

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

Issued by the Chief Inspector

Name of designated centre:	Ballin Services
Name of provider:	Brothers of Charity Services Ireland CLG
Address of centre:	Galway
Type of inspection:	Unannounced
Date of inspection:	11 May 2023
Centre ID:	OSV-0004853
Fieldwork ID:	MON-0040133

About the designated centre

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

Ballin Services provides residential support for up to 12 individuals of mixed gender who are over 18 years of age and who have an intellectual disability. Support can be provided to individuals with complex needs such as physical, medical, mental health, mobility and / or sensory needs and who may require assistance with communication. The centre comprises of two houses located on the outskirts of a large a rural town. All dwellings have good access to the facilities of the town. Residents at Ballin Services are supported by a staff team, which includes; nurses, social care leaders, social care workers and support workers. Staff are based in the centre when residents are present and there is a combination of sleep-in and waking staff in the centre at night to support residents.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	12
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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
Thursday 11 May 2023	08:15hrs to 14:15hrs	Aonghus Hourihane	Lead

What residents told us and what inspectors observed

The inspection was completed over one day to assess this provider's compliance with Regulation 27 (Protection against infection), and the National Standards for Infection Prevention and Control in Community Services (HIQA, 2018).

This centre comprises of two houses located on the outskirts of a town in the west of Ireland. The inspector visited both houses and spent time in each location. The inspector met with six residents, primarily in one house as most of the residents in the second house were either at day services or otherwise engaged for the day.

The inspection was facilitated by the person in charge and also the respective team leaders for each house. The inspector also got to speak with a number of staff throughout the day.

Overall this was a very positive inspection, the residents reported and were observed to be happy in their home. The staff team were knowledgeable, observed to be professional and caring towards the residents that they supported. There was a positive, calm and respectful atmosphere in the centre. The staff team were observed to engage in open conversations with residents and there was regular banter witnessed between the residents and staff.

The inspector spent the majority of the morning in one house observing and interacting with residents. The residents were welcoming, engaging and most were able to fully express their views. One resident spoke about how they really loved this house and how it was much better than the previous one. They were able to discuss their daily activities and told the inspector about their life growing up in the west of Ireland. Two other residents were in a sitting room, they were relaxing watching morning TV and doing activities on their electronic devices as this was their day off. They also expressed their satisfaction with home life, they were complimentary about the staff team and again they spoke about their families with one resident saying that they had daily video calls with their mother and that they both completed a crossword from the newspaper. They joked that sometimes their Mum got the right answers but more often than not they did. The resident spoke about family visiting and also being able to receive visitors and how this was a much nicer house than the previous one to have people call over.

Another resident told the inspector about how much they were looking forward to getting their study renovated. They proudly showed the inspector their room which had the study attached. The room was beautifully decorated, homely and the resident was beaming with pride when the inspector complimented the job they had done to have such a nice space. The resident told the inspector that they spent a lot of time in this space doing arts and crafts and really wanted to make it even nicer. The resident spoke about visiting their siblings and discussed each relative with the inspector. The resident expressed satisfaction that the staff team were no longer required to wear masks as they could now see 'all their beautiful faces'. They spoke

about how the staff team had discussed with them the importance of keeping their hands clean and this was something they were reminded about on a regular basis. They had been offered and received all their vaccinations such as the flu vaccine and they also informed the inspector that they got to see their doctor or other health professionals as they needed.

One house also had a self contained apartment and the inspector met and conversed with the resident living there. The space was decorated to a very high standard and was comfortable. The resident also had hens in the garden and these provided fresh eggs for the house.

The residents all spoke about the activities that they were involved in. Some residents were involved in swimming, most had access to day services if they so desired to attend, they went to bingo, shopping, holidays and one resident was previously involved in a social farming project. A staff member in one house spoke about one resident that had breathing difficulties attending 'salt caves'. One resident had attended a football match in England and another liked to go to GAA matches. Another resident that used a wheelchair had benefited from a boat trip on Lough Rea last summer and it was reported that they really enjoyed this.

From observations and discussions with the residents it was clear that their rights were respected and promoted and that they were well capable of raising any issues and concerns. The management and staff spoken with as part of this inspection were open to feedback from residents and spoke about the importance of getting feedback from the residents and there was a sense that this was very much their home.

There were many areas of good practice and good oversight in relation to infection prevention and control. These included the high standards of cleaning, confidence and knowledge of the staff team as well as good training and protocols for staff. There were areas that the provider needed to review to improve quality but this did not distract from the good levels of compliance as observed during the inspection.

The next two sections of the report outline 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 residents lives.

Capacity and capability

The provider met the requirements of Regulation 27 and procedures that were consistent with the National Standards for Infection Prevention and Control in Community Services (2018). There were areas for improvement in order to further enhance infection control in the centre but these did not distract from the overall compliance levels.

The person in charge was the lead person for all aspects of infection prevention and

control in the centre. They were person in charge for another centre but had the time and support to manage both centres. The day to day operations were the responsibility of the team leader in each house.

The person in charge spoke about the challenges of recruitment but from a review of the rosters it appeared that there was a stable staff team with many staff members having worked in the centre for a prolonged period. It was also noted that there was 78.5 nursing support hours based over two weeks as part of the model of care. The staff team had all received training in different aspects of IPC including the use of personal protective equipment and hand hygiene. The training matrix for one house that made up part of the designated centre showed that all staff had IPC training completed in 2022.

The inspector spoke with a staff member about the IPC procedures adopted in the centre on a day to day basis. They spoke with confidence about the procedures they followed and were able to describe the providers policies and procedures, they were also able to reference where they could get further or enhanced information pertaining to specialist cleaning of equipment should this be required.

The provider had a comprehensive IPC document that was available to all staff. This document clearly outlined to all staff the procedures for cleaning and disinfecting all aspects of the centre and all equipment in the centre. It also clearly outlined for staff the difference between cleaning and disinfection as well as the processes, equipment and quantities of product needed for each process to be effective.

The person in charge outlined to the inspector how their policies and procedures were moving away from being Covid-19 centric to more generic to encapsulate all potential infection threats within the centre. The person in charge and staff spoke confidently about infection prevention being about much more than Covid-19.

There were a number of audit procedures taking place pertaining to IPC and again these were under review to ensure that they were relevant and proportionate to the risks associated with IPC. The PIC completed a monthly audit of IPC procedures within the centre.

The inspector reviewed both the 'contingency plan' and 'outbreak management plan' for the centre. These documents had been recently updated and the person in charge spoke confidently about how these plans had been tweaked and enhanced since the start of the pandemic.

The annual review for 2022 was completed with input from both residents and their representatives. The six monthly unannounced provider visit took place in November 2022 and the report delved into a number of areas pertaining to IPC with an associated quality improvement plan for the service. The six monthly visit was the first since the introduction of the providers new IPC policy and it reported that this had a positive impact on operations in the centre.

There was evidence of staff meetings taking place on a regular basis and IPC was a consistent feature on the agenda. There was evidence of regular engagement with residents and evidence that issues such as practical demonstrations for hand

hygiene formed part of the house meetings.

Quality and safety

The care and support provided to the residents in this centre was found to be of a good standard. It was clear that the residents reported and were observed to enjoy a good quality of life and their rights and choices were respected and promoted by staff members. Staff were observed to actively respect the rights and choices of residents for example in relation activities that resident wished to engage in.

The centre generally presented as clean, well maintained and the residents in one house spoke about how proud they were of the house. There was upgrade works to be completed in one house with a new kitchen planned. It was noted that funding was in place and the person in charge reported that this project was progressing well.

The responsibility for ensuring that the centre was clean and that IPC standards were adhered to rested with all staff members. Staff had clear guidance and there were check lists in operation to be completed after each task. On the day of the inspection the check lists were fully completed and upon review the staff team were generally following the providers instructions. There were issues in one part of the centre with staff using different cleaning methods to those prescribed by the provider but it did not have a material impact on the quality of the cleanliness of the centre on the day of the inspection.

The healthcare needs of residents varied between the two houses that made up the designated centre. The inspector reviewed a sample of three residents' files. It was clear that the residents had access to a wide variety of allied health professionals. The residents all had their annual medicals completed, they had access to physiotherapy and speech and language therapists as required. Two residents had chronic disease management plans in place with input from specialist nursing and these plans were reviewed and updated on a regular basis.

The residents that met the inspector confirmed that they had been offered both the Covid-19 and flu vaccination. There was also evidence on file that residents were offered screening as part of national screening programmes such as bowel screening.

There was a significant amount of medical and assistive equipment in use in the centre. In general there was very little sharing of equipment but the provider did have protocols in place for cleaning and disinfecting after each use. Staff were able to describe the process for cleaning a nebuliser that was in use in one house but they were not recording the frequency of this.

The inspector found that the appropriate arrangements were in place in relation to laundry management and the disposal of waste. The inspector observed that there

was a clear system in place to ensure that soiled or dirty laundry was kept separate from clean laundry. There was a supply of alienate bags available. The procedures in place provided clear guidance to staff and staff spoken with were confident about the processes to be followed.

Regulation 27: Protection against infection

Overall, the provider had generally adopted and implemented procedures in accordance with the National Standards for infection prevention and control in community settings (2018). These procedures were seen to form part of the daily operation and oversight of the service. There were clear management arrangements in operation to ensure the effective delivery of infection prevention and control in the designated centre. The centre was visually clean and the provider had systems to protect and promote the health and welfare of the residents.

There were areas for improvement such as ensuring that the staff team followed the providers protocols in relation to the use of colour coded cloths in one part of the centre, that a curtain used in a high risk area (en-suite facility) was on a cleaning schedule and that mops used in one part of the centre were stored safely and correctly to prevent cross contamination. However on the day of the inspection these areas were either addressed immediately or there was minimal impact on the lived experience of the residents.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

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