



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

Issued by the Chief Inspector

Name of designated centre:	Damson View
Name of provider:	Health Service Executive
Address of centre:	Sligo
Type of inspection:	Short Notice Announced
Date of inspection:	06 February 2024
Centre ID:	OSV-0008399
Fieldwork ID:	MON-0039784

About the designated centre

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

Damson View can provide 24 hour residential care for up to 4 individuals, and can support people that function in the moderate severe/profound range of intellectual disability with physical/ sensory and behaviour support needs. Both male and female residents over the age of 18 years can be supported in this centre. The centre is an accessible single dwelling in a rural area, but close to a busy city. Accessible transport is available for residents to access local amenities. Residents are supported by a staff team of nurses and care assistants who are present in the centre both during the day and at night.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	4
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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
Tuesday 6 February 2024	11:20hrs to 16:45hrs	Jackie Warren	Lead

What residents told us and what inspectors observed

The residents who lived in this centre had a good quality of life, had choices in their daily lives, were supported to achieve good health, 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 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, spoke with, and observed, the residents who lived in the centre. The inspector also met with the person in charge and staff on duty, and viewed a range of documentation and processes.

The residents who lived in the centre did not have the verbal capacity, or chose not to speak with the inspector to discuss their lives there. However, the inspector met with all four residents during the course of the day, saw how they spent the day, and observed the interaction between residents and staff. Residents were observed to be at ease and comfortable in the company of staff, and were relaxed and happy in the centre. Throughout the inspection, staff were observed spending time and interacting warmly with residents, supporting their wishes, ensuring that they were doing things that they enjoyed and providing meals and refreshments to suit their needs and preferences.

As this was a home-based service residents had choices around doing activities in the centre or going out to do things in the community or in activity centres. Some of the daily activities that residents enjoyed included going out for walks, drives to beaches, shopping, going out for coffee and going to activity centres where a wide range of appropriate activities were taking place. Residents also enjoyed taking part in everyday community activities such as going to the hairdresser, barber and beautician, eating out in restaurants, shopping, cinema, concerts and music sessions, and attending clinical appointments such as physiotherapy. On the afternoon of inspection, a resident went out to dog therapy and clearly indicated that they were looking forward to this activity. Another resident went out for reflexology which the resident attended and enjoyed every week. A resident who enjoyed art was involved in a community art group and had had a picture published.

The centre consisted of one house and could provide full time residential accommodation for up to four adults. This centre was located in a rural area close to a busy town, which gave residents good access to a wide range of facilities and amenities. The centre was designed and equipped to meet the needs of the people who lived there and provided them with a safe and homely living environment. The house was comfortably furnished, with colour coordinated soft furnishings. Rooms were personalised with family photographs, artwork and personal belongings. Televisions, musical equipment and Wi-Fi were available for residents' use. The house was suitably equipped to ensure the comfort and safety of residents and to

promote accessibility. Bedrooms and bathrooms were fitted with overhead hoists to increase the levels of comfort and safety for residents. Ramps had also be provided at external to increase accessibility for residents with limited mobility. There was an outdoor space with garden furniture and a raised bed outside the building.

The centre had dedicated transport, which could be used for outings or any activities that residents chose. The staffing levels in the centre ensured that each resident could be individually supported by staff to do activities of their preference.

It was clear from observation in the centre, conversations with 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 be involved in activities that they enjoyed, both in the centre and elsewhere. Throughout the inspection it was very clear that the person in charge and staff prioritised the wellbeing and quality of life of residents.

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. While this inspection identified a good level of personalised care and social support for residents, there were some areas for improvement related to documentation and training, which will be discussed in the next sections of the report.

Capacity and capability

The provider had measures in place in this centre to ensure it was well managed, and that residents' care and support were 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 centre. There was a suitably qualified and experienced person in charge who worked closely with staff and with the wider management team. Throughout the inspection, the person in charge was very knowledgeable regarding the individual needs of each resident. It was clear that the person in charge was very involved in the running of the service.

The provider 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. An audit schedule was in place for 2024, and auditing had commenced as planned. The first unannounced audits of the service had been carried out on behalf of the provider. These audits showed high levels of compliance and any identified actions had been addressed. Findings from a range of monitoring information, including audits, reviews, risk assessments, and reports formed a quality improvement plan which was being addressed and frequently updated. At the time of inspection, all issues on the quality improvement plan had been addressed within the recommended time frames. An annual review of the quality and safety of care and

support of residents had not yet been carried out as the centre was not a year in operation.

Although there had been no complaints in the centre to date, the provider had a process for management of complaints should this be required. The complaints management process included, a clear complaints procedure displayed in the centre, a procedure for recording and investigating complaints and an up-to-date policy to guide practice.

The centre was suitably resourced to ensure the effective delivery of care and support to residents. These resources included the provision of a suitable, safe, clean, accessible and comfortable environment, wheel-chair accessible transport, access to Wi-Fi, television, assistive equipment, and adequate levels of suitably trained staff to support residents with both their leisure and healthcare needs. A range of healthcare services, including speech and language therapy, physiotherapy, and behaviour support staff were available to support residents as required.

Staff who worked in the centre had received training relevant to their roles, such as training in hand hygiene, feeding, eating, drinking and swallowing, human rights, manual handling, and medication management, in addition to up-to-date mandatory training in fire safety, behaviour management and safeguarding. Feedback from the human rights training indicated that the training had provided an increased awareness of a human rights based approach in residents' daily lives. Policies required by schedule 5 of the regulations were also available to guide staff and were up to date.

Documents viewed during the inspection included personal planning files, audits, staff training records, residents' service agreements, the statement of purpose and, a residents' guide, the directory of residents and operational policies and procedures. The sample of records viewed were being maintained to a high standard, were informative and were up to date.

Regulation 14: Persons in charge

The role of person in charge was full time and the person who filled this role had the required qualifications and experience. The person in charge was very knowledgeable regarding the individual needs of each resident.

Judgment: Compliant

Regulation 15: Staffing

Staffing levels and skill-mixes were sufficient to meet the assessed needs of the

resident at the time of inspection.

Judgment: Compliant

Regulation 16: Training and staff development

Staff who worked in the centre had received a range of training relevant to their roles, in addition to mandatory training in fire safety, behaviour support, and safeguarding.

Judgment: Compliant

Regulation 19: Directory of residents

There was a directory of residents which included the required information relating to each resident who lived in the centre.

Judgment: Compliant

Regulation 21: Records

This regulation was not examined in full at this inspection. However, the sample of records viewed were maintained in a clear and orderly fashion, were informative, and were kept up to date.

Judgment: Compliant

Regulation 23: Governance and management

There were clear governance arrangements in place to manage the centre. These included auditing systems and a clear organisational structure with clear lines of authority. This ensured that a good quality and safe service was provided to the residents who lived in this centre.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

There were written agreements for the provision of service in place for all residents. These agreements included the required information about the service being provided.

Judgment: Compliant

Regulation 3: Statement of purpose

There was an up-to-date statement of purpose which accurately described the service to be provided, and was being reviewed annually by the person in charge.

Judgment: Compliant

Regulation 30: Volunteers

The provider did not use volunteers in their services.

Judgment: Compliant

Regulation 34: Complaints procedure

Although there had been no complaints made in the centre, the provider had suitable arrangements in place for the management of complaints should this be required.

Judgment: Compliant

Regulation 4: Written policies and procedures

Policies required by schedule 5 of the regulations were available to guide staff. All policies been reviewed within a three year period as required.

Judgment: Compliant

Quality and safety

There was evidence that a good quality and safe service was being provided to residents who lived in this centre. The provider had good measures in place to ensure that the wellbeing and health of residents was promoted and that residents were kept safe. The management team and staff were very focused on maximising the community involvement and general welfare of residents who lived there. The inspector found that residents received person-centred care and support that allowed them to take part in activities and lifestyles that they enjoyed.

As this was a home-based service, residents could choose to take part in a range of social and developmental activities in their home, at local activity centres 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.

The centre was a large, detached purpose-built house on the outskirts of a rural town. The inspector found that the centre was comfortable, and was decorated and furnished in a manner that suited the needs and preferences of the people who lived there. The centre was kept in a clean and hygienic condition. Surfaces throughout the house were of good quality, were clean and were well maintained. Since the last inspection of the centre, the provider had made further improvements to the centre, with the provision of additional overhead hoists in bedrooms and bathrooms.

The centre was located in the countryside, but close to a rural village and busy city. Wheelchair accessible transport was available which enabled residents to visit the facilities and leisure amenities in the neighbouring areas. There were accessible spaces with seating where residents could spend time outdoors. The location of the centre enabled residents to visit the shops, 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 coffee, music, arts and crafts and keeping in touch with family and friends. The residents liked going out for walks and drives in the local area. The staffing levels in the centre ensured that each resident could be individually supported by staff to do activities of their preference.

The person in charge and staff were very focused on ensuring that residents' general welfare, social and leisure interests, and community involvement were well supported. Residents could take part in a range of social and developmental activities both at the centre, at activity centres and in the community. Suitable support was provided to residents to achieve this in accordance with their individual choices and interests, as well as their assessed needs. There were flexible arrangements around residents' activity choices. Residents could choose to attend activities, on their preferred days only, or to receive a home-based service in the

centre.

Comprehensive assessments of the health, personal and social care needs of each resident had been carried out and were recorded. Individualised personal plans had been developed for all residents based on their assessed needs. Residents' personal planning information was comprehensive, up to date, and suitably recorded. Staff who spoke with the inspector were very familiar and knowledgeable about residents' personal plans. Nursing staff, who were involved in the ongoing assessment of residents' health needs, were based in the centre.

Residents' nutritional needs were well met. Nutritional assessments were being carried out and suitable foods were made available to meet residents' assessed needs and preferences, and residents' weights were being regularly monitored.

Family contact and involvement was seen as an important aspect of the service. Arrangements were in place for residents to have visitors in the centre as they wished and also to meet family and friends in other places.

The provider had ensured that residents were supported and assisted to communicate in accordance with their needs and wishes. Information was supplied to residents both through suitable communication methods, and by interaction with staff. Arrangements in place to support residents to communicate included an up-to-date communication policy, involvement of a speech and language therapist, and by communication plans.

There were measures in place to safeguard residents from harm. These included staff training in safeguarding, an up-to-date safeguarding policy and access to a designated safeguarding officer. Intimate care plans had also been developed for each resident.

Regulation 10: Communication

The provider had ensured that the resident was supported and assisted to communicate in accordance with their needs and wishes.

Judgment: Compliant

Regulation 11: Visits

Residents could receive visitors in the centre, and were supported to meet with family in other locations as required. There was an up-to-date policy to guide practice.

Judgment: Compliant

Regulation 13: General welfare and development

Resident was supported to take part in a range of social and developmental activities at the centre, at 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.

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 well maintained and decorated, clean, spacious, suitably equipped and comfortably furnished.

Judgment: Compliant

Regulation 18: Food and nutrition

Residents' nutritional needs were being well supported. Suitable foods were provided to cater for residents' preferences and assessed needs, and residents had choices at mealtimes.

Judgment: Compliant

Regulation 20: Information for residents

Information that was relevant to residents was provided in user friendly formats. There was also an informative residents' guide that met the requirements of the regulations.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

Comprehensive assessment of the health, personal and social care needs of each resident had been carried out, and individualised personal plans had been developed for all residents based on their assessed needs.

Judgment: Compliant

Regulation 6: Health care

The health needs of residents were assessed and they had good access to a range of healthcare services, such as general practitioners and medical consultants. Access to healthcare professionals was arranged as required, and residents who were eligible for national screening programmes were also supported to attend these as they wished. Plans of care for good health had been developed for residents based on each person's assessed needs.

Judgment: Compliant

Regulation 8: Protection

The provider had arrangements in place to safeguard residents from any form of harm.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 (as amended) and the regulations considered on this inspection were:

Regulation Title	Judgment
Capacity and capability	
Regulation 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 19: Directory of residents	Compliant
Regulation 21: Records	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
Regulation 34: Complaints procedure	Compliant
Regulation 4: Written policies and procedures	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 11: Visits	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 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant