



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

Issued by the Chief Inspector

Name of designated centre:	Prosper Fingal Residential Respite Service 1
Name of provider:	Prosper Fingal Company Limited by Guarantee
Address of centre:	Co. Dublin
Type of inspection:	Unannounced
Date of inspection:	28 October 2021
Centre ID:	OSV-0001860
Fieldwork ID:	MON-0034499

About the designated centre

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

Prosper Fingal Residential Respite 1 provides respite services to approximately 90 residents and ordinarily can accommodate up to seven residents at any one time. At present the centre is operating at a reduced capacity to allow for social distancing to be maintained. The designated centre is a nurse led service who are supported by care assistants which provides service to adults with varying levels of intellectual disability. Some of these service users may also have a secondary disability, such as a physical or sensory disability, autism and or mental health needs. The service also supports individuals who may have an acute illness due to mental health difficulties. The house is located in a suburban town in Co. Dublin close to a range of local amenities. The designated centre is a spacious detached two storey house, with front and back garden and parking space to the side of the building. There is an accessible bathroom and bedroom on the ground floor for service users with reduced mobility. Public transport as well as a centre bus are available. The aim of the service is to provide residential respite which is short term, in a safe and comfortable home, in response to individuals' and carers' needs.

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 - 2015 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
Thursday 28 October 2021	10:30hrs to 15:00hrs	Thomas Hogan	Lead

What residents told us and what inspectors observed

This inspection was completed 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. In addition, the inspector spent time reviewing documentation and observing the physical environment of the centre.

Overall, the inspector found that the registered provider had implemented strong systems and arrangements to ensure that procedures consistent with the National Standards for infection prevention and control in community services (HIQA, 2018). Respite users who were availing of the services of this centre were appropriately protected from the risk of infection through the control measures put in place by the registered provider.

The inspector did not have an opportunity to meet with respite users during the course of the inspection. All four respite users who were availing of the service at the time of the inspection were attending day services and had pre-planned social activities after their day programmes had completed. The inspector received seven completed respite user questionnaires which were issued in advance of the inspection and asked for participant feedback on a number of areas including general satisfaction with the service being delivered, bedroom accommodation, food and mealtime experience, arrangements for visitors to the centre, personal rights, activities, staffing supports and complaints. There was positive feedback provided in the completed questionnaires with respondents indicating that they were very satisfied with the service they were in receipt of. One resident stated "I am glad to come to the centre" and another said "I like everything about the centre". Other feedback included respite users highlighting activities they enjoyed engaging in when they stayed in the centre. These included "art", "cooking", "going out for coffee", "feeding the ducks in the park", "going to the shops", "baking", "singsongs with staff" and "swimming". Respondents were very complimentary of the staff team with one respite user stating that "they are brilliant and fantastic" and another responding "they are very good staff".

The premises of the centre were warm, bright, homely and well maintained throughout and provided for a comfortable environment for residents to spend time. On the ground floor the centre contained an entrance hallway, a large kitchen and dining room, a staff office, a utility room, a toilet, a large living room, three respite user bedrooms (one of which contained an en-suite), a large adapted bathroom and a file room. On the first floor there was a landing area, four respite user bedrooms (one of which contained an en-suite), a staff sleep over room, a toilet, a separate bathroom, a laundry room, and an administrative area with separate entrance. Outside there was a large garden to the rear of the property with space for respite users to relax and to socialise in good weather.

Cleaning in the centre was the responsibility of the staff team who had support from an external cleaning company on two occasions per week when there were changeovers in the respite users who were availing of breaks away. There were comprehensive and detailed checklists in use by the staff team and external cleaning company to ensure that all required cleaning and upkeep was completed as prescribed by the registered provider. 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 inspector found that overall, the centre was operating at a high standard for infection prevention and control practice and the registered provider was ensuring that respite users who may be at risk of healthcare-associated infections were appropriately protected while availing of the services of the centre. The next two 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 was committed to ensuring that respite users who were availing of the services of this centre were in receipt of a safe and quality service. This, the inspector found, included ensuring that respite users were protected by infection prevention and control being prioritised by the registered provider and the highest levels of management within the organisation.

The registered provider had clear governance and management structures in place to minimise the risks to respite users from acquiring or transmitting preventable healthcare-associated infections. There was an infection prevention and control committee established in the organisation which acted as a primary governance mechanism. This committee was made up of the organisation's chief executive officer, director of operations, health and safety officer, and quality and standards manager. This committee met on a regular basis and during increased risk periods associated with the COVID-19 pandemic there was evidence available to demonstrate daily meetings of the forum. In addition, there was an infection prevention and control team in place in the organisation who had responsibility for the development and implementation of infection prevention and control guidance and monitoring and reviewing this matter across the organisation.

The registered provider had a range of policies, procedures, protocols and guidelines in place which related to infection prevention and control. These included guidance on infection prevention and control including COVID-19, a COVID-19 response plan for staff (for suspected or confirmed cases of COVID-19), guidance on the use of personal protective equipment (PPE), COVID-19 outbreak management plan for the centre, service user symptom checklist, COVID-19 respite service admission checklist, infection prevention and control induction checklist for employees, weekly

checklist for PPE and supplies, and COVID-19 guidance on visits to the centre. Additionally, there was a suite of information and guidance available in the centre on infection prevention and control and COVID-19 from a variety of sources including Government, regulatory bodies, the Health Service Executive, and the Health Protection and Surveillance Centre (HSPC).

There were a series of audits completed in the centre which considered infection prevention and control. These included audits completed included company safety officer reviews, weekly infection and control checklists, monthly hazard identification exercises specifically for infection prevention and control, quarterly completion of self-assessment against the national standards for infection prevention and control in community services, and internal centre audits. The audits completed were found to be comprehensive in nature and there was clear evidence available to demonstrate that they had brought about positive changes in the centre. The inspector found that there was a infection prevention and control quality improvement plan in place to drive ongoing quality improvement which tracked the completion of actions arising across the range of audits completed in the centre. An annual review of the centre which was completed for 2020 was found to consider infection prevention and control across a number of key areas considered by the registered provider.

The inspector met with members of the staff team during the course of the inspection. They told the inspector that they felt supported and understood their roles in infection prevention and control. It was clear to the inspector that there were effective systems in place for workforce planning which ensured that there were suitable numbers of staff members employed and available with the right skills and expertise to meet the centre's infection prevention and control needs. The staff members met with had strong knowledge of standard and transmission precautions along with the the procedures outlined in local guidance documents.

The staff team were found to have completed a significant volume of training in the area of infection prevention and control and antimicrobial stewardship. All members of the team had completed first aid response training, food safety and hygiene, training on the national standards for infection prevention and control in community services, basics of infection control, standard and transmission based precautions, hand hygiene, use of PPE, respiratory and cough etiquette, return to work safely protocols, and breaking the chain of infection. In addition, the registered provider was found to have provided specific training to external cleaning contract staff on infection prevention and control. Staff members met with told the inspector that the training they had completed had informed their practice and contributed to a greater understanding of infection prevention and control. The inspector found that specialist supports were available to the staff and management teams from the HSE should it be required and contact information relating to these supports were documented in the centre's plans which had been developed.

Quality and safety

The inspector found that the services provided in this centre were person-centred in nature and respite users were well informed, involved and supported in the prevention and control of health-care associated infections during their breaks. It was clear that respite users had been supported to understand why infection prevention and control precautions were taken and had been facilitated with opportunities to ask questions about this matter. There was information available in the centre about infection prevention and control and COVID-19 in easy-to-read formats and the inspector found that posters promoting hand washing and sanitisation had been adapted locally to meet the needs of respite users. There were regular meetings for respite users where the agenda included planning for the respite break and these forums also included infection prevention and control items such as reminders and updates on the COVID-19 pandemic.

A walk through of the centre was completed by the inspectors in the company of the person in charge. The centre was very clean throughout and maintained to a high standard. There was a comprehensive cleaning schedule in place which had been designed by the registered provider and there was evidence that this had been completed as required in the centre. This schedule included enhanced cleaning as outlined in the centre's risk assessment control measures for risks associated with infection prevention and control. There were good arrangements in place for the laundry of respite users' clothing and centre linen. There was landfill, recycling and compostable waste collection arrangements in place in the centre and there was no clinical waste in use. Waste was stored in an appropriate area and was collected on a regular basis by a waste management service provider. There were effective arrangements in place for the management of maintenance issues and a review of the maintenance log found that there were no outstanding items at the time of the inspection. Staff members reported that maintenance issues were promptly resolved in the centre. There was evidence of the completion of regular environment and equipment audits.

There were outbreak management and contingency plans in place which had been adapted to the services provided in the centre. These contained specific information about the roles and responsibilities of the various roles within the organisation and centre and also included an escalation procedure and protocols to guide staff in the event of an outbreak in the centre. Guidance contained in these documents also included information on the testing of respite users and staff members, isolating procedures, enhanced environmental cleaning and hygiene measures, and communication strategies with respite users and their families. There had been no outbreak of COVID-19 in the centre during the period of the public health pandemic and the provider had arrangements in place to ensure a comprehensive investigation would be completed and the findings recorded along with learning to be shared with all relevant stakeholders should an outbreak ever occur.

The inspector found that there was sufficient information in and around the centre to encourage and support good hand hygiene. Staff were observed to be regularly cleaning their hands, and they were wearing masks in accordance with current public health guidance. There was signage at the front door to remind visitors of the

requirements to ensure that they wore masks and would be required to give their temperature and adhere to hand washing and sanitising arrangements. Staff members and visitors were required to sign in and complete checks and provide information to facilitate contact tracing.

There were good arrangements in place for accessing healthcare services in the event that treatment or support was required by respite users during their stay in the centre. The staff team had access to information about each respite user which included the details of their general practitioners and out-of-hours medical supports. In addition, the person in charge had developed an emergency contact sheet for the centre which included the details of on-call senior managers, emergency services, out-of-hours general practitioners, local emergency department, and public health team.

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. 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 - 2015 as amended and the regulations considered on this inspection were:

Regulation Title	Judgment
Capacity and capability	
Quality and safety	
Regulation 27: Protection against infection	Compliant