



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

## Issued by the Chief Inspector

Name of designated centre:	Tin Tean
Name of provider:	St John of God Community Services Company Limited By Guarantee
Address of centre:	Louth
Type of inspection:	Short Notice Announced
Date of inspection:	20 April 2021
Centre ID:	OSV-0002993
Fieldwork ID:	MON-0031742

## About the designated centre

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

This is an residential service providing full-time care and support for up to eight adults (both male and female) with disabilities. The centre comprises of one large two storey house with three smaller one bedroom terraced bungalows in a courtyard setting to the rear. The main house comprises of a spacious entrance hall, a large very well decorated sitting room, a well equipped kitchen cum dining room and a laundry facility. Each resident has their own bedroom, which are decorated to their individual choice, style and preference. Communal bathroom facilities are provided on both floors of the house.

Each bungalow comprises of an entrance hall, a sitting room, a well equipped compact kitchen area, a double bedroom and large bathroom. The main house and bungalows share a common courtyard, with raised flowerbeds where residents can grow flowers and there is ample on street and private parking available.

The staffing arrangements for the centre consists of a person in charge, who is an experienced and qualified Clinical Nurse Specialist III. There is also a house manager, who is an experienced and qualified social care professional and a team of qualified and experienced social care workers. There are systems in place to ensure that the residents are consulted with about the running of the centre and residents are empowered (with support where required) to make their own choices and decisions about the care and support that they receive. There are also systems in place to ensure the residents healthcare needs are comprehensively provided for and as require access to a GP and other allied healthcare professionals form part of the service provided to residents. Residents are also supported to have meaningful and important roles in their community and have a range of work options and day service placements available to them. This service aims to promote a culture of person centredness and consultation with the residents.

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

Number of residents on the date of inspection:

7

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
Tuesday 20 April 2021	10:00hrs to 16:00hrs	Raymond Lynch	Lead

## What residents told us and what inspectors observed

This service comprised of a semi-detached two story house and three one bedroom apartments to the rear, in a courtyard setting. The inspector did not visit the apartments on this inspection however, did get to speak with the residents that lived in them.

The inspector met and spoke with seven residents and spoke with one family representative over the phone, so as to get their feedback on the service provided. Written feedback on the quality of care from some family representatives was also reviewed as part of this inspection. The residents met with said they loved their home, and staff were observed to be person centred and caring in responding to their needs.

The seven residents met with, appeared happy and content in their home and warmly welcomed the inspector on arrival to the house. The inspector observed that they were relaxed and comfortable in the presence of staff and, staff were at all times, observed to be professional, kind and caring in their interactions with the residents. Prior to COVID-19, residents were attending day services, going to work, visiting family members and visiting community-based amenities, such as shops, restaurants, hotels, barbers and hairdressers.

To minimise the impact on not being able to access external activities over the last 12 months, the staff team ensured that a number of recreational and learning activities were available to the residents in their home. For example, some residents were attending online classes such as dance sessions and arts and crafts. Other in-house activities included baking, on-line shopping and gardening, which the residents seemed to enjoy very much. Residents regularly went for walks in the nearby town and transport was also available for those that liked scenic drives and/or walks further afield on the beach or in the countryside.

One resident spoken with, informed the inspector that they loved their house and got on well with the staff team. They said that prior to COVID-19, they had gone to New York for their 50th birthday and very much enjoyed this trip. They had also been to Belfast and said they were looking forward to the restrictions being lifted so as they could go back to work and plan more holidays. For example, they were hoping to go to Donegal this summer and said they would like to visit Belfast again.

The resident also said they felt safe in their home and, if they had any concerns, they would speak with a staff member at any time. They made their own choices with regard to how to spend their day and what social activities to participate in, and staff were observed to be supportive of the residents' individual choices and rights.

Another resident informed the inspector that while they were bored with COVID-19 and the current lock down, they had lots to do and the staff team were great. They

had recently redecorated their bedroom and said that they were delighted with it. The resident also said that they were looking forward to going on holidays and availing of short hotel breaks again, once it was safe to do so.

Later on in the inspection process, one resident invited the inspector to see the house and courtyard area. This resident told the inspector they were very happy in their home and loved their room. The house was observed to be maintained to a high standard, decorated to take into account the personal style and individual preferences of each resident and, communal facilities included a kitchen cum dining room, a spacious sitting room, a laundry facility and a number of shared bathrooms. The apartments each contained a small porch, a sitting cum dining room, a kitchenette, a bathroom and a double bedroom. In between the apartments and the house there was a courtyard/garden area where some residents were growing their own flowers, fruit and vegetables.

One resident had been living in one of the apartments for seven years and told the inspector that they loved it and were very happy there. They also said that staff were great and they had no complaints whatsoever. All three residents in the apartments had decorated their front patios to their individual liking with garden ornaments, benches, hanging baskets, flowers and plants and were delighted to show the inspector around the courtyard while social distancing.

The other two residents met with, were equally as positive in their feedback about their home. They said they were very happy living there, liked the staff team and had no issues. One liked to shop online and staff, where required, provided support to the resident when doing this activity. They had recently bought a new chair of which they were delighted with and showed to the inspector.

The family member spoken with was exceptionally positive about the quality and safety care provided to their relative. They said the care was brilliant, staff were kind, caring and supportive, their relative was very happy living there and, they had no issues or complaints about the service. Written feedback from other relatives viewed by the inspector, also informed they were very happy with the service and more importantly, their loved ones were settled and happy living there.

Overall, residents informed the inspector that they loved their home and staff were observed to be person centred, caring and attentive to their assessed needs. Feedback from family members on the quality and safety of care was complimentary and positive.

The following two sections of this report will outline how the providers capacity and capability to operate a good service impacts positively on the quality and safety of the lives of residents living in the centre.

## Capacity and capability

Residents informed the inspector that they loved their home and the provider ensured that supports and resources were in place to meet their assessed needs.

The centre had a clearly defined management structure in place which consisted of an experienced person in charge who worked on a full-time basis with the organisation. They were supported in their role by a house manager who worked in the house on a regular basis. The person in charge and house manager were experienced, qualified professionals and provided leadership and support to their team. They ensured that resources were managed and channelled appropriately, which meant that the individual and assessed needs of the residents were being provided for.

They also ensured staff were appropriately qualified, trained and supervised so that they had the required skills to meet the assessed needs of the residents. For example, staff had undertaken a comprehensive suite of in-service training to include safeguarding of vulnerable adults, fire safety training, Children's First, medication management, basic life skills, positive behavioural support, manual handling and infection control.

It was observed that the service had to delay some refresher face to face practical training due to the current COVID-19 pandemic. However, there were plans in place to address this issue and of the staff spoken with as part of this inspection process, the inspector was assured that they had the experience and knowledge to meet the assessed needs of the residents.

The person in charge was found to be responsive to the inspection process and aware of their legal remit to S.I. No. 367/2013 - Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 (the Regulations). For example, they were aware that they had to notify the Chief Inspector of any adverse incidents occurring in the centre, as required by the regulations. They were also aware that the statement of purpose had to be reviewed annually (or sooner), if required.

The inspector reviewed the statement of purpose and was satisfied that it met the requirements of the Regulations. It consisted of a statement of aims and objectives of the centre and a statement as to the facilities and services which were to be provided to residents.

The person in charge and house manager also ensured the centre was monitored and audited as required by the regulations. There was an annual review of the quality and safety of care available in the centre, along with six-monthly auditing reports. These audits were ensuring the service remained responsive to the regulations and responsive in meeting the needs of the residents.

For example, the last six-monthly unannounced visit to the centre in March 2021, raised a query with regard to the suitability of the staffing arrangements at night time in the centre. There was only a sleepover staff member available at night time in the house, and the auditor had a concern that this arrangement may not be adequate in the event of a fire. The needs of the residents were also changing and because of this, the person in charge and house manager had also reviewed the

staffing arrangements so as to ensure they were adequate. In response to this review and audit, arrangements had been made to provide a waking night staff member, so as to better meet the assessed needs of the residents.

#### Regulation 14: Persons in charge

The inspector found that there was a person in charge in the centre, who was a qualified nurse with experience of working in and managing services for people with disabilities. They were also aware of their remit to the Regulations and responsive to the inspection process.

Judgment: Compliant

#### Regulation 15: Staffing

The inspector was satisfied that there were adequate staffing arrangements in place to meet the needs of residents. Of a small sample of files viewed, staff had training in safeguarding of vulnerable adults, fire training, manual handling and infection control. Some refresher face to face practical training was overdue to the current COVID-19 pandemic. However, there were plans in place to address this issue and of the staff spoken with as part of this inspection process, the inspector was assured that they had the experience and knowledge to meet the assessed needs of the residents

Judgment: Compliant

#### Regulation 23: Governance and management

The centre had a clearly defined management structure in place which consisted of an experienced person in charge who worked on a full-time basis with the organisation. They were supported in their role by a house manager who worked in the house on a regular basis. The person in charge and house manager were experienced, qualified professionals and provided leadership and support to their team. They ensured that resources were managed and channelled appropriately, which meant that the individual and assessed needs of the residents were being provided for.

Judgment: Compliant



### Regulation 3: Statement of purpose

The inspector reviewed the statement of purpose and was satisfied that it met the requirements of the Regulations. It consisted of a statement of aims and objectives of the centre and a statement as to the facilities and services which were to be provided to residents.

Judgment: Compliant

### Quality and safety

Residents were supported to have meaningful and active lives within their home and community and systems were in place to meet their assessed health, emotional and social care needs.

The individual social care needs of residents were being supported and encouraged. From viewing a small sample of files, the inspector saw that the residents were being supported to use their community and maintain links with their families. While a number of community-based activities and day services were on hold due to COVID-19, residents were being supported to engage in social, recreational and learning activities in their own home. Transport was also available to the residents so that they could go for scenic drives and walks on the beach.

The inspector spoke with all of the residents over the course of this inspection. Residents informed the inspector that prior to the COVID-19 pandemic, they had gone on holidays to New York, Belfast, Donegal, Carlow and Monaghan, of which they very much enjoyed. They also enjoyed meals out, short hotel breaks and shopping and were well known in, and connected to, their local community. For example, they were involved in local charity events and fundraisers and were also participating in the tidy towns project. Others had jobs in their local community and informed the inspector they were looking forward to getting back to work when the lock down was over.

On the day of this inspection, some residents were attending online dance classes and others were involved in arts and crafts initiatives. Some of the residents showed the inspector their artwork which was on display in the house. Some residents also took on DIY projects with support from staff. For example, some redecorated their bedrooms whilst others, involved themselves in revamping the garden/courtyard area. They had painted their boundary walls, bought hanging baskets and garden ornaments and some had raised flower beds and were growing their own fruit and vegetables. Residents informed the inspector that they were hoping to go to Donegal and on other holidays later in the year, once it was safe to do so.

Residents were supported with their healthcare needs and, as required, access to a

range of allied healthcare professionals, to include GP services formed part of the service provided. Residents also had access to a speech and language therapy, physiotherapy, occupational therapy, optician and dental services. Hospital appointments were facilitated as required and care plans were in place to ensure continuity of care. Access to mental health services and behavioural support were provided for, and where required, residents had a behavioural support plan in place. A sample of files viewed by the inspector, also informed that staff had training in positive behavioural support.

Systems were in place to safeguarding the residents and where required, safeguarding plans were in place. Residents informed the inspector that if they had any issues in their home, they would speak with a staff member or the house manager. A family representative spoken with, also informed the inspector that they were happy with the quality and safety of care provided in the service. From speaking with one staff member over the course of this inspection, the inspector was assured that they had the skills, confidence and knowledge to report any concern to management if they had one. Staff also had training in safeguarding of vulnerable persons and Children's First and information on how to contact the safeguarding officer and an independent advocate was available in the centre.

There were systems in place to manage and mitigate risk and keep residents safe in the centre. There was a policy on risk management available and each resident had a number of individual risk assessments on file so as to support their overall safety and wellbeing.

There were also systems in place to mitigate against the risk of an outbreak of COVID-19. For example, from a small sample of files viewed, staff had training in infection prevention control, donning and doffing of personal protective equipment (PPE) and hand hygiene. The person in charge also reported that there were adequate supplies of PPE available in the centre, it was being used in line with national guidelines, there were adequate hand-washing facilities available and there were hand sanitising gels in place around the house. The inspector also observed staff and residents wearing PPE throughout the course of this inspection

Systems were in place to support the rights of the residents and their individual choices were promoted and respected (with support where required). Residents held weekly meetings where they agreed on social outings and meal plans for the week. Residents were directly involved in the running of their home and staff were supportive of their individual autonomy and rights.

## Regulation 26: Risk management procedures

There were systems in place to manage and mitigate risk in the centre. There was a policy on risk management available and each resident had a number of individual risk assessments on file so as to support their overall safety and wellbeing.

Judgment: Compliant

### Regulation 27: Protection against infection

The person in charge and house manager had ensured that control measures were in place to protect against and minimise the risk of infection of COVID-19 to residents and staff working in the centre.

Judgment: Compliant

### Regulation 5: Individual assessment and personal plan

The individual social care needs of residents were being supported and encouraged. From viewing a small sample of files, the inspector saw that the residents were being supported to use their community and maintain links with their families.

Judgment: Compliant

### Regulation 6: Health care

Residents were supported with their healthcare needs and, as required, access to a range of allied healthcare professionals, to include GP and mental health services formed part of the service provided.

Judgment: Compliant

### Regulation 8: Protection

Systems were in place to safeguard the residents in the house. Staff had training in safeguarding of vulnerable adults and information was available on how to access to an independent advocate and safeguarding officer, if required.

Judgment: Compliant

### Regulation 9: Residents' rights

Systems were in place to support the rights of the residents and their individual choices were promoted and respected (with support where required). Residents were directly involved in the running of their home and staff were seen to be supportive of their individual autonomy.

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
<b>Capacity and capability</b>	
Regulation 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 23: Governance and management	Compliant
Regulation 3: Statement of purpose	Compliant
<b>Quality and safety</b>	
Regulation 26: Risk management procedures	Compliant
Regulation 27: Protection against infection	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant