



# Report of a Restrictive Practice Thematic Inspection of a Designated Centre for People with Disabilities.

## Issued by the Chief Inspector

Name of designated centre:	Kilcarra
Name of provider:	Sunbeam House Services Company Limited by Guarantee
Address of centre:	Wicklow
Type of inspection:	Short Notice Announced
Date of inspection:	18 December 2019
Centre ID:	OSV-0001708
Fieldwork ID:	MON-0027506

## What is a thematic inspection?

The purpose of a thematic inspection is to drive quality improvement. Service providers are expected to use any learning from thematic inspection reports to drive continuous quality improvement which will ultimately be of benefit to the people living in designated centres.

Thematic inspections assess compliance against the National Standards for Residential Services for Children and Adults with Disabilities. See Appendix 1 for a list of the relevant standards for this thematic programme.

There may be occasions during the course of a thematic inspection where inspectors form the view that the service is not in compliance with the regulations pertaining to restrictive practices. In such circumstances, the thematic inspection against the National Standards will cease and the inspector will proceed to a risk-based inspection against the appropriate regulations.

## What is 'restrictive practice'?

Restrictive practices are defined in the *Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) with Disabilities) Regulations 2013* as **'the intentional restriction of a person's voluntary movement or behaviour'**.

Restrictive practices may be physical or environmental<sup>1</sup> in nature. They may also look to limit a person's choices or preferences (for example, access to cigarettes or certain foods), sometimes referred to as 'rights restraints'. A person can also experience restrictions through inaction. This means that the care and support a person requires to partake in normal daily activities are not being met within a reasonable timeframe. This thematic inspection is focussed on how service providers govern and manage the use of restrictive practices to ensure that people's rights are upheld, in so far as possible.

**Physical** restraint commonly involves any manual or physical method of restricting a person's movement. For example, physically holding the person back or holding them by the arm to prevent movement. **Environmental** restraint is the restriction of a person's access to their surroundings. This can include restricted access to external areas by means of a locked door or door that requires a code. It can also include

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<sup>1</sup> Chemical restraint does not form part of this thematic inspection programme.

limiting a person’s access to certain activities or preventing them from exercising certain rights such as religious or civil liberties.

## About this report

This report outlines the findings on the day of inspection. There are three main sections:

- What the inspector observed and residents said on the day of inspection
- Oversight and quality improvement arrangements
- Overall judgment

In forming their overall judgment, inspectors will gather evidence by observing care practices, talking to residents, interviewing staff and management, and reviewing documentation. In doing so, they will take account of the relevant National Standards as laid out in the Appendix to this report.

**This unannounced inspection was carried out during the following times:**

Date	Inspector of Social Services
18 December 2019	Ann-Marie O'Neill

## What the inspector observed and residents said on the day of inspection

Kilcarra is an adult's residential service operated by Sunbeam House Services Company Limited by Guarantee. This designated centre is located in a rural area in Co. Wickow.

The designated centre provides residential services for up to four adults at any given time. Residents living in this centre have support needs in relation to their mobility, sensory needs and communication support requirements. In addition some residents may exhibit incidents of self-injurious behaviour when they become unwell, for example.

The premises consists of a kitchen and dining space, a living room area, two accessible toilet/bathing facilities and four individual bedrooms. The provider has ensured manual handling equipment is available in the centre and stored in the bedrooms of residents requiring such supports.

There are well maintained garden spaces to the rear and front of the centre. A gazebo is located in the front garden of the centre and this space is used by one resident, in particular, who chooses to spend time outside each day. The location of the centre it is surrounded by scenic views of the Wicklow mountains and countryside which can be viewed from the centre and in particular the front garden.

On arrival to the centre the inspector noted an absence of Christmas decorations to represent the holiday season. On discussion with the person in charge and review of residents notes established there was a good rationale for this as some residents found the excitement for upcoming positive events difficult and could trigger anxiety for them. The person in charge informed the inspector that a Christmas tree and decorations would be put up at the weekend so the length of time for residents to wait for Christmas day would not be as long for them. This had been found to work well in the years previous and reduced instances of behaviours that challenge or self-injurious behaviours associated with anxiety.

A good standard of cleanliness was noted throughout the centre. Residents' bedrooms were decorated to reflect their personalities and interests. One resident had moved bedroom. Their new bedroom was located nearer the living room and kitchen area of the house. This had been a positive change for the resident. Previously their bedroom had been located to the other end of the centre and they chose not to spend time in it as it was away from where all the activities in the house mostly took place. It was now noted the resident was more inclined to use their bedroom for short rest periods during the day, if required and as prescribed by their physiotherapist as a result of changing the location of their bedroom.

The inspector observed some residents enjoyed mobilising about the designated centre out of their wheelchair. Accommodations had been made in the centre to afford those residents space and time to engage in this preferred activity. Mirrors were placed on walls at ground level in a number of areas within the centre which encouraged those residents to lift their head and look in the mirrors while mobilising.

In addition some sponge mats and sensory items were placed in a specific area of the centre where some residents like to sit. Sensory and preferred items were placed in resident's bedrooms allowing them the opportunity to engage in activities in various parts of the centre.

A transport vehicle was assigned to the designated centre which ensured residents could engage in activities in the local town, the wider community and go on shopping trips and excursions to Dublin or within County Wicklow. Residents were supported to go swimming and for therapeutic horse riding, for example. While it was noted residents engaged in these and other activities regularly there had been a small number of occasions when staffing levels in the centre meant they were unable to engage in these activities. It was noted however, these occurrences were not of a frequent nature but required monitoring by the person in charge and provider.

A few environmental restrictive practices were implemented in the centre. Some mechanical restrictions in use included bed-rails, lap belts (for the purposes of using mobility aids safely), the use of safety harness while using transport and the wearing of short sleeved garments for the management of a personal risk for some residents. Some environmental restrictions included the locking of the kitchen door on occasion to prevent a personal risk posed to some residents if they had unsupervised access to the kitchen and the locking of some resident's wardrobes at night time for the management of personal risks.

There had been some reduction in environmental restrictions in the centre which included the discontinuation of locking some residents' chest of drawers which was deemed no longer necessary. The person in charge discussed some other restrictions they intended to discontinue which included the locking of some residents' wardrobes at night time.

While a number of restrictions of this type were in place overall the centre presented as a low restraint environment. It was demonstrated that where a restrictive practice was implemented there was a clear reason for its use which in all instances were for the prevention of injury to residents or as prescribed by an allied professional as part of the resident's overall personal plan. Overall, the centre was managed in a way that promoted the rights of each resident to live in a restraint free environment but in a way that also ensured their safety.

The inspector met each resident in the centre on the day of inspection and had a brief interaction and chat with them. Residents were unable to provide feedback about the centre to the inspector. The inspector observed residents during the course of the inspection and how they interacted with their environment and with staff.

Overall, residents appeared content and relaxed in the centre. Some residents, during the course of the inspection, brought the inspector to their bedroom and showed them their room, demonstrating their abilities to mobilise independently which they appeared to enjoy doing immensely. Staff were observed engaging with residents in a very pleasant and kind way, having fun and jovial interactions with them. When staff spoke about residents they expressed a genuine fondness for them and a concern and interest in their wellbeing and welfare.

The inspector was shown a number of photographs of some resident's recent holiday to Disney World. For some of the residents it had been their first time on an aeroplane. Residents and staff appeared extremely happy in the photographs which showed residents enjoying all the sights, attractions and in some instances, rollercoasters. This was an excellent example of staff supporting residents to have experiences whose sole purpose was to provide residents with the opportunity to experience a great time and bring them happiness.

Of particular note in this centre was the comprehensive review and on-going management of residents' healthcare needs. It had been demonstrated that residents could display self-injurious behaviour, for example, if they became unwell. As a result the person in charge and staff demonstrated there was a consistent and responsive management of residents healthcare needs with timely review by medical professionals and allied professionals sought if and when required. This in turn reduced the instances of behaviours that challenge and associated personal risks for residents, which in turn had a positive impact on the level of restrictive practices utilised or implemented in the centre as a result.

It was clearly demonstrated that a person-centred service was being provided in this designated centre. Residents were supported to have pleasant positive experiences taking into account their unique abilities and assessed needs.

It was also demonstrated where restrictive practices were utilised in the centre they were in place to manage an identified personal risk or assessed need for residents with a number of proactive strategies, such as sensory and behaviour support strategies, reducing the necessity for restrictions to be implemented in the first instance.

## Oversight and the Quality Improvement arrangements

The provider, person in charge and staff were striving to provide a restraint free environment for residents living in this designated centre.

Prior to the inspection, the person in charge had completed and returned a restrictive practice self-assessed questionnaire. The inspector reviewed this document and found that the policies and practices outlined within the document were consistent with what the inspector observed during the inspection.

The provider had established a Rights Committee providing an oversight arrangement in relation to the use of restrictive practices within the organisation. Referrals were submitted to this committee and restrictions were reviewed as required. All restrictive practices in use in the centre had been reviewed by the committee.

The provider had also created a restrictive practice register for the designated centre which was updated and maintained by the person in charge. The register identified the date the restriction had commenced, the type of restriction, the reason for its use, the prescribing allied professional (if applicable) the control measures in place for ensuring it was used for the least amount of time and for the purpose of its use only and the last review date.

The centre was resourced with adequate staffing arrangements in place to facilitate and support residents during the day and night for the most part. The inspector met with and spoke to staff working in the centre on the day of inspection and found them to be knowledgeable regarding the appropriate use of restrictive practices and the personalities and assessed needs of residents living in the centre.

Staff were clear on how each agreed restriction should be implemented. All staff had received training in relation to management of potential and actual aggression.

Where required, behaviour support plans were in place. These plans focused on proactive strategies and de-escalation techniques to mitigate and prevent the likelihood of behaviours that challenge occurring in the first instance and a proactive approach to be implemented by staff should they occur.

## Overall Judgment

The following section describes the overall judgment made by the inspector in respect of how the service performed when assessed against the National Standards.

### Compliant

Residents enjoyed a good quality of life where the culture, ethos and delivery of care were focused on reducing or eliminating the use of restrictive practices.

### The National Standards

This inspection is based on the *National Standards for Residential Services for Children and Adults with Disabilities (2013)*. Only those National Standards which are relevant to restrictive practices are included under the respective theme. Under each theme there will be a description of what a good service looks like and what this means for the resident.

The standards are comprised of two dimensions: Capacity and capability; and Quality and safety.

There are four themes under each of the two dimensions. The **Capacity and Capability** dimension includes the following four themes:

- **Leadership, Governance and Management** — the arrangements put in place by a residential service for accountability, decision making, risk management as well as meeting its strategic, statutory and financial obligations.
- **Use of Resources** — using resources effectively and efficiently to deliver best achievable outcomes for adults and children for the money and resources used.
- **Responsive Workforce** — planning, recruiting, managing and organising staff with the necessary numbers, skills and competencies to respond to the needs of adults and children with disabilities in residential services.
- **Use of Information** — actively using information as a resource for planning, delivering, monitoring, managing and improving care.

The **Quality and Safety** dimension includes the following four themes:

- **Individualised Supports and Care** — how residential services place children and adults at the centre of what they do.
- **Effective Services** — how residential services deliver best outcomes and a good quality of life for children and adults , using best available evidence and information.
- **Safe Services** — how residential services protect children and adults and promote their welfare. Safe services also avoid, prevent and minimise harm and learn from things when they go wrong.
- **Health and Wellbeing** — how residential services identify and promote optimum health and development for children and adults.

List of National Standards used for this thematic inspection (standards that only apply to children's services are marked in italics):

## Capacity and capability

<b>Theme: Leadership, Governance and Management</b>	
5.1	The residential service performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each person and promote their welfare.
5.2	The residential service has effective leadership, governance and management arrangements in place and clear lines of accountability.
5.3	The residential service has a publicly available statement of purpose that accurately and clearly describes the services provided.

<b>Theme: Use of Resources</b>	
6.1	The use of available resources is planned and managed to provide person-centred, effective and safe services and supports to people living in the residential service.
6.1 (Child Services)	<i>The use of available resources is planned and managed to provide child-centred, effective and safe residential services and supports to children.</i>

<b>Theme: Responsive Workforce</b>	
7.2	Staff have the required competencies to manage and deliver person-centred, effective and safe services to people living in the residential service.
7.2 (Child Services)	<i>Staff have the required competencies to manage and deliver child-centred, effective and safe services to children.</i>
7.3	Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of people living in the residential service.
7.3 (Child Services)	<i>Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of children.</i>
7.4	Training is provided to staff to improve outcomes for people living in the residential service.
7.4 (Child Services)	<i>Training is provided to staff to improve outcomes for children.</i>

<b>Theme: Use of Information</b>	
8.1	Information is used to plan and deliver person-centred/child-centred, safe and effective residential services and supports.

## Quality and safety

Theme: Individualised supports and care	
1.1	The rights and diversity of each person/child are respected and promoted.
1.2	The privacy and dignity of each person/child are respected.
1.3	Each person exercises choice and control in their daily life in accordance with their preferences.
1.3 (Child Services)	<i>Each child exercises choice and experiences care and support in everyday life.</i>
1.4	Each person develops and maintains personal relationships and links with the community in accordance with their wishes.
1.4 (Child Services)	<i>Each child develops and maintains relationships and links with family and the community.</i>
1.5	Each person has access to information, provided in a format appropriate to their communication needs.
1.5 (Child Services)	<i>Each child has access to information, provided in an accessible format that takes account of their communication needs.</i>
1.6	Each person makes decisions and, has access to an advocate and consent is obtained in accordance with legislation and current best practice guidelines.
1.6 (Child Services)	<i>Each child participates in decision making, has access to an advocate, and consent is obtained in accordance with legislation and current best practice guidelines.</i>
1.7	Each person's/child's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.

Theme: Effective Services	
2.1	Each person has a personal plan which details their needs and outlines the supports required to maximise their personal development and quality of life, in accordance with their wishes.
2.1 (Child Services)	<i>Each child has a personal plan which details their needs and outlines the supports required to maximise their personal development and quality of life.</i>
2.2	The residential service is homely and accessible and promotes the privacy, dignity and welfare of each person/child.

Theme: Safe Services	
3.1	Each person/child is protected from abuse and neglect and their safety and welfare is promoted.
3.2	Each person/child experiences care that supports positive behaviour and emotional wellbeing.
3.3	People living in the residential service are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being

	required due to a serious risk to their safety and welfare.
3.3 (Child Services)	<i>Children are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.</i>

<b>Theme: Health and Wellbeing</b>	
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4.3	The health and development of each person/child is promoted.
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