



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

## Issued by the Chief Inspector

Name of designated centre:	St Augustine's Residential
Name of provider:	St John of God Community Services CLG
Address of centre:	Co. Dublin
Type of inspection:	Short Notice Announced
Date of inspection:	24 May 2023
Centre ID:	OSV-0001465
Fieldwork ID:	MON-0039130

## About the designated centre

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

The designated centre is based in a suburban area of South Dublin and provides part-time residential services for up to four children. It operates for four days and nights each week during school-term times. The centre is comprised of one detached four bedroom house with a modest sized driveway to the front and a shared garden space to the rear. A staff team of social care workers provides care and support to residents and they are supported by a person in charge. The person in charge is responsible for one other designated centre and divides their working hours between this centre and the other centre.

**The following information outlines some additional data on this centre.**

Number of residents on the date of inspection:

3

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
Wednesday 24 May 2023	12:30hrs to 17:00hrs	Karen Leen	Lead

## What residents told us and what inspectors observed

This short notice announced inspection took place to assess the provider's compliance with Regulation 27: Protection against Infection and the associated National Standards for Infection Prevention and Control (IPC) in Community Settings (HIQA, 2018).

The designated centre provided a service for three young people, (who attend the organisation's school), for four days and nights a week during the school term. The inspector also got the opportunity to meet with three residents on their return from school, there was one vacancy in the centre at the time of the inspection. The inspector also observed the care and support interactions between residents and staff at intervals throughout the inspection.

The inspection was facilitated by the person in charge, the inspector met and spoke with staff who were on duty throughout the course of the inspection. The inspector observed staff using several measures to reduce the risk of transmission of infection. This included regular hand washing and the adhering to safe food practices in the preparation of food.

The inspector completed a full walkthrough of the centre with a staff member on duty. The premises was found to be visibly clean and tidy throughout. Environmental cleaning was managed by the staff team, with support from a designated domestic staff assigned to the centre for a number of hours per week. The centre was decorated and furnished in a manner that suited the needs and preferences of the residents who availed of the service. The provider had identified that the kitchen presses required upgrading and replacement, the provider had identified a time line for the works to be completed.

Residents' bedrooms were decorated in line with their preferences and wishes, and the inspector observed the rooms to include personal belongings of the residents choice and posters in line with their interests such as movie and computer game posters. While the main communal areas of the centre had undergone paint refurbishment, the bathroom ceiling required painting. The person in charge had identified this issue and made a request to senior management and maintenance. A time line was set for the end of the month to complete with other minor maintenance tasks for the centre.

There was evidence that residents had received education and information on infection prevention and control. IPC matters such as hand hygiene, cough etiquette and the safe food preparation were discussed at regular young persons forum held in the centre.

The inspector had the opportunity to meet with residents on their return from school. One resident spoke to the inspector about how the staff team were helping them with a dietary support plan and that the plan although new was going well.

Residents spoke about the importance of washing their hands when they return to the centre from an activity or when they need to prepare food. The inspector observed residents preparing snacks before going out for the evening and using the appropriate equipment during the preparation. One resident had a known food allergy and was supported by staff to maintain safe practices within the centre to reduce and minimise possible cross contamination during meal preparation. One resident told the inspector that they were happy in the centre and the inspector observed communications with residents and staff to be warm, friendly and informative about the plans for the evening.

The remainder of this report will present the findings from the walk-around of the designated centre, discussions with staff and a review of the providers' documentation and policies and procedures in relation to infection prevention and control. The findings of this review will be presented under two headings before a final overall judgment on compliance against regulation 27: Protection against Infection is provided.

## Capacity and capability

It was found that governance and management arrangements were ensuring infection prevention and control measures were consistently and effectively monitored in the centre. There were auditing systems in place to ensure that care and support practices were consistent with the National Standards.

The person in charge had developed a number of local procedures in relation to infection prevention and control, which ensured greater oversight in the centre. There was a local policy in place in relation to household cleaning standards which provided guidance for all staff on topics such as what cleaning products to be used within each specific area of the house. Staff had access to a comprehensive range of training opportunities, and had undertaken training in areas such as hand hygiene, IPC training, and food safety. There were arrangements in place to ensure staff engaged in refresher training and developed and maintained the required knowledge to implement effective infection prevention and control measures.

There was a clear organisational structure to manage the centre, with a suitably qualified and experienced person in charge who reported to senior management. The person in charge was found to be present in the centre, knew the residents and their support needs and was available to staff as required. Staff spoken to on the day of the inspection said they felt supported in their role.

There were systems in place for reviewing and monitoring the service ensure that a high standard of care, support and safety was being provided and maintained. The provider had carried out six-monthly unannounced reviews of the quality and safety of care and support in the centre which took into account infection prevention

control measures. Each review included an action plan, with a time frame for completion. The person in charge had completed a quality enhancement plan (QEP) for the centre, which maintained outcomes and time frames from audits completed in the centre. The inspector found this document to be reviewed regularly and discussed at each staff meeting.

The provider had completed an annual report of the quality and safety of care and support in the designated centre and this was made available to residents and their families who had been consulted in the process. Feedback gathered from residents' and families which was positive in relation to the service provided in the centre. Families stated "the house is kept very clean, spotless and a warm homely feel to it".

Risks in relation to infection prevention and control had been identified and assessed. There were suitable control measures in place for any identified IPC risk which did not reduce residents independence but increased education and learning. There was sufficient staff available to meet the needs of resident and safely provide care and support. At the time of the inspection there was one whole time staff vacancy, however this vacancy was covered with regular relief and agency and the person in charge had oversight of their training needs. The provider and person in charge had completed recruitment campaign based on the specific needs of the residents. The person in charge carried out staff supervision meetings in line with the organisation's policy. A review of supervision records and team meeting minutes found high level of good quality meetings where staff discussed infection prevention and control matters and where necessary, highlighted concerns or suggestions to the person in charge. There were clear contingency plans in place to ensure continuity of care and service provision in the event of staff absences associated with infection control risks.

## Quality and safety

With regards to infection prevention and control, the registered provider and management team were ensuring that the service provided was safe and in line with National guidance for residential care facilities. It was evident that infection control management was part of the overall risk management arrangements in the centre and that the quality of care was regularly reviewed to ensure compliance with best practice and the National Standards for infection prevention and control in community services (HIQA, 2018).

The provider had taken measures to improve the premises and had set out time frames for the completion of identified maintenance work. Painting and decorating of the communal and residents bedrooms had been completed and the house had homely atmosphere that meet the assessed needs of the residents. The premises was visibly clean and tidy in all areas. Staff were observed cleaning areas of the

centre in line with the cleaning checklist in place, and used a colour coded system of cloths and mops. The person in charge had developed a local guidance document in relation to centre specific cleaning tasks which was utilised by staff in the centre.

To reduce the risk of infection spread, the centre was additionally equipped with many physical facilities. The centre had adequate hand-washing facilities in the house and there was a good supply of hand-sanitising gel located at points and through-out the centre. There were suitable arrangements in place to manage laundry in a way that minimised cross-contamination. There was a designated utility room that was equipped with a washing machine and dryer, hand wash facilities, and appropriate PPE. The utility room was found to be clean, free of clutter and neatly organised.

Documentation relating to residents was also reviewed during this inspection, primarily from an infection prevention and control perspective. The resident's health, personal and social needs were regularly assessed, and support plans were developed based on the residents assessed needs. The assessments and support plans viewed during the inspection were up-to-date, informative and demonstrated that residents' were consulted with as part of the process.

The person in charge had developed plans to prevent and manage potential outbreaks of infection in the centre. The plans were detailed and included arrangements such as access to PPE, supporting residents to isolate, maintaining staffing levels, waste and laundry management.

## Regulation 27: Protection against infection

The purpose of the inspection day was to monitor the centre's levels of compliance with Regulation 27 and the National Standards for infection prevention and control in community services (HIQA, 2018). The provider was able to clearly demonstrate how they were ensuring they had implemented the national standards for infection prevention and control in accordance with regulation 27. This was evident by the following:

- There was evidence of quality assurance audits being performed on a regular basis to check on the safety and effectiveness of the care being provided. This included the annual review for 2022, which identified areas for improvement, in particular to refurbishment of the kitchen unit.
- Works had been carried out throughout the centre to improve the communal areas, including painting and new carpet.
- There was good local oversight of infection control risks in the centre by the person in charge who carried out regular IPC focused audits. The centre fostered a culture of shared learning with local audits completed by staff members and discussed at monthly staff meetings.
- There were effective systems in place for workforce planning that ensured there were suitable numbers of staff employed and available with the right



skills and expertise to meet the centre's infection prevention and control needs.

- The staff team were up to date in IPC training. Staff members spoken with had a good knowledge of standard and transmission-based precautions. Staff were seen adhering to standard precautions throughout the day.
- Residents were informed and teaching/guidance was in place regarding infection transmission. This support was evident in the residents care plans which were comprehensive and personalised and created in consultation with the individual resident.
- The premises and the environment was visibly clean and well maintained. Schedules and local policies were in place to ensure that all aspects of the premises was regularly cleaned and deep cleaned.
- The kitchen unit were observed to require upgrades and improvements in order to promote IPC arrangements. This had been identified by the provider, through their auditing systems and a schedule of work is in place, which are due to occur within a reasonable time-frame and therefore not identified as a regulatory non compliant finding on this inspection.

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