While information and opportunities were made available to residents, they could use this information to make informed choices around which options they wished to become involved in and which they wanted to decline. For example, residents made choices around their levels of involvement in voting and religion. Residents were also supported to manage and take control of their personal property and finances.

Regulation 12: Personal possessions

The person in charge had ensured that residents had control of their own personal

property and possessions, and they were supported to manage their own finances. Residents told the inspector that they kept control of their own possessions and valuables. Secure spaces were provided in residents' bedrooms for storage of their valuables, and residents could also lock their bedroom doors if they chose to. Residents had adequate space for storage of their clothing and there were facilities in the centre where each person could launder their clothes. The inspector saw that records of residents' belongings were being kept.

Judgment: Compliant

Regulation 13: General welfare and development

Residents were being supported to take part in a range of social and developmental activities both at the centre, at external day services, and in the local 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 were also involved in housekeeping tasks such as cooking and laundry, and were also offered the opportunities to attend developmental groups if they wished to.

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 made up of one house, which could accommodate up to four residents. During a walk around the centre, the inspector found that the house was well maintained, clean, comfortable and suitably decorated. There was a well-maintained enclosed garden behind the house. The centre was served by an external refuse collection service and there were laundry facilities for residents to use.

Judgment: Compliant

Regulation 18: Food and nutrition

Residents' nutritional needs were being supported. 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. Residents went shopping with staff as they wished and were very involved in food preparation. Meal plans for each week were planned in

advance at a residents' meeting each weekend, and each resident took turns in preparing the main meals on weekdays.

Judgment: Compliant

Regulation 20: Information for residents

There were good arrangements in the centre to ensure that residents were supplied with information. There was a residents' guide that contained a wide range of information for residents. The inspector read the residents' guide and found that it met most of the requirements of the regulations, although, it did not include the terms and conditions for residing in the centre. However, this was addressed by the person in charge during the inspection and the revised residents' guide was supplied to the Chief Inspector. Other information that was relevant to residents, such as information about local event and the complaints process, was clearly displayed in the centre.

Judgment: Compliant

Regulation 25: Temporary absence, transition and discharge of residents

There were arrangements in place to ensure, that where a resident was temporarily absent from the designated centre, that the hospital or other place was supplied with relevant information about the resident. The person in charge was aware of these arrangements and explained them to the inspector. Hospital passports had been developed for each resident and these included a range of information about residents' specific care needs to inform hospital staff. The inspector viewed the records relating to a hospital admission and saw that clear records of the resident's admission and discharge from the hospital were kept. There was an up-to-date policy to guide this process.

Judgment: Compliant

Regulation 28: Fire precautions

There were measures in the centre to safeguard residents, staff and visitors from the risk of fire. The person in charge showed the inspector records of fire drills, equipment servicing, internal fire safety checks, fire training records, and personal evacuation plans. There were arrangements in place for servicing and checking fire safety equipment and fixtures both by external contractors and by staff. Records

viewed by the inspector showed that these processes were up to date. On a walk through the centre, the inspector saw that there were fire doors throughout the building to contain and reduce the spread of fire. Fire evacuation drills involving residents and staff were being carried out both during the day and at night. The inspector viewed records of fire drills and found that these had been completed in a timely manner, and that all residents had been promptly evacuated to safety. A residents who spoke with the inspector explained the evacuation process and was confident that they would evacuate promptly if required. all staff and three residents had attended fire training.

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.

All staff in the centre had attended training in human rights. Staff who spoke to the inspector said that they had enjoyed the training and found that it reassured them that they were providing a human rights based support to residents.

Residents told the inspector that they were very involved in decision making in the centre, and they were seen making plans and discussing their wishes with staff during the inspection. Residents also told the inspector about their rights and advocacy and confirmed that staff had told them about these. They also explained that they could live their lives as they chose and received staff support as required to do this. They 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 included their rights not to practice their religion if that was what they wanted. Residents also told the inspector that they retained control of their own money and property, and could have the level of support that they required from staff to achieve this.

Clean, comfortable accommodation was provided for residents and they told the inspector of their involvement in decorating and personalising their rooms the way they liked, with bed linens of their choice, family photos, ornaments and merchandise relating to their hobbies and interests. Residents also told the inspector that they took part in housekeeping, cooking and laundry and this was seen to be taking place during the inspection.

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 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 |
| Quality and safety | |
| 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 28: Fire precautions | Compliant |
| Regulation 9: Residents' rights | Compliant |