



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

## Issued by the Chief Inspector

Name of designated centre:	Peamount Healthcare B2
Name of provider:	Peamount Healthcare
Address of centre:	Co. Dublin
Type of inspection:	Unannounced
Date of inspection:	07 June 2022
Centre ID:	OSV-0005765
Fieldwork ID:	MON-0036318

## About the designated centre

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

The designated centre is located on a large campus in West County Dublin and is made up of three individual units. Residential care and support services are provided by the centre for up to 15 persons with disabilities. The three units are of similar layout and have an entrance hallway, large living and dining room, a kitchen area, a main shower room with toilet, a separate toilet, resident bedrooms, and in two of the units there are relaxation or quiet rooms. There is a staff team of nurses and carers employed in the centre along with a clinical nurse manager and person in charge.

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

Number of residents on the date of inspection:

10

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 7 June 2022	10:15hrs to 14:00hrs	Thomas Hogan	Lead

## What residents told us and what inspectors observed

This unannounced inspection was completed in order to inspect the arrangements which the registered provider had put in place in relation to infection prevention and control. During the course of the inspection, the inspector met and spoke with the person in charge and staff members and met and spent time speaking with residents. In addition, the inspector spent time reviewing documentation and observing the physical environment. The inspector found that overall, the registered provider had ensured that residents were in receipt of a good standard of care which was increasingly person-centred in nature. It was clear to the inspector that the registered provider was complying with the requirements with Regulation 27 - Protection against infection and by extension the National Standards for infection prevention and control in community services (2018).

During the course of the inspection, the inspector visited all three units and met with residents who were going about their daily activities. Residents told the inspector that they were very happy living in the centre, felt appropriately supported and also felt safe. Some residents were attending day supports and services at the time of the inspection while others were supported to attending medical appointments and off-site activities such as shopping and day trips. One resident told the inspector about how there had been a positive change in practices in the centre in recent months whereby all meals were now prepared locally in each unit and residents were supported to complete weekly shopping with the support of staff members. The resident met with explained that they really enjoyed helping with the grocery shopping also liked preparing a shopping list and reminding staff members when the weekly shopping was due. Staff members told the inspector that this change in practice had resulted in positive outcomes for residents with some enjoying the mealtime experience and increase in nutritional intake. The inspector observed that there was a very positive and enjoyable atmosphere in the centre. Staff members were laughing and joking with residents and it was clear that strong relationships had developed.

The premises of all three units of the centre were found to be clean throughout. The inspector found the units were bright and airy and there were numerous spaces available for residents to engage in activities, or to spend their time relaxing in. There were satisfactory numbers of bathrooms and toilets available to support the number of residents who were living in the centre. All residents had their own bedrooms which were decorated and furnished to reflect the wishes and tastes of individual residents.

Cleaning in the centre was a shared responsibility between a house hold staff member who was employed in the centre for 24 hours each week and also the wider staff team. There were checklists in use which detailed duties required for completion and a review of these records found that the required duties had been completed as prescribed for the period reviewed. The inspector found that there were adequate resources in place to ensure that the cleaning needs of the centre

were met given its size and number of respite users availing of its services.

The staff team met with during the course of the inspection told the inspector about how they had supported the resident group to understand the need for infection prevention and control measures such as increased hand washing and use of personal protective equipment (PPE) during the period of the COVID-19 pandemic. The approaches they adapted included easy-to-read documents, regular reminders and demonstrations. Residents told the inspector that as a result they developed a good understanding of the need for additional precautions and adapted to the use of PPE for example.

In summary, the inspector found that overall, the centre was operating at a good standard for infection prevention and control practice and the registered provider was ensuring that residents at risk of developing or transmitting healthcare-associated infections were appropriately protected while availing of the services of the centre. The following 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.

## Capacity and capability

The inspector found that the registered provider had put in place clear governance and management structures for infection prevention and control in this centre in line with the National Standards for infection prevention and control in community services (2018). There were effective systems in place to ensure oversight of infection prevention and control practices in the centre and both residents and staff members demonstrated an awareness of the importance of standard and transmission based precautions.

The registered provider had established an infection prevention control committee who met on a regular basis and in addition had appointed an infection prevention and control manager within the organisation. The person in charge of the centre was identified as the person with overall responsibility for the management of infection prevention and control and there was a staff member appointed as an infection prevention and control lead who completed monthly audits. In addition, the registered provider had a range of infection prevention and control related policies, procedures, protocols and guidelines in place. There were a range of audits completed in the centre which included monthly COVID-19 audits and health and safety audits. There were also quarterly audits on the environment of the centre, household management, and infection prevention and control self-assessments.

There was a local contingency plan in place for the management of an outbreak of COVID-19 in the centre and the inspector found that this had been updated on a regular basis and provided clear and concise information for the person in charge and staff team on the actions required in the event of an outbreak occurring. There

was also an outbreak management plan in place which provided some guidance on the actions required in the event of an outbreak of other healthcare-associated infections in the centre.

The inspector found that the centre was appropriately resourced to meet the needs of the residents being supported and to ensure that infection prevention and control measures were effectively implemented. There was a suitable skill-mix amongst the staff team employed in the centre to meet the needs of the resident group including infection prevention and control needs. The inspector found that there was information and guidance on infection prevention and control available to the staff team in the form of the National Standards, and policies, procedures and guidelines from the Health Service Executive and Health Protection Surveillance Centre.

The staff team had completed training in a number of infection prevention and control areas including food safety, hand hygiene, infection prevention and control and the use of PPE. Staff members met with were knowledgeable about the risks associated with COVID-19 and had good awareness of standard and transmission based precautions. Staff members were observed to wear PPE in line with current public health guidelines.

## Quality and safety

The inspector found that residents availing of the services of this centre were provided with information by the local staff team about infection prevention and control. Information was provided in adapted and easy-to-read formats where required and the inspector found that infection prevention and control was a standing agenda item at resident meetings which took place in the centre on a regular basis.

The staff team were found to have taken a person-centred approach to providing the resident group with information about the national vaccination programme for COVID-19 and gained consent through explaining the procedure, benefits and potential side effects prior to each vaccination or booster. Members of the staff team met with during the course of the inspection demonstrated a high level of respect for residents and their decision making with regards to the vaccination programme. The inspector was assured the residents living in the centre had appropriate access to healthcare services and allied health professionals. There was evidence of regular consultation with treating physicians. The inspector was assured that if a resident was to be admitted to acute services, the staff team would be able to provide the hospital or inpatient service with the required information on their infectious diseases history.

The physical environment of the centre was found to be clean throughout and enhanced cleaning arrangements were activated during periods of suspected or confirmed outbreaks of healthcare-associated infections. A review of cleaning records found that all prescribed cleaning had been completed for the periods

reviewed by the inspector. There were some minor requirements for repairs of flooring in a sitting room and painting of scuff marks in hallways, however, the registered provider had self-identified these matters previously and had a plan in place to address these in a timely manner. Cleaning equipment in use in the centre was observed to be clean and well maintained.

There was minimal clinical waste in use in the centre at the time of the inspection. Sharp bins were observed to be assembled correctly, labelled and appropriately stored. A central shared clinical waste depositary waste bin on site was observed to be appropriately locked and the area around it was well maintained. Laundry was managed through internal domestic arrangements for residents' clothing and personal items and externally through a contractor for all bed linen and towels. The person in charge highlighted, however, that they were reviewing this arrangement with a view to introducing more person-centred approaches to the management of laundry services within the centre. Domestic appliances including washing machines, dishwashers, ovens, hobs, microwaves, fridges and freezers were all found to be clean at the time of the inspection. There good storage arrangements throughout the centre which was spacious in nature and provided for sufficient space for the resident and staff to live and work comfortably.

Overall, the inspector found that infection prevention and control formed part of the routine delivery of care and support in the centre. Staff members met with during the course of the inspection were motivated to provide good standards of care and support to residents including their infection prevention and control needs.

## Regulation 27: Protection against infection

The inspector found that the registered provider had developed and implemented effective systems and processes for the oversight and review of infection prevention and control practices in this centre. The inspector observed practices which were consistent with the National Standards for infection prevention and control in community services (2018). As outlined in this report, the provider had a strong governance framework in place which resulted in the delivery of safe and quality services to those availing of the services of the centre. The structures in place allowed for good oversight of infection prevention and control practice which included ongoing monitoring and the development of quality improvement initiatives.

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