



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

## Issued by the Chief Inspector

Name of designated centre:	Community Living Area A5
Name of provider:	Muiríosa Foundation
Address of centre:	Offaly
Type of inspection:	Unannounced
Date of inspection:	04 April 2023
Centre ID:	OSV-0008466
Fieldwork ID:	MON-0039156

## About the designated centre

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

Community Living Area A5 is a four bed bungalow just outside a rural town which can accommodate four adults, male or female, over the age of 18 years. Individuals with a diagnosis of moderate to severe or profound intellectual disabilities, physical disabilities and or autism may be supported in this centre. The staff team expertise includes experienced and skilled staff ranging from Support Worker, Social Care Worker & a Person In Charge. The aim of the designated centre is to achieve and sustain a high-quality care environment that cares for, supports and values each individual.

**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
Tuesday 4 April 2023	09:45hrs to 16:40hrs	Cora McCarthy	Lead

## What residents told us and what inspectors observed

An unannounced thematic inspection was carried out to review the providers compliance with Regulation 27: Protection against infection. On the day of inspection the inspector met two staff members, the team leader and the person in charge and interacted with the three residents who resided in the centre.

On arrival at the centre a staff member carried out the necessary checks in terms of identification, sign in, the staff member was noted to practice hand hygiene and wear a face covering and the inspector wore a face mask and completed hand hygiene on entering the centre.

The residents were relaxing at the time the inspector arrived and the inspector was introduced to them and chatted about their morning. The residents were all dressed and having breakfast, some residents had a specialised diet and staff were observed to be supporting them in a very respectful and kind manner. One of the three residents had the ability to interact verbally and was positive about their home and the care they received. The resident indicated their satisfaction with the centre and staff through some words, facial expressions and gestures.

The inspector did a walk around with the team leader and found the centre to be new, bright and modern. Overall the house was very clean, the bathrooms and bedrooms had been cleaned that morning. The residents bedrooms were beautifully decorated with wall paper, cushions and bed linen chosen by residents themselves. One resident had a jukebox in their room which they enjoyed and other residents had a television and radio in their rooms. The bedroom, surfaces, window ledges, floors and en suite bathrooms had all been cleaned and sanitised. The bathroom sanitary ware and showers cubicles were clean also. The flooring, kitchen and furniture throughout the house was new and therefore there were no defective surfaces. The laundry room was clean and organised and there was signage indicating what mop and cloth colours to use and there was a system in place for laundry management. The hand sanitizer units throughout the house were clean and full and there was adequate personal protective equipment available for staff use.

The residents were out and about during the day and in the afternoon the inspector had another opportunity to meet and interact with them. The residents were very pleasant and acknowledged the inspector through eye contact, gestures and smiles. The residents appeared very content in their home and in the company of staff and staff were observed to support them in a kind and caring manner, taking their time and not rushing the residents. It was very apparent that they knew the residents very well and were very responsive to their needs.

From discussions with staff, observations and review of documentation during the inspection, it was evident that the residents were supported to enjoy a good quality of life in the centre and the care provided was person centred and individualised. Daily records and activity planners indicated that the residents engaged in a variety

of activities in the community such as eating out, walks, classes and shopping. Some family members lived near and were regular visitors to the centre.

It was apparent that residents' rights were promoted in the centre as there were easy-to-read posters on display throughout the centre demonstrating good hand hygiene, cough etiquette and social distancing. There was also information regarding advocacy, contact details for the complaints officer and how to make a complaint. There was also a poster about the confidential recipient and the support they can offer, on the notice board. There was a weekly meeting where residents had the opportunity to choose activities and meals for the week ahead.

The centre had a vehicle for residents to attend activities and social outings. This was cleaned after each use as per the protocol reviewed and was noted to be clean on the day of 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 was in compliance with the requirements of Regulation 27 and procedures that were consistent with the National Standards for infection prevention and control in community services (HIQA, 2018).

The designated centre was resourced to ensure the effective delivery of care and support and there was a clearly defined management structure in the centre that identified the lines of authority and accountability. The person in charge had responsibility for infection prevention and control within the centre and was the lead person in terms of escalating any issues staff may bring to their attention. Management systems were in place in the centre to ensure that the service provided was safe, appropriate to residents' needs, consistent and effectively monitored. Staff members were fully aware of their responsibilities in relation to infection prevention and control and safeguarding residents from the risk of preventable infection. There was a infection prevention and control audit completed regularly in the centre as part of the six month unannounced visit. Staff were facilitated and encouraged to raise issues relating to infection prevention and control.

On the day of inspection there was adequate staff on duty and on review of past rotas the inspector found that the the provider had ensured that the number, qualifications and skill mix of staff was appropriate to the number and assessed needs of the residents, the statement of purpose and the size and layout of the designated centre. There was a regular staff team who provided continuity of care and support to the residents.

The inspector reviewed the staff training records and noted that the staff had access

to training in infection prevention and control including basics of IPC, hand hygiene and respiratory hygiene. Staff with whom the inspector spoke had a very good understanding of the systems and protocols in place in the centre regarding infection prevention and control such as laundry management and the requirements in the event of an infection outbreak.

There was a range of guidance documents in relation to infection prevention and control available to staff, including the providers own policy and the National Standards for infection prevention and control in community services (2018). There was a cleaning and disinfecting policy which gave clear guidance to staff on how to maintain good infection prevention and control. There was guidance for staff in relation to implementing enhanced cleaning of areas if an infection outbreak were to occur and also self isolation of residents. Guidance referenced the national guidance published by the Health Service Executive, the Health Protection and Surveillance Centre and, the Health Information and Quality Authority.

## Quality and safety

Overall, the inspector found that the service provided in this centre was to a good standard, was person-centred and the residents were safeguarded against the risk of transmissible infection. There was accessible information provided to the residents regarding infection prevention and control. The inspector observed that posters promoting hand washing, cough etiquette and social distancing were visible in the centre.

The inspector completed a walk through of the centre and found it to warm, clean and homely. The residents bedrooms and bathrooms were clean, the floors had been washed and sanitary ware had been sanitised. The surfaces throughout the house such as kitchen counter tops, tables, furniture and window ledges had been dusted and cleaned. The laundry room was organised and there was signage up regarding coloured mops and cloths and what temperature they were to be laundered at. The person in charge had put a cleaning schedule in place which outlined the areas to be cleaned, how often and the products to be used. There were paper towel dispensers in the bathroom and en suites and the hand sanitizer dispensers were full and clean. There was adequate supplies of PPE and staff were observed to wear a face mask and practice hand hygiene regularly. There was sufficient guidance to direct thorough cleaning and disinfection of the centre.

The inspector discussed laundry management practices with staff on duty and they outlined very good practice regarding the laundering of residents clothes and the use of water soluble bags as necessary. The staff stated that they washed residents clothes separately at a high temperature and dried them separately also. Each resident had two linen baskets, one for clean and one for soiled clothing. Recommended cleaning products were used for floors and surfaces and diluted as per instructions. The staff adhered to all guidance as outlined in the providers

infection prevention and control policy.

There were appropriate arrangements in place for waste disposal and the inspector viewed a protocol for the management of clinical waste. Waste was stored in an appropriate area and was collected fortnightly by a waste management company.

The inspector viewed the house vehicle which was clean and had a supply of face masks and hand sanitizer in place for staff.

Staff members with whom the inspector spoke were very conscientious in relation to maintaining good infection prevention and control and maintaining cleaning routines and ensuring good standards in their daily practice. Staff were observed to perform hand hygiene and wear face mask on the day of inspection and followed all guidance as outlined in their policy and public health guidance documents. Staff were fully aware of their responsibilities in terms of maintaining infection prevention and control and recognised the symptoms and how to respond to an outbreak of infection.

There was a risk management system in place and risk assessments had been completed for risks associated with infection and COVID-19, including risks of being unable to socially distance, wear a mask or isolate in their own bedroom.

Residents' health care needs were met and there were doctor visit records which indicated that they attend regular appointments with healthcare professionals such as their general practitioner (GP). The residents had been informed of COVID-19 vaccinations and infection prevention and control and were kept update with changes in public health guidance.

## Regulation 27: Protection against infection

The provider was in compliance with the requirements of Regulation 27 and the National Standards for infection prevention and control in community services (HIQA, 2018).

The centre was clean throughout and there was guidance available to staff outlining the process and systems in place for the purpose of maintaining good infection prevention and control. There was guidance in the areas of training for staff, cleaning and sanitising the centre and also how to recognise the signs and symptoms of infection and what steps to take to safeguard residents from the risk of preventable infection. The cleaning checklist in place included all areas and all equipment to be cleaned and or disinfected. There was a vehicle cleaning checklist in place. There was a terminal cleaning checklist in place in the event of an outbreak. The staff were aware of who the lead person was in terms of reporting or escalating issues of infection prevention and control as they arose.



There were adequate supplies of PPE and staff were observed to wear face masks and were also observed to regularly perform hand hygiene.

Residents were supported with hand washing and to understand the risk of and how to protect themselves against the risk of infection. There was accessible signage in the centre and infection prevention and control was discussed at team and resident meetings.

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
<b>Capacity and capability</b>	
<b>Quality and safety</b>	
Regulation 27: Protection against infection	Compliant