



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

Issued by the Chief Inspector

Name of designated centre:	Teach Rua
Name of provider:	The Rehab Group
Address of centre:	Clare
Type of inspection:	Unannounced
Date of inspection:	10 June 2022
Centre ID:	OSV-0007972
Fieldwork ID:	MON-0036629

About the designated centre

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

Teach Rua is a designated centre run by The Rehab Group. The centre can cater for the needs of up to three residents, who are over the age of 18 years and who have an intellectual disability. The centre comprises of one two-storey building located a few kilometres from a town in Co. Clare. Residents have their own bedroom, some en-suite facilities, shared bathrooms, sitting room, kitchen and dining area, relaxation room, utility and staff office. A large and well-maintained garden area is also available to residents. Staff are on duty both day and night to support the residents who live at this centre.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:

2

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 10 June 2022	11:00hrs to 15:30hrs	Cora McCarthy	Lead

What residents told us and what inspectors observed

This inspection was carried out to assess the provider's compliance with Regulation 27 (Protection against infection), and the National Standards for infection prevention and control in community services (HIQA, 2018).

On the day of inspection the appropriate checks were carried out in terms of identification check, temperature check and staff ensured the inspector was wearing the correct mask and completed hand hygiene. The staff member also completed hand hygiene and was wearing a face covering.

The residents were out when the inspector arrived but the inspector had the opportunity to speak with the residents later in the afternoon. The residents had limited ability to communicate verbally but interacted with the inspector through gestures and facial expressions. They indicated that they were happy in their home through facial expression and smiling. The staff members appeared to know the residents very well and met all their needs throughout the afternoon. A staff member prepared lunch for the residents and indicated they were very aware of their needs as they prepared the residents preferred food .

The residents enjoyed lots of meaningful activities in their day including swimming, horse riding and bowling. The residents enjoyed going to the local cafe and the barbers. The residents enjoyed walks locally with staff for exercise and also going to music therapy classes. The residents had weekly meetings with staff around activities and planning meals for the week. The residents' preferences were noted and food bought accordingly for weekly meals.

Overall the centre was clean and there was a regular cleaning schedule and an enhanced cleaning schedule in place. The hand sanitising units were full and there was adequate supply of personal protective equipment for staff use. The IPC guidance document provided to staff included product information which informed staff of the dilution and decanting methods of the cleaning products. The staff member on duty and the person in charge were familiar with protocols around infection prevention and control and how to minimise the risk of infection. There were posters in the house explaining hand hygiene, social distancing and wearing of a face covering to the resident although these were limited as one resident removed these as they were overwhelming from a sensory perspective. It was apparent that every effort was made to support the residents understanding of infection prevention and control and to enhance their independence. Family members were also consulted in relation to decision making such as COVID -19 vaccine.

The centre had a vehicle which could be used by the residents to attend outings and activities and there was a cleaning protocol in place for the vehicle.

Throughout the inspection the staff discussed and were fully aware of their responsibilities in terms of maintaining good infection prevention and control.

Overall the premises was clean, staff were seen to be diligent in performing hand hygiene and in wearing appropriate face masks.

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).

There were clear lines of accountability and responsibility in relation to governance and management arrangements for the prevention and control of healthcare-associated infections in the centre. The person in charge had overall accountability, responsibility and authority for infection prevention and control (IPC) in the centre although there was a designated lead IPC staff member. There were clear management and reporting structures in place within the centre. Staff spoken with were aware of the reporting pathways available to them in terms of issues regarding infection prevention and control. The person in charge was supported in their role by the area manager.

The inspector found that the staffing levels and mix were in line with the assessed needs of the resident and in line with the statement of purpose. The staffing roster reviewed indicated that there was continuity of care provided by a core staff team. The staff team were fully cognisant of maintaining good IPC practices and safeguarding residents from the risk of preventable infection.

The person in charge had ensured staff had access to training in relation to infection prevention and control. The inspector reviewed the training matrix and noted that all staff had completed training in infection prevention and control including the national standards for infection, prevention and control in community services, cough etiquette, hand hygiene and breaking the chain of infection. There was a training schedule in place and staff had completed the training as outlined in the providers' guidance document. Staff spoken with confirmed that they had attended a combination of on-line training on HSEland and in service training.

Staff had access to a range of guidance documents in relation to infection prevention and control including the National Standards for infection prevention and control in community services (2018). There was guidance for staff in relation to residents requiring to self isolate in a group home, increased use of personal protective equipment and enhanced cleaning of areas if a resident tested positive. There was both in house advice available to staff from the person in charge and also specialist advice could be sought from public health professionals in the HSE. Guidance referenced the national guidance published by the Health Service

Executive, the Health Protection and Surveillance Centre and the Health Information and Quality Authority.

The provider completed regular infection prevention and control audits and issues that were identified had been completed on the day of inspection.

The person in charge and staff members were fully aware of their responsibilities in terms of reporting a suspected or confirmed case of infection to the Chief Inspector. There were clear pathways for reporting within the service and good guidance in the event of an outbreak .

Quality and safety

Overall the inspector found that the service provided in this centre were to a good standard, person-centred, the residents had been kept updated about infection prevention and control and COVID-19. It was evident that the residents had been kept informed about infection prevention and control and had a good understanding about the restrictions, social distancing and wearing a face covering. There was information visible in the centre about infection prevention and control and COVID-19 in accessible formats and the inspector observed that posters promoting hand washing, cough etiquette and social distancing were visible in the centre.

A walk through of the centre was completed by the inspector and the person in charge. Overall the house was clean throughout, the kitchen and counter tops and the bathrooms were visibly clean. There were paper towel dispensers in the bathroom and the hand sanitiser dispensers were full and clean. There were colour coded food preparation boards in use and staff spoken with were clear and consistent in describing the cleaning procedures and systems in use. The staff were also fully aware of which colour mop head to use for each area and how to launder them after use. There were no aerosol generating procedures in use in the centre such as nebulising although they were aware of the protocols around such procedures. A sharps box was available if required and a protocol was in place around disposal of the contents. There was adequate supplies of PPE and staff were observed to wear the appropriate FFP2 mask and practice hand hygiene regularly. There was a dedicated area for donning of personal protective equipment (PPE) inside the front door and doffing was completed as staff exit through the back door, a bagged waste bin was available for used PPE also.

There was a cleaning protocol and record in place for the house vehicle which indicated that contact surfaces were cleaned after each use. The vehicle was supplied with disinfectant wipes, hand sanitiser and a supply of face masks.

There were good arrangements in place for the laundry of the residents clothing and centre linen. Any soiled linen was transported in alginet bags and there was a clean linen basket for clean clothes. The staff washed the residents clothing separately at a high temperature using the appropriate products. Cleaning products as instructed

in the Covid-19 guidance document were used for floors and surfaces and diluted as per instructions.

There were appropriate arrangements in place for the disposal of clinical waste, a double bag system was in place for clinical waste, with a 72 hour wait period before waste disposal collection. Waste was stored in an appropriate area and was collected fortnightly by a waste management company.

There was information available in the centre about infection prevention and control and COVID-19 in easy-to-read formats. The inspector observed posters promoting hand washing, correct hand washing techniques, social distancing and information on how to protect oneself from COVID-19 were displayed.

Staff in the centre fully understood the importance of infection prevention and control and were aware of their responsibilities in terms of ensuring daily cleaning routines were completed in order to prevent healthcare-associated infections. Throughout the inspection, staff were observed to be diligent in performing hand hygiene and in wearing appropriate face masks in line with current public health guidance. Staff members spoken with during this inspection demonstrated a good awareness infection prevention and control, of the COVID-19 symptoms, how to respond were a resident to develop symptoms and who to escalate any concerns to.

Overall the house was clean and homely, there was sufficient guidance to direct thorough cleaning and disinfection of the facility. There was a cleaning checklist in place which listed areas of the centre to be cleaned on a given day, frequency of cleaning and with what products. The COVID-19 addendum to the policy outlined what products to use and the formula for dilution.

There was a risk management system in place and risk assessments had been completed for risks associated with COVID-19, including the risk to individual residents of isolation in their bedrooms and risk of reduced staffing numbers.

Residents' health care needs were met throughout the COVID-19 pandemic and they were supported to access General Practitioners (GPs), and other clinicians via phone or video call. It was evident from document review that the resident had been supported to attend appointments with their GP. The residents had been informed of COVID-19 vaccinations and infection prevention and control and had made the decision to take the vaccine.

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 'Guidelines for services for the prevention and management of Corona Virus', provided guidance in a number of areas including arrangements in place for cleaning

and disinfection of the centre, the frequency of training staff, reporting pathways and staff management plan.

-There was sufficient guidance in place to direct thorough cleaning and disinfection of the facility. The cleaning checklist in place included all areas and all equipment to be cleaned and or disinfected. There was an enhanced cleaning checklist in place in the event of an outbreak.

-There were adequate supplies of PPE and staff were observed to wear appropriate face coverings and were also observed to sanitise hands regularly.

-The house was clean throughout and well maintained.

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