

**Health Information and Quality Authority
Regulation Directorate**

**Compliance Monitoring Inspection report
Designated Centres under Health Act 2007,
as amended**



Centre name:	A designated centre for people with disabilities operated by Sunbeam House Services Limited
Centre ID:	OSV-0005299
Centre county:	Wicklow
Type of centre:	Health Act 2004 Section 38 Arrangement
Registered provider:	Sunbeam House Services Limited
Provider Nominee:	John Hannigan
Lead inspector:	Karina O'Sullivan
Support inspector(s):	Gary Kiernan
Type of inspection	Announced
Number of residents on the date of inspection:	3
Number of vacancies on the date of inspection:	0

About monitoring of compliance

The purpose of regulation in relation to designated centres is to safeguard vulnerable people of any age who are receiving residential care services. Regulation provides assurance to the public that people living in a designated centre are receiving a service that meets the requirements of quality standards which are underpinned by regulations. This process also seeks to ensure that the health, wellbeing and quality of life of people in residential care is promoted and protected. Regulation also has an important role in driving continuous improvement so that residents have better, safer lives.

The Health Information and Quality Authority has, among its functions under law, responsibility to regulate the quality of service provided in designated centres for children, dependent people and people with disabilities.

Regulation has two aspects:

- **Registration:** under Section 46(1) of the Health Act 2007 any person carrying on the business of a designated centre can only do so if the centre is registered under this Act and the person is its registered provider.
- **Monitoring of compliance:** the purpose of monitoring is to gather evidence on which to make judgments about the ongoing fitness of the registered provider and the provider's compliance with the requirements and conditions of his/her registration.

Monitoring inspections take place to assess continuing compliance with the regulations and standards. They can be announced or unannounced, at any time of day or night, and take place:

- to monitor compliance with regulations and standards
- following a change in circumstances; for example, following a notification to the Health Information and Quality Authority's Regulation Directorate that a provider has appointed a new person in charge
- arising from a number of events including information affecting the safety or well-being of residents

The findings of all monitoring inspections are set out under a maximum of 18 outcome statements. The outcomes inspected against are dependent on the purpose of the inspection. Where a monitoring inspection is to inform a decision to register or to renew the registration of a designated centre, all 18 outcomes are inspected.

Compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) With Disabilities) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

This inspection report sets out the findings of a monitoring inspection, the purpose of which was to inform a registration decision. This monitoring inspection was announced and took place over 1 day(s).

The inspection took place over the following dates and times

From: 25 November 2015 09:30 To: 25 November 2015 17:00

The table below sets out the outcomes that were inspected against on this inspection.

Outcome 01: Residents Rights, Dignity and Consultation
Outcome 02: Communication
Outcome 03: Family and personal relationships and links with the community
Outcome 04: Admissions and Contract for the Provision of Services
Outcome 05: Social Care Needs
Outcome 06: Safe and suitable premises
Outcome 07: Health and Safety and Risk Management
Outcome 08: Safeguarding and Safety
Outcome 09: Notification of Incidents
Outcome 10. General Welfare and Development
Outcome 11. Healthcare Needs
Outcome 12. Medication Management
Outcome 13: Statement of Purpose
Outcome 14: Governance and Management
Outcome 15: Absence of the person in charge
Outcome 16: Use of Resources
Outcome 17: Workforce
Outcome 18: Records and documentation

Summary of findings from this inspection

This proposed designated centre is owned and operated by Sunbeam House Services Limited and is based in County Wicklow. There were no residents at the time of inspection as this was a new proposed designated centre, the provider had applied to register.

As part of the inspection inspectors visited the proposed designated centre, met with some proposed residents, proposed person in charge, and viewed proposed documentation such as care plans, person centred support plans, recording logs, policies and procedures. The proposed residents for this proposed designated centre currently reside in another designated centre operated by the provider.

Extensive renovations to the premises ensured that it will meet the needs of the residents' in both a comfortable and homely style.

Plans were in place to ensure that the health needs of proposed residents were met. Proposed residents will have access to a general practitioner (GP) and a range of other services.

Plans were also in place to assess the social care needs of proposed residents and to ensure that proposed residents will have the opportunity to participate in activities appropriate to their interests and preferences. Proposed residents were consulted about the move and were involved in the decision making process.

All proposals outlined and plans agreed will be verified at the next inspection.

The findings from the inspection are discussed further in the body of the report. No actions were required from this inspection.

Section 41(1)(c) of the Health Act 2007. Compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) With Disabilities) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

Outcome 01: Residents Rights, Dignity and Consultation

Residents are consulted with and participate in decisions about their care and about the organisation of the centre. Residents have access to advocacy services and information about their rights. Each resident's privacy and dignity is respected. Each resident is enabled to exercise choice and control over his/her life in accordance with his/her preferences and to maximise his/her independence. The complaints of each resident, his/her family, advocate or representative, and visitors are listened to and acted upon and there is an effective appeals procedure.

Theme:

Individualised Supports and Care

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied that the rights, privacy and dignity of proposed residents will be promoted and proposed residents choice encouraged.

Proposed residents were consulted in relation to the interior design of the proposed designated centre including the purchase of furniture for the living room and kitchen. Two proposed residents visited the centre during the inspection and showed inspectors around the premises. Residents outlined plans for their individual rooms some of which were well under way including colour scheme. Proposed residents outlined the enjoyment gained from this process. It was very evident to inspectors the sense of pride and involvement proposed residents had in relation to the decorating of this proposed designated centre.

There was a complaints policy and procedure in place for this proposed designated centre which identified the proposed person in charge as the local complaints officer. Inspectors were shown the system for recording any complaints onto an electronic system, to which the local complaints officer will receive an alert. Inspectors found that there were clear time frames for the complaints officer to respond to any complaints in the proposed designated centre, and a system of review by the senior manager. This proposed designated centre was not yet operational, therefore inspectors had no complaints to review. The complaints procedure was displayed on the notice board within the proposed designated centre.

Proposed person in charge informed inspectors that regular residents' meetings will be held. This will include discussions on items such as menu planning, cooking and group

activities. One proposed resident is a member of the "client forum". This group meets on a monthly basis and discuss various agenda items pertaining to residents' needs and wishes.

Proposed residents and relatives will have access to an advocacy service. The relevant contact information was made available to inspectors and displayed in the proposed designated centre by the end of the inspection.

Individual safes/ secure storage will also be provided in each proposed resident's room. Money management plans will be in place for each proposed resident as required. Appropriate records will be maintained in relation to managing the residents' finances. In addition weekly checks will be carried out to ensure that balances are correct. The proposed person in charge will also complete random audits as an additional safeguard.

Inspectors found systems in place to consult with proposed residents in a manner suitable to their needs and abilities. For example the use of photographs to identify staff members. Records of meetings held between the proposed residents were viewed with a record of visits to the proposed designated centre being maintained. For example, inspectors read where one proposed resident had visited the designated centre 10 times including visits accompanied by friends and family members.

Judgment:

Compliant

Outcome 02: Communication

Residents are able to communicate at all times. Effective and supportive interventions are provided to residents if required to ensure their communication needs are met.

Theme:

Individualised Supports and Care

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied that proposed residents will be supported and assisted to communicate in accordance with residents' needs and preferences.

Proposed residents' communication needs will be identified in the personal planning documentation and supports put in place where needed. A communication passport will be developed if required and will include information such as 'how I communicate'.

Inspectors found that proposed residents would be supported to communicate in the proposed designated centre in a manner suitable to their individual abilities. Inspectors viewed proposed care plans which will clearly outline the individual communication supports/interventions required by proposed residents. The documentation viewed in

relation to communication was person centred and outlined proposed resident's preferences "how you know what I like".

Inspectors identified the proposed designated centre would provide access to television, radio and wireless internet connection once the proposed designated centre was in operation.

Judgment:
Compliant

Outcome 03: Family and personal relationships and links with the community

Residents are supported to develop and maintain personal relationships and links with the wider community. Families are encouraged to get involved in the lives of residents.

Theme:
Individualised Supports and Care

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

From the information available inspectors were satisfied that families and friends will be encouraged to get involved in the lives of proposed residents.

Proposed person in charge outlined how staff will facilitate proposed residents to maintain contact with their families. This included access to telephones, transport home/ visits and family invitations to events in the proposed designated centre.

Regular contact will also be maintained between the staff and the relatives in accordance with proposed residents' wishes. Inspectors viewed proposed transition plans within these plans were evidence of meetings held with family members pertaining to the move. Proposed residents also discussed these meetings with inspectors and various visits by family and friends of proposed residents to view the proposed designated centre.

Visitors will be welcomed within the proposed designated centre and plans were in place in relation to building relationships among the local community including neighbours.

Judgment:
Compliant

Outcome 04: Admissions and Contract for the Provision of Services

Admission and discharge to the residential service is timely. Each resident has an agreed written contract which deals with the support, care and welfare of the resident and

includes details of the services to be provided for that resident.

Theme:

Effective Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied that there was a system in place regarding admissions into the proposed designated centre. There were policies and procedures in place to guide the admissions process.

The proposed person in charge outlined the proposed plans for admitting proposed residents including the supports that will be available during the transition period. This included prospective residents looking around the premises and sourcing items for their bedroom and also furniture for the living area.

Written agreements will be in place outlining the support, care and welfare of the residents' and details of the services to be provided and where appropriate, the fees to be charged.

Inspectors viewed a sample contract of care and tenancy agreement and were satisfied that it met the requirements of the Regulations.

Judgment:

Compliant

Outcome 05: Social Care Needs

Each resident's wellbeing and welfare is maintained by a high standard of evidence-based care and support. Each resident has opportunities to participate in meaningful activities, appropriate to his or her interests and preferences. The arrangements to meet each resident's assessed needs are set out in an individualised personal plan that reflects his /her needs, interests and capacities. Personal plans are drawn up with the maximum participation of each resident. Residents are supported in transition between services and between childhood and adulthood.

Theme:

Effective Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied when implemented, the care and support as described by the

proposed person in charge will consistently and sufficiently reflect proposed residents' assessed needs and wishes.

Inspectors reviewed a sample of the proposed documentation and found that it will be comprehensive and if completed, will identify proposed residents' care needs and proposed plans to address those needs. Each proposed resident will be assigned a key worker who will complete the care plan reviews in consultation with the proposed resident to monitor progress against agreed goals.

Inspectors were satisfied that the personal plans will contain important information about the proposed residents' lives, likes, dislikes, interests, family members and other people who are important to proposed residents.

The proposed person in charge discussed how proposed residents will be supported in transition between services. This plan was already in operation and evidence of visits and time spent within the proposed designated centre was maintained for the proposed residents.

Inspectors determined that the care and support that will be offered in the proposed designated centre will be in line with the assessed needs and wishes of proposed residents'. Inspectors viewed proposed residents' files and assessments including risk assessments for areas required such as self harm. Through viewing the care and support plans, inspectors found the proposed person in charge had a good understanding of the particular needs of each resident. The information provided to inspectors directly correlated with the communication plans and risk assessments.

Goals set for 2015 were viewed and inspectors found that proposed residents were being supported to achieve these goals with clearly identifiable steps. These goals were based on proposed residents' interests, and on skills development that would promote proposed residents to be more involved in their community. Examples of these included the use of computers and working in a pharmacy. The proposed person in charge informed inspectors of this system continuing within the proposed designated centre once opened. For example, proposed residents had started attending a number of activities in the local area including religious services. Proposed residents informed inspectors that they were looking forward to moving in to this proposed designated centre as they would be closer to family and friends.

Judgment:
Compliant

Outcome 06: Safe and suitable premises

The location, design and layout of the centre is suitable for its stated purpose and meets residents individual and collective needs in a comfortable and homely way. There is appropriate equipment for use by residents or staff which is maintained in good working order.

Theme:

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors found that proposed designated centre will be suitable and safe for the proposed number and needs of residents. The building had recently been renovated and upgraded.

The proposed designated centre is a four bedroom detached two storey house, located in close proximity to the town centre and has had extensive renovations which were nearing completion at the time of inspection.

There was an open plan kitchen cum dining room and separate sitting room on the ground floor. One proposed resident will have an en suite bedroom on the ground floor. The other two proposed residents will have individual bedrooms on the first floor with shared access to a toilet and shower. A bedroom for staff when on sleepovers was also be located on the second floor this will also contain facilities for items to be securely stored such as files and medications.

The proposed designated centre had ample grounds with two gardens to the back of the house. The proposed person in charge outlined plans from discussions with the proposed residents for a kitchen garden to be developed in the future.

The proposed designated centre will have adequate space for parking.

Inspectors found that the proposed designated centre will meet the requirements of Schedule 6 in the regulations. For example, the designated centre was suitably heated, had suitable kitchen and laundry facilities while adequate private and communal accommodation was available.

Judgment:

Compliant

Outcome 07: Health and Safety and Risk Management

The health and safety of residents, visitors and staff is promoted and protected.

Theme:

Effective Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied that the health and safety of proposed residents, visitors and staff will be promoted.

There was a health and safety statement in place. The risk management policy met the requirements of the Regulations.

A safety audit was conducted in July by an external agency with no recommendations identified.

Appropriate steps were in place to manage the risk of fire. The proposed person in charge discussed plans in relation to routine checks and services of the fire detection, alarm system, emergency lighting and equipment being conducted by a fire professional. All proposed staff had undertaken fire training prior to the designated centre becoming operational. There were provisions for weekly checks to be conducted in the proposed designated centre. Inspectors were shown records for the fire detection, alarm system and fire fighting equipment all of which had been recently inspected.

Personal evacuation plans will be developed for each proposed resident and these will include any particular arrangements that a resident may require such as the use of mobility aids.

Inspectors viewed the emergency plan and were satisfied that it contained sufficient detail to guide staff in the procedure to follow in the event of possible emergencies such as flood or power outage.

All proposed staff had attended training in moving and handling and a system was maintained centrally by the organisation to identify when refresher courses were due.

Inspectors reviewed the risk management policies and procedures and found them to meet the requirements of the Regulations. There was a clear system in place to identify, examine and manage potential hazards in the proposed designated centre. This was evident through the risk register viewed within the proposed designated centre. Any potential or real risk for the proposed residents had been assessed and areas identified by inspectors were addressed on the day of inspection including the outside smoking area and the procedure of the transportation of sharps.

The inspector found that there was an up to date insurance policy in place with adequate cover. From speaking with the proposed person in charge, and reviewing documentation inspectors determined that there was a system of oversight in relation to any accidents, incidents and near misses in the proposed designated centre. Inspectors viewed the on line system which had been set up to record these incidents.

Judgment:
Compliant

Outcome 08: Safeguarding and Safety

Measures to protect residents being harmed or suffering abuse are in place and

appropriate action is taken in response to allegations, disclosures or suspected abuse. Residents are assisted and supported to develop the knowledge, self-awareness, understanding and skills needed for self-care and protection. Residents are provided with emotional, behavioural and therapeutic support that promotes a positive approach to behaviour that challenges. A restraint-free environment is promoted.

Theme:

Safe Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied that measures were in place to protect proposed residents being harmed or suffering abuse.

There was a policy in place on the prevention, detection and response to abuse and proposed staff had received training. The proposed person in charge outlined the procedures to be followed should an allegation of abuse arise. Inspectors noted that some improvements were required, to the contents of the policy, pertaining to staff's roles and responsibilities should an allegation of abuse arise. The proposed person in charge agreed to forward an updated policy to the inspectors following the inspection.

Inspectors determined proposed residents will be assisted and supported to develop the knowledge, self-awareness, understanding and skills needed for self-care and protection.

Inspectors were satisfied that proposed residents will be provided with emotional, behavioural and therapeutic support. This will promote a positive approach to behaviours that challenge. There were policies in place guiding the management of behaviours that challenge. The proposed person in charge informed inspectors that behavioural support plans had been developed for resident's who required this intervention. Inspectors viewed an example of this from one of the proposed resident's plan. Inspectors found this plan would provide a consistent evidence based approach to the behavioural areas identified if the plan was implemented within the proposed designated centre.

Judgment:

Compliant

Outcome 09: Notification of Incidents

A record of all incidents occurring in the designated centre is maintained and, where required, notified to the Chief Inspector.

Theme:

Safe Services

<p>Outstanding requirement(s) from previous inspection(s): This was the centre's first inspection by the Authority.</p> <p>Findings: The proposed person in charge was aware of the legal requirement to notify the Chief Inspector regarding incidents and accidents.</p> <p>Plans were in place to maintain a detailed log of all incidents occurring in the proposed designated centre.</p>
<p>Judgment: Compliant</p>

Outcome 10. General Welfare and Development
Resident's opportunities for new experiences, social participation, education, training and employment are facilitated and supported. Continuity of education, training and employment is maintained for residents in transition.

Theme:
Health and Development

<p>Outstanding requirement(s) from previous inspection(s): This was the centre's first inspection by the Authority.</p> <p>Findings: Inspectors were satisfied that if the plans discussed are implemented, the general welfare and development needs of proposed residents will be promoted. Proposed residents' will be afforded opportunities for new experiences, social participation, education, training and employment.</p> <p>The proposed person in charge outlined how support will be provided to the proposed residents to pursue a variety of interests including cooking, gardening and swimming. Care plans and daily records will document the type and range of activities that proposed residents will participate in.</p> <p>Inspectors were informed that various training programmes and educational activities will be available through the organisation's day services. The proposed person in charge discussed plans to facilitate proposed residents to continue with any training/educational course. Proposed residents are already undertaking and will be encouraged to participate in new educational experiences. The Proposed person in charge outlined further skills development that will begin for proposed residents across certain areas such as meal preparation once proposed residents had settled into the proposed designated centre.</p>
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Inspectors met with two proposed residents and plans were on going for one proposed resident to attend a ball in the coming days. The proposed resident informed inspectors of the preparation that had occurred and how excited the resident was to be attending this event.

Judgment:

Compliant

Outcome 11. Healthcare Needs

Residents are supported on an individual basis to achieve and enjoy the best possible health.

Theme:

Health and Development

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied proposed residents health needs will be regularly reviewed with appropriate input from multidisciplinary practitioners where required.

Inspectors determined proposed residents will have access to a general practitioner (GP) and to a range of allied health professionals.

Inspectors were satisfied if the proposed practices were implemented, proposed residents' nutritional needs will be met to an acceptable standard. Weights will be recorded on a monthly basis or more frequently if required. The menu choices will be on display.

The proposed person in charge informed inspectors that when proposed residents are busy attending various activities during the day, the evening meal is an opportunity for a positive social event with proposed residents.

Inspectors found proposed residents will be supported to enjoy best possible health while in the proposed designated centre. An annual medical will be conducted by proposed residents' GP and inspectors viewed where a number of these had been recently been carried out. Care plans had already been developed for identified health care needs.

Inspectors reviewed residents' files, and found sufficient documentation and information regarding their health needs. For example care interventions were developed to address specific needs for the proposed residents including the management of type 2 diabetes.

Judgment:

Compliant

Outcome 12. Medication Management

Each resident is protected by the designated centres policies and procedures for medication management.

Theme:

Health and Development

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors found the proposed medication management policies and procedures were satisfactory and safe. The policy provided comprehensive and clear guidance to staff on areas such as medication administration, refusal, medications requiring strict controls, disposal of medications and medication errors.

Inspectors found all proposed staff had undertaken a medication management programme. Safe storage facilities will be provided for medication within the proposed designated centre.

Audits will be undertaken to ensure compliance with the proposed designated centre's policy and that all required documentation is correctly completed.

Judgment:

Compliant

Outcome 13: Statement of Purpose

There is a written statement of purpose that accurately describes the service provided in the centre. The services and facilities outlined in the Statement of Purpose, and the manner in which care is provided, reflect the diverse needs of residents.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied the statement of purpose met the requirement of the Regulations. Minor amendments were required, and these were addressed prior to the end of the inspection.

The statement of purpose accurately described the services that will be provided in the centre and this will be kept under review by the person in charge. This document will also be available to proposed residents.

Judgment:

Compliant

Outcome 14: Governance and Management

The quality of care and experience of the residents are monitored and developed on an ongoing basis. Effective management systems are in place that support and promote the delivery of safe, quality care services. There is a clearly defined management structure that identifies the lines of authority and accountability. The centre is managed by a suitably qualified, skilled and experienced person with authority, accountability and responsibility for the provision of the service.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied that the quality of care and experience to proposed residents' will be monitored and developed on an ongoing basis. Effective management systems will be in place to support and promote the delivery of safe, quality care services.

Arrangements will be in place for the person nominated on behalf of the provider to carry out an unannounced visit on a six monthly basis. This will review the safety and quality of care and support provided in the proposed designated centre.

The proposed person in charge and other staff members had responsibility for carrying out regular audits in the designated centre. For example the proposed person in charge will carry out monthly household audits and the results of these audits will be communicated to relevant staff through team meetings and results will be used to improve practices if required.

Inspectors were satisfied that there was a clearly defined management structure that identified the lines of authority and accountability. The proposed designated centre is proposed to be managed by a suitably qualified, skilled and experienced person in charge with authority, accountability and responsibility for the provision of the service. The proposed person in charge was knowledgeable about the requirements of the regulations and standards. This proposed staff member will be the person in charge for three designated centres. Inspectors were satisfied that this will be a suitable arrangement due to the close geographical locations of each designated centre, and the effective systems that the proposed person in charge has in place.

Judgment:

Compliant

Outcome 15: Absence of the person in charge

The Chief Inspector is notified of the proposed absence of the person in charge from the designated centre and the arrangements in place for the management of the designated centre during his/her absence.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors found that the proposed person in charge was aware of the requirement to notify the Authority (The Health Information and Quality Authority) of any absence over 28 days.

Judgment:

Compliant

Outcome 16: Use of Resources

The centre is resourced to ensure the effective delivery of care and support in accordance with the Statement of Purpose.

Theme:

Use of Resources

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

There are currently no residents living in this proposed designated centre as it is not operational as yet. All proposals outlined and plans agreed will be verified at the next inspection.

Inspectors found the proposed designated centre will be adequately resourced with staffing and transport to sufficiently meet the proposed residents' assessed needs. This will be carried out in line with the statement of purpose.

Judgment:

Compliant

Outcome 17: Workforce

There are appropriate staff numbers and skill mix to meet the assessed needs of residents and the safe delivery of services. Residents receive continuity of care. Staff have up-to-date mandatory training and access to education and training to meet the needs of residents. All staff and volunteers are supervised on an appropriate basis, and recruited, selected and vetted in accordance with best recruitment practice.

Theme:

Responsive Workforce

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors were satisfied there will appropriate staff numbers and skill mix to meet the assessed needs of the proposed residents. Evidence was available that all staff will be supervised on an appropriate basis, and recruited, selected and vetted in accordance with recruitment practice.

Supervisory meetings are to be held with each staff member at three intervals throughout the year. The proposed person in charge will complete a competency review with staff on a yearly basis incorporating both self assessment and assessment by the proposed person in charge.

Records of staff training were maintained. There was evidence that the proposed staff had attended a range of training in areas such as communication skills, first aid and the management of behaviour that challenges.

It was not expected that volunteers will be involved with the proposed designated centre. Should that change, the proposed person in charge was aware of the requirements of the Regulations in this regard.

Staff files were not reviewed as part of this inspection. However, other inspectors had done a comprehensive review of staffing files across the organisation previously, and determined the staffing records were in line with the regulations as outlined in Schedule 2.

Judgment:

Compliant

Outcome 18: Records and documentation

The records listed in Part 6 of the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013

are maintained in a manner so as to ensure completeness, accuracy and ease of retrieval. The designated centre is adequately insured against accidents or injury to residents, staff and visitors. The designated centre has all of the written operational policies as required by Schedule 5 of the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013.

Theme:

Use of Information

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Inspectors found there were systems in place to maintain complete and accurate records.

Written operational policies were in place to inform practice and provide guidance to staff.

Inspectors read the residents' guide and found that it provided detail in relation to all of the required areas. This document included a summary of the services and facilities to be provided, arrangements for resident involvement in the proposed designated centre and a summary of the complaints procedure.

Inspectors found systems were in place to ensure that medical records and other records, relating to residents and staff, will be maintained in a secure manner.

Although not yet required the proposed person in charge had access to an appropriate template for the directory of residents'.

Inspectors reviewed documentation submitted as part of the application to register, and determined that there was an up to date insurance policy in place for this proposed designated centre.

Judgment:

Compliant

Closing the Visit

At the close of the inspection a feedback meeting was held to report on the inspection findings.

Acknowledgements

The inspector wishes to acknowledge the cooperation and assistance of all the people who participated in the inspection.

Report Compiled by:

Karina O'Sullivan
Inspector of Social Services
Regulation Directorate
Health Information and Quality Authority