



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

Issued by the Chief Inspector

Name of designated centre:	Slieve Rua Residential & Respite Services
Name of provider:	Western Care Association
Address of centre:	Mayo
Type of inspection:	Short Notice Announced
Date of inspection:	18 June 2020
Centre ID:	OSV-0003916
Fieldwork ID:	MON-0029528

About the designated centre

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

Slieve Rua provides a residential and respite service to 12 adults in three separate houses. This centre supports residents with low to high needs and can also facilitate residents with reduced mobility. One house is dedicated to respite and one resident uses this house for planned breaks. One house supports three residents on a full-time basis and also facilitates respite for three identified individuals. The final house in the centre does not provide any respite and is home to five residents. Each house in the centre is warm and comfortably furnished and residents' bedrooms are decorated with items of personal interest and photos of family and friends. The centre is located within walking distance of a small town in the West of Ireland. Full-time residents are offered an integrated service and the respite users attend day services. There is a staffing allocation to support residents during the day and there is a sleep in arrangement in place during night time hours.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	8
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How we inspect

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
Thursday 18 June 2020	11:00hrs to 14:30hrs	Ivan Cormican	Lead

What residents told us and what inspectors observed

The inspector met with three residents who were using this service on the day of inspection. Whilst maintaining social distancing and using personal protective equipment, the inspector observed that residents appeared happy and content as they went about their daily routines. Residents were also relaxed in the company of staff members who were on duty and there was a very pleasant and homely atmosphere in the centre.

A resident spent some time talking with the inspector and they discussed how they really enjoyed their home and that staff were very pleasant. They spoke about how a family member who come to visit them while maintaining social distancing and they stated that they really enjoyed these visits. They also stated that new transport for their house had arrived on the day prior to the inspection and they had "gone for a spin" that evening to a nearby beach, a trip which they had really liked. The resident spoke at length about all the baking they were doing and on the day of inspection they had baked a sponge cake with the help of a staff member who had an interest in baking. The resident could detail the steps needed to make a "good sponge" and they appeared very proud of the finished product.

The inspector met with three staff members, including the person in charge, on the day of inspection. The person in charge had a detailed knowledge of the service and it was apparent that the safety and welfare of residents was of the up most importance. The centre had a very warm atmosphere and the inspector noted that the staff who were on duty assisted in creating this atmosphere and sense of home. All observed interactions were meaningful and residents laughed and joked with staff members in a casual and care free manner.

Overall, the inspector found that this centre had a sense of home and it appeared that residents enjoyed the company of staff.

Capacity and capability

The inspector found that the oversight and management arrangements which were in place on the day of inspection promoted the welfare of residents and also ensured that they received a good quality service.

The person in charge had a good knowledge of the centre and services which were provided the meet resident's individual needs. They were completing a range of local audits which assisted in ensuring that the quality of the service was maintained good level at all times. The provider also had additional oversight of the centre having completed a remote six monthly audit which took into account how

residents and staff members were coping during the Covid 19 outbreak. The audit detailed that a resident was consulted with through the use of video calling and an interview with a staff member outlined some positives and some difficulties in caring for residents during the current emergency.

On the previous inspection of this centre, the inspector found that residents required additional supports to ensure that the quality of the service was maintained to a good standard. The provider had taken this seriously and at the time of inspection an additional 29 voluntary and employment scheme hours were being finalised to assist residents in accessing their local communities.

The inspector found that the centre was well prepared for an outbreak of Covid 19 and there was ongoing monitoring of residents and staff members for signs and symptoms of the illness. Oversight arrangements were kept under regular review and the upcoming easing of restrictions on visitors had been risk assessed with additional guidance for staff members, residents and family members introduced to further promote the safety of all parties.

The provider had a training and refresher programme in place which assisted in ensuring that residents were supported by staff members who could meet their needs. A review of a sample of training records indicated that staff were up-to-date with training needs and additional training in the use of personal protective equipment (PPE), infection control and hand hygiene had been completed.

Regulation 15: Staffing

The person in charge maintained an accurate staff rota and the provider was finalising arrangements to introduce additional hours to support residents with activities and community access.

Judgment: Compliant

Regulation 16: Training and staff development

The provider had a training programme in place which assisted in ensuring that residents were supported by staff members who could meet their needs.

Judgment: Compliant

Regulation 23: Governance and management

The provider had oversight arrangements in place which promoted the welfare and safety of residents. The provider also had contingency planning in place should an outbreak of Covid 19 occur.

Judgment: Compliant

Regulation 31: Notification of incidents

The person in charge demonstrated that all notifications had been submitted as required.

Judgment: Compliant

Quality and safety

Overall, the inspector found that quality and safety of care which residents received was maintained to a good standard.

The inspector found that residents were kept up-to-date with developments in regards to Covid 19. Regular residents' meetings were occurring in which residents' safety was discussed and also the use of PPE, visitors and how they may be affected by Covid 19. A resident told the inspector that they enjoyed playing bingo, going for walks and weekly music sessions via video calling. They also spoke about how a family member would visit them by staying outside the centre and chat to them through a window. They said it was lovely to have these visits and they were really looking forward to when their family member could visit them in their home. The person in charge had also completed a detailed guidance document to promote the safety of residents, staff and visitors when restrictions on visitors were eased.

It was clear that staff members were trying to promote interests and activities which residents would enjoy whilst promoting residents' safety during the Covid 19 emergency. New transport had also arrived to the centre on the day prior to the inspection and the person in charge stated that implementation of additional support hours would greatly improve the quality of the service and community access for residents.

Residents' health was promoted and access to health care professions was occurring on a planned and as required basis. Reviews from public health had also occurred since the last inspection and there was evidence that preventative health screening was occurring. Improvements had occurred in regards to health care planning with detailed care plans in place to support the monitoring of skin conditions and the administration of associated medications. Improvements had also occurred in regards to the management of medications since the last inspection

with accurate medication administration and recording records in place.

Regulation 11: Visits

The provider had systems in place to promote the safety of residents during the outbreak of Covid 19 with visiting restrictions in place. With the easing of visiting restrictions, the person in charge had produced a detailed guidance document which aimed to ensure the safety of residents would be maintained when residents could receive visitors.

Judgment: Compliant

Regulation 13: General welfare and development

The welfare of residents was promoted throughout the Covid 19 emergency and residents' interest in baking, music and gardening was actively promoted. The provider was also finalising the implementation of additional support hours which would have a positive impact on the quality of residents' lives.

Judgment: Compliant

Regulation 26: Risk management procedures

Risk assessments were in place to respond to issues which could negatively impact on the safety of residents. Risk assessments in regards to Covid 19 and the easing of restrictions on visitors were also in place and reviewed on a regular basis. The provider also had systems in place for the monitoring and review of adverse events.

Judgment: Compliant

Regulation 27: Protection against infection

The provider had systems in place for the monitoring of signs and symptoms of Covid 19. Staff were also trained in the use of PPE and information on Covid 19 was available for both residents and staff.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

The inspector found that accurate medication administration and recording records were maintained.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

Residents had detailed personal plans in place which were reviewed by the staff team on a regular basis. The person in charge also indicated the circle of support meetings would recommence once safe to do so for residents.

Judgment: Compliant

Regulation 6: Health care

The health of residents was promoted and detailed health care plans were maintained.

Judgment: Compliant

Regulation 8: Protection

There were no safeguarding plans required and residents were supported in the area of self care and protection through regular house meetings.

Judgment: Compliant

Regulation 9: Residents' rights

The inspector observed that residents were actively consulted with by staff members. A resident told the inspector that they were happy in the centre, which

had a real sense of home.

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
Capacity and capability	
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Regulation 31: Notification of incidents	Compliant
Quality and safety	
Regulation 11: Visits	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 27: Protection against infection	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant

