

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

Issued by the Chief Inspector

Name of designated centre:	Wolseley Lodge
Name of provider:	The Cheshire Foundation in Ireland
Address of centre:	Carlow
Type of inspection:	Unannounced
Date of inspection:	14 September 2022
Centre ID:	OSV-0005342
Fieldwork ID:	MON-0036437

## About the designated centre

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

Wolseley Lodge is a detached two storey dwelling located on the outskirts of a town for three people, male or female, over the age of 18 years. This dwelling consists of eight bedrooms. The bedrooms which are occupied by residents are en suite. The remaining bedrooms are used for office space for staff and one is used as a storage room. There is a open plan kitchen/dining/lounge area which has double doors linking the patio area and garden. The centre provides a service to people with physical disabilities including wheelchair users, and is staffed both day and night. The service is operated as a nurse led model with the additional support of care staff and ancillary supports such as maintenance, gardening and transport as required.

**The following information outlines some additional data on this centre.**

Number of residents on the date of inspection:	3
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This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 (as amended). To prepare for this inspection the inspector of social services (**hereafter referred to as inspectors**) reviewed all information about this centre. This included any previous inspection findings, registration information, information submitted by the provider or person in charge and other unsolicited information since the last inspection.

As part of our inspection, where possible, we:

- speak with residents and the people who visit them to find out their experience of the service,
- talk with staff and management to find out how they plan, deliver and monitor the care and support services that are provided to people who live in the centre,
- observe practice and daily life to see if it reflects what people tell us,
- review documents to see if appropriate records are kept and that they reflect practice and what people tell us.

In order to summarise our inspection findings and to describe how well a service is doing, we group and report on the regulations under two dimensions of:

### **1. Capacity and capability of the service:**

This section describes the leadership and management of the centre and how effective it is in ensuring that a good quality and safe service is being provided. It outlines how people who work in the centre are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service.

### **2. Quality and safety of the service:**

This section describes the care and support people receive and if it was of a good quality and ensured people were safe. It includes information about the care and supports available for people and the environment in which they live.

A full list of all regulations and the dimension they are reported under can be seen in Appendix 1.

**This inspection was carried out during the following times:**

Date	Times of Inspection	Inspector	Role
Wednesday 14 September 2022	09:30hrs to 15:00hrs	Sarah Mockler	Lead

## What residents told us and what inspectors observed

This inspection was unannounced and the purpose of the inspection was to monitor the centres levels of compliance with Regulation 27 and the National Standards for infection prevention and control in community services (HIQA, 2018). The COVID-19 pandemic was ongoing on the day of inspection and measures were taken by staff and the inspector to reduce risk of infection. This included wearing face masks and regular hand hygiene. On arrival at the centre the inspector was welcomed by the assistant manager and relevant COVID-19 symptom checks were carried out.

There were three residents living in the centre on the day of inspection and the inspector had the opportunity to meet with all three residents. Residents appeared happy and comfortable in their home throughout the inspection day. The inspector observed residents getting ready for the day ahead on the morning of the inspection. Residents were being supported with their daily routine and were offered relevant food choices and drinks at this time. Residents were familiar with the staff present and light hearted conversations were noted. A resident was recuperating following a recent hospital stay. They stated that they were happy to be back at home. They spoke about the hospital food and that it had not enjoyed this aspect of their stay in hospital. They spoke very positively about their food in their home. This resident had plans to relax for the day.

Another resident came up to the breakfast table and sat for their breakfast. Residents were observed to greet each other. Staff were seen to be patient and kind with their interactions and were observed to give the resident space and time to answer questions as needed. This resident had a recent birthday and staff spoke about how much this resident enjoyed this event. Two goldfish had been purchased as a present and were situated in the sitting room beside the resident's preferred chair.

Later in the day the inspector spoke with a resident in their bedroom. The resident had many preferred items and pictures of family on display and they spoke about the people in the pictures. They spoke about enjoying listening to music. When asked if they were happy and well cared for in the home, the resident immediately smiled and stated they very much enjoyed living in the home.

Across the day of inspection residents were supported in kind and gentle manner in line with their assessed needs. Residents were observed completing their morning routines, relaxing in the sitting room or reading the daily newspaper. Residents appeared relaxed and content. From documentation review it was evident that residents were supported to enjoy activities in line with their wishes and preferences. Due to the age profile of the residents the residents choose to spend the day at home. They opted to partake for different activities across the week. They enjoyed drives out, meals out, visiting family, shopping, bingo, watching tv programs and sport. In house activities were also provided if a resident wanted to engage in the same. Person-centred planning was evident with the needs and wishes of the

residents respected at all times.

The designated centre comprises a detached dormer bungalow building located outside a town in Co. Carlow. A beautiful well kept garden was located to the back of the premises. The designated centre was decorated in a homely manner. Residents each had access to their own large en-suite bedroom which was decorated according to their personal tastes. The designated centre was observed to be clean and tidy. The inspector observed staff cleaning areas throughout the day. The Inspector also saw that staff were wearing face masks and engaging in regular good hand hygiene practices.

High levels of staff support were noted in the centre and the staff team appeared knowledgeable regarding the resident's individual preferences and needs when speaking with the inspector. The staff team comprised of care support workers. Nursing care was available to all residents as required. One of the nursing staff had been allocated as an infection control lead. This staff member was responsible for ensuring the providers systems and policies regarding infection control were implemented in the centre. The centre had recently recruited for a relief panel of staff to fill shifts when required, such as in the event of large numbers of staff illness secondary to an outbreak of COVID-19.

Overall it was found that residents appeared happy and comfortable living in their home on the day of inspection. Systems were in place to ensure that infection prevention and control (IPC) measures were consistent and effectively monitored. It was evident that measures implemented were consistent with the National Standards and in line with the providers own policy on infection prevention and control.

The next two sections of the report will discuss findings from the inspectors review of infection prevention and control measures in the centre. This will be presented under two headings: Capacity and capability and Quality and Safety, before a final overall judgment on compliance against regulation 27: Protection Against Infection. High levels of compliance were noted in the centre on the day of inspection.

## Capacity and capability

Overall it was found that the registered provider was demonstrating the capacity and capability to provide a safe service with appropriate and effective systems in place to reduce the risk of COVID-19 and healthcare associated infection in the centre. The service had up-to-date infection prevention and control policies in place which were subject to regular review and which guided the care and support that was provided in the centre. In addition to this a detailed standard operating procedure in relation to IPC was in place to help guide staff appropriately.

There were clear and effective management systems in place to ensure regular oversight of infection prevention and control measures in the centre. There was a

full-time person in charge in place who was supported by an assistant manager in the centre. Both of these staff facilitated the inspection and were found to be overall knowledgeable around the IPC needs within the centre. The centre was also supported by a clinical team which included staff nurses, a clinical nurse manager and a regional clinical partner. This team were available to support if any infection control or COVID-19 concerns arose. There was a regular management presence in the centre and the person in charge and assistant manager provided both formal one to one supervisions with staff and regular on the floor supervision with staff and residents.

Regular audits had been completed in the centre which fully reviewed infection prevention and control measures in place. This included a review of staff training, environment, management systems including contingency planning, PPE use and hand hygiene. Management were appropriately identifying areas in need of improvements and developing actions plan with persons responsible when necessary. Infection control was also an aspect of the providers unannounced six monthly audits in the centre. The findings of recent audits were in line with the inspectors findings on the inspection day.

The number and skill mix of staff present was suitable to support the residents appropriately while ensuring IPC risks were appropriately managed. The staff team comprised of of care support staff. Nursing support was available to the centre as required. A consistent and committed staff team was present with some staff reporting to have worked within the organisation for over 20 years. An infection control lead was allocated to the centre and they were suitably qualified to ensure IPC measures were in place at all times. Staff meetings were taking place monthly. The inspector reviewed a sample of staff meeting minutes and found that infection control and COVID-19 were regularly discussed. Topics included updates to national guidance, laundry procedures, cleaning requirements and waste management. There was evidence that IPC was also discussed during supervision meetings to ensure staff were appropriately supported in this area.

There was full-time on-call management arrangements in place. The centre had an escalation pathway in place for in the event of a suspected or confirmed case of COVID-19 and staff spoken with were clear regarding this process. A centre specific COVID-19 response plan had been developed for in the event of an outbreak of COVID-19 and this included staffing procedures, management arrangements, isolation arrangements, communication with residents, staff and families, transport arrangements, and the use of PPE. This document was comprehensive and also assigned a relevant person to specific duties to ensure the outbreak was managed in an effective manner. A specific COVID-19 folder was in place and this was available to all staff with up-to-date guidance and procedures. To date no outbreak had occurred in the centre, however, there was a procedure in place to review outbreaks if they so occurred.

## Quality and safety

With regards to infection prevention and control, the registered provider and management team were ensuring that the service provided was safe and in line with national guidance for residential care facilities. It was evident that infection control was a focus in the centre and that the quality of care was regularly reviewed to ensure compliance with best practice and the National Standards for infection prevention and control in community services (HIQA, 2018).

There were systems in place for the assessment, management and ongoing review of risk in the centre. Individualised risk assessments had been developed regarding potential infection control and COVID-19 risks. Risks had been assessed and mitigating measures were implemented when necessary. Control measures in place were clearly documented and then reviewed.

The premises was a dormer bungalow building with eight bedrooms, many of which are en-suite. Five bedrooms were used as a staff offices and storage areas and these were located upstairs. The remaining three bedrooms were located downstairs for resident use. The premises was a homely environment decorated to the residents' individual preferences and needs. The premises was visibly very clean during the walk around the centre. All aspects of the centre including storage areas, cupboards, bathrooms, cooking facilities, food preparation areas and laundry facilities were clean, tidy and organised. Comprehensive cleaning schedules were in place and these were carefully implemented by all staff daily. High touch points such as handles, switches, keyboards, remotes, phones and taps, were cleaned regularly by staff and the inspector observed staff carrying out cleaning duties. Separate schedules were in place for the deep cleaning of all other aspects of the centre including residents bedrooms, bathrooms, office spaces, hallways and the kitchen.

It was evident that infection control measures and COVID-19 measures were regularly communicated with residents. Weekly meetings with residents had occurred where COVID-19 was discussed in detail with the resident including relevant government guidelines and how they were being implemented in the centre. The residents' specific views and feelings in regards to this time were sought and residents were provided with the necessary assurances. In addition to this information was reviewed in terms of specific IPC needs around other healthcare associated infections. Relevant discussions had taken place with residents to ensure they were suitably informed of relevant measures in place.

## Regulation 27: Protection against infection

The purpose of the inspection day was to monitor the centres levels of compliance with Regulation 27 and the National Standards for infection prevention and control in community services (HIQA, 2018). Overall the inspector found high levels of compliance. Clear, safe and effective systems were in place for protecting residents against healthcare associated infections. This was evident in the following areas



reviewed

- Staff supports were in place to meet the needs of the residents and to safely implement infection prevention and control measures.
- All staff had completed up-to-date training in areas including infection prevention and control, hand hygiene, and donning and doffing.
- Competency based assessments in relation aspects of training, such as hand hygiene, had occurred with all staff.
- Clear management and oversight systems were in place and infection control measures were regularly audited and reviewed.
- The service had a clear and robust contingency plan in place for in the event of an outbreak of COVID-19.
- The service had up-to-date infection prevention and control policies in place which were subject to regular review and which guided the care and support that was provided in the centre.
- There was a system in place for identifying and mitigating potential and actual infection control risks in the centre.
- The premises was visibly clean and well maintained. Schedules were in place to ensure that all aspects of the premises was regularly cleaned and deep cleaned. Cleaning schedules included the cleaning of residents equipment.
- Policies and procedures were guiding safe practices in areas including laundry procedures, hand washing facilities and cleaning procedures.
- There was regular and consistent communication between staff, management and residents regarding infection prevention and control measures in the centre.

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
<b>Capacity and capability</b>	
<b>Quality and safety</b>	
Regulation 27: Protection against infection	Compliant