



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

Issued by the Chief Inspector

Name of designated centre:	Blackcastle
Name of provider:	Praxis Care
Address of centre:	Meath
Type of inspection:	Unannounced
Date of inspection:	05 May 2023
Centre ID:	OSV-0005864
Fieldwork ID:	MON-0039355

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 a short walking distance from a large town in County Meath and provides 24 hour support to three female adults. The centre comprises of a three storey building, the ground floor consists of an entrance hallway with a stairs which leads to the first floor. The first floor comprises of a large sitting room, a toilet, a kitchen/dining area, a small staff office and two balconies. The second floor contains three bedrooms, a bathroom and a medication room. The centre is staffed by a full time person in charge and support workers. There is one staff on duty during the day and one staff on waking night duty. All of the residents here attend a day service Monday to Friday and lead very active lives in their community.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	3
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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
Friday 5 May 2023	09:45hrs to 13:45hrs	Anna Doyle	Lead

What residents told us and what inspectors observed

This was an unannounced inspection to monitor and inspect the arrangements the provider had in place for the management of infection prevention and control (IPC) in the centre. The inspection was completed over one day and took place in a manner so as to comply with current public health guidelines and minimise potential risk to the residents and staff.

On arrival to the centre, the inspector was met by a member of staff who asked the inspector to sign the visitors book. Hand sanitizers were available at the entrance of the building; and face masks were also available should staff or residents want to wear one. The staff member was aware that the requirement to routinely wear face masks was no longer required in the centre. This had also been risk assessed by the provider.

The inspector reviewed some of the records stored in residents' personal plans, spoke to a staff member who was also a team leader and the person in charge.

All of the residents were at their day placement which they attended Monday to Friday and so the inspector did not get the opportunity to meet with them in person. However, one resident spoke to the inspector over the phone about what it was like living in this centre. The resident said that they were very happy, liked the staff working there and were very happy living with the people they shared their home with. They spoke about some of the things they liked to do in the centre. For example; they were thinking about where they would like to go on holidays this year and said they were looking forward to a relaxing weekend after the long week in day services.

The centre was clean and homely. Residents had their own bedrooms and to ensure their privacy and dignity each resident had their own key. This meant that on the day of the inspection the inspector did not get to see all of the bedrooms as two residents locked their bedrooms when they went to day services. However, one bedroom was observed to be homely decorated in line with the residents' preferences, and the staff informed the inspector that this resident was currently purchasing new bedroom furniture.

The kitchen was clean and all staff had completed training in food hygiene. Colour coded chopping boards were in place however, the person in charge intended to purchase new ones as they were a little worn at the time of the inspection.

There was numerous hand sanitisation points throughout the building and all sinks had a supply of soap and disposable towels. A clean dry storage area was available in the centre to store personal protective equipment (PPE).

The provider had enhanced the cleaning schedules in place in the centre since the COVID-19 pandemic had begun. Records were maintained to verify this and

residents were also included in cleaning some areas of the centre. The team leader oversaw that these cleaning schedules were adhered to.

A review of residents' personal plans showed that residents led active lives. For example: some were learning to play a musical instrument and all of the residents were on a healthy living drive, which meant they were going out for more walks and attended a community group regarding healthy eating. The inspector noted that the residents had consented to this themselves after an information sharing piece conducted by staff to inform and educate residents around the benefits of healthy eating had taken place. The resident who spoke to the inspector told them they were happy doing this at the moment and were seeing positive results for themselves.

Each resident had done out a wish list for 2023 about some of the things they wanted to do. For example; one resident wanted to go on an overnight stay to a hotel with the people they shared their home with. Another resident wanted to keep in regular contact with some of their family and had an application on their mobile to do this. The inspector also noted that last year one resident had a wish list for 2022 and all of the things they wanted to do had been achieved. For example; the resident wanted to have their bedroom painted and this was done.

Residents were fully informed about the arrangements in place around COVID-19 and were kept up to date through residents meetings about changes to, restrictions, vaccinations and new procedures. For example; all residents had been informed about the side effects of the vaccinations, why they were important and how the injections would be administered. Residents were then able to make a decision for themselves about whether they wanted to get the vaccinations or booster doses or not.

Residents were also provided with information about their rights, feeling safe, fire safety and making a complaint. The registered provider had conducted a survey with residents about what it was like to live in the centre. Overall the residents reported that they were very happy living in the centre, felt safe, liked the staff and felt that if they had a complaint they would talk to staff. One resident said that they 'felt listened to by staff' and also said that since moving to this centre, their life had improved.

Overall, the inspector observed that the staff team maintained good standards of infection prevention and control measures. The following sections of the report will present the findings of the inspection with regard to the capacity and capability of the provider and the quality and safety of the service.

Capacity and capability

Overall, the inspector found that the centre was managed well by the staff team, the person in charge and the team leader to ensure that effective IPC practices were

maintained in the centre. There were some minor improvements required, however the person in charge had addressed these by the end of the inspection.

The provider had a policy in place to guide practice on infection and prevention control measures in the centre. This policy had been updated in March 2023 and provided links to specific policies that were important to guide staff practice. For example; there were links to policies on cleaning procedures which included cleaning specific areas in the centre.

The provider had a number of audits in place to review IPC issues in the centre, this included environmental audits (these were not available on the day of the inspection due to the fact that they were on a computer). However, the person in charge explained that they were conducted to ensure that the centre was clean and well maintained.

The person in charge also had the 'Self-Assessment Tool Preparedness planning and infection prevention and control assurance framework for registered providers' completed and updated every 12 weeks. There were no areas for improvement in this document at the time of this inspection. The person in charge completed this every 12 weeks in order to ensure ongoing compliance in IPC.

In addition to this, during the unannounced quality and safety reviews conducted in December 2022, IPC practices had been audited and there were no areas of improvement identified at that time.

There was sufficient staff on duty to support the resident's needs in the centre. The staff spoken with were very knowledgeable around the residents needs and also about the arrangements in place to manage health care associated infections. Staff received regular supervision and monthly staff meetings were held also. This meant that staff were able to raise concerns about the quality and safety of care being provided.

Staff had been provided with training in a suite of infection control training including hand hygiene, donning and doffing of personal protective equipment and infection prevention and control, food safety and the management of cleaning agents.

Quality and safety

Overall, the inspector found that residents were informed about issues pertaining to COVID-19.

As stated the centre was clean, well maintained and homely. Where issues arose that needed to be addressed they were reported. For example; the person in charge had highlighted that some of the rooms needed to be painted and this was being addressed at the time of the inspection.

There was adequate supplies of personal protective equipment stored in the centre for routine daily use and emergency supplies were also available should there be an outbreak of COVID-19 in the centre.

Residents had personal plans in place which included an assessment of need. There were support plans in place to guide practice. One resident had been provided with education and support around one medical device and the administration of medication. However, the resident had not been provided with education around the cleaning or maintenance of this equipment. The person in charge intended to commence this education piece with the resident.

Staff had been provided with hand hygiene training. Weekly audits were conducted by the team leader to assure compliance in this area. The team leader was aware of the procedures to follow to manage spills in the centre. A spills kit was also available in the centre should this occur.

The provider had systems in place for the management of waste. Pedal bins were provided in all rooms. There was a system to manage general waste and a procedure in place for the management of clinical waste should this be required.

The inspector reviewed a number of IPC related checklists and audits which informed that cleaning activities were being undertaken on a regular basis by staff working in the centre. These covered routine cleaning tasks such as regular cleaning of the floors and resident's bedrooms.

In addition, while the provider had systems in place to clean areas in the centre such as colour coded mops and buckets. On the day of the inspection there were no codes displayed in the storage unit for mop heads to guide practice. However, this was completed by the end of the inspection.

Regulation 27: Protection against infection

The centre was managed well by the staff team, the person in charge and the team leader to ensure that effective IPC practices were maintained in the centre. There were some minor improvements required, however the person in charge had addressed these by the end of the inspection.

The provider had a policy in place to guide practice on infection and prevention control measures in the centre. This policy had been updated in March 2023 and provided links to specific policies that were important to guide staff practice. Audits were conducted on IPC to ensure ongoing compliance with IPC precautions.

Residents had been kept informed about changes to IPC practices in the centre. They had been provided with information in relation to vaccinations.

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	
Quality and safety	
Regulation 27: Protection against infection	Compliant