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Finvola, OSV-0007767, 20 October 2020

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

Issued by the Chief Inspector

Name of designated centre:	Finvola
Name of provider:	GALRO Unlimited Company
Address of centre:	Laois
Type of inspection:	Short Notice Announced
Date of inspection:	20 October 2020
Centre ID:	OSV-0007767
Fieldwork ID:	MON-0030233

About the designated centre

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

Finvola comprises of a large detached dormer dwelling with an additional 2-bed bungalow on the same site on the outskirts of a town. One building is designed for single occupancy and the other has capacity for six children with three bedrooms on the ground floor and three on the first floor. The main house which is currently the only one occupied, has three living rooms, and a playroom in addition to a kitchen dining room. There is a large car park to the front of the centre and to the rear is a patio and garden with children's play equipment. Children who live in this centre present with moderate or severe intellectual disability, autism or complex medical conditions. Children who live in Finvola may be in statutory care. This centre is open on a 24 hour a day, year round basis. When fully occupied there are eight staff on duty during core daytime hours and two waking night staff on duty at night along with sleep over staff. The children are supported by a team of social care workers and support workers and there is a centre manager full time who provides support to the person in charge.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	5
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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
Tuesday 20 October 2020	10:00hrs to 16:00hrs	Tanya Brady	Lead

What residents told us and what inspectors observed

There were five children living in the centre on the day of inspection. The inspector met with two over the course of the day. Three children had been in school when the inspector arrived and the other two are supported at home for the moment. Over the course of the day there were a number of both planned and spontaneous activities observed to take place and the children who met the inspector were happy and relaxed in their home.

One resident was seen to relax with staff after their breakfast and was interested in having the inspector in their kitchen. They were seen to be supported by staff to go out into the garden for a walk and to have a look at the play equipment. The weather on the day of inspection was wet and windy however during the dry spells the children were seen to be supported to access the garden if they wished.

Another child after school was supported by staff to change out of school clothes and then to be supported to complete homework. Staff were skilled in supporting the child to get to the end of their reading and written tasks. They supported them with changes of position and other strategies to maintain their attention to their task and were positive with them throughout.

This inspection took place in the middle of the COVID-19 pandemic and as such the inspector adhered to national guidance and best practice including regarding the wearing of face masks and social distancing.

Capacity and capability

This designated centre is newly registered and this was the first inspection following children taking up residence. Overall the inspector found that the registered provider and the staff team in place had ensured that the children living in this designated centre received a good quality service. This inspection found evidence, across the regulations reviewed, of a service that supported and promoted the health, personal and social needs of the children.

There was a suitably qualified and experienced individual in the post of person in charge. There were good reporting systems evident between the person in charge, the centre manager and the staff team. The registered provider and person in charge had arrangements in place to monitor the service provided and a number of audits had already taken place. One unannounced visit to the centre to review the quality and safety of care provided to residents had been carried out with an initial action plan in place following this. Where audits had occurred, any issues that were highlighted were acted upon in a timely manner. This provided assurances to the

inspector that the provider had appropriate systems in place to monitor the service provided and ensure positive outcomes for the children. Staff meetings were held regularly and the agenda items were found to include a comprehensive review of matters that pertained to the children living in the centre. The persons in charge for all of the providers centres within this geographical area, also met on a regular basis and there was evidence of shared learning and support structures in place.

The registered provider had put in place a staff team who had been appropriately recruited, supported and supervised to provide care and support to the children living in the centre. The staff team was complete and there were contingency arrangements in place for possible periods where staff may be unavailable. The inspector spoke to staff during inspection and reviewed information relating to children's needs. In addition rosters were reviewed, the inspector was satisfied that appropriate workforce levels were provided to meet the children's needs at the time of this inspection. From review of the roster and discussion on the day the inspector also noted that staff had designated roles on each shift such as taking the lead for medication, driving the centre vehicle and one staff member was the designated fire officer in the centre.

The children were still settling into their new home although a number of them had moved from another centre managed by the provider so some of the staff team were familiar with them. Other children however, had recently moved to the centre and staff were supported in getting to know them, by both the centre manager and the person in charge. Staff members were observed by the inspector to be warm, caring, and respectful in all interactions with the children in the centre. Each staff member who spoke with the inspector was knowledgeable in relation to their responsibilities and children's care and support needs. All staff in the centre had completed training in line with residents' needs and were in receipt of support and supervision provided by the person in charge and centre manager. All staff had completed training in infection prevention and control and other relevant training during the COVID-19 pandemic. There were systems in place to measure training competency which comprised of knowledge spot checks and observation of practice.

The registered provider had put clear transition plans in place for the children in supporting them to move into this centre. The children had a contract for the provision of services in place between their representatives and the registered provider. This contract also outlined any services to be provided or costs that may be occurred. There were compatibility assessments in place for each child regarding who they shared their home with and these had been completed for each new admission.

The children were encouraged and supported to raise complaints if they choose to do so, and arrangements were in place for any complaints to be resolved locally where possible. On the day of inspection no complaints had been received however there were 16 compliments recorded from a number of sources relating to the quality of care provided to the children in the centre. The provider had clear procedures relating to complaints and a complaints log was maintained.

Regulation 14: Persons in charge
There was a suitably qualified and experienced individual in the post of person in charge. They were person in charge for another centre also however were supported in their role for this centre by a full time centre manager.
Judgment: Compliant
Regulation 15: Staffing
The numbers and skill mix of staff were suitable to meet the assessed needs of the children. The staff were familiar with the children's needs and seen to interact with them in a respectful and dignified manner.
Judgment: Compliant
Regulation 16: Training and staff development
Staff had access to training and refreshers in line with the children's needs. Staff were in receipt of formal supervision and support from the person in charge and centre manager. There were additional systems in place to ensure staff knowledge remained up to date and that they demonstrated an ability to use their knowledge in practice.
Judgment: Compliant
Regulation 19: Directory of residents
The directory of residents for this centre contained all information as required by the regulations in paragraph (3) of Schedule 3.
Judgment: Compliant

Regulation 23: Governance and management

The inspector found that there were appropriate governance and management structures in place with clear lines of authority and accountability. Audits had been carried out in key areas such as health and safety, incidents, risk management and medicines. The registered provider had carried an unannounced visit to the centre to carry out a review of the quality and safety of care provided to the children.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

The children's admissions were in line with the statement of purpose. The children had written contracts of care outlining the care, welfare and support to be provided, the services to be provided and any costs that may be incurred.

Judgment: Compliant

Regulation 31: Notification of incidents

Incidents, accidents and all adverse events were recorded and responded to as appropriate. All notifications were made to the chief inspector of social services as required by the regulations.

Judgment: Compliant

Regulation 34: Complaints procedure

Policies and procedures were in place in relation to complaints. A complaints officer for the centre and the organisation were in place and the resident and their representatives were aware of how they could make a complaint if required. A complaints log was maintained outlining the nature of any complaints made, any action taken and whether individuals were satisfied. A record was kept of compliments received and also of comments made that were managed as potential complaints.

Judgment: Compliant

Quality and safety

Overall the inspector found that this centre was a warm and comfortable home in keeping with the ethos of the provider. The staff team were attempting to support all the children to engage in meaningful activities despite curtailments in place as a result of the COVID-19 pandemic.

The premises was purpose built and was found to be spacious, well designed, and meeting residents' specific care and support needs. Externally there was a large well maintained patio and garden containing a trampoline and other play equipment. The children all had their own bedroom which was decorated in line with their wishes and preferences and included their own art work on the walls or their favourite colours reflected in the decor. Each child had a personalised notice board outside their bedroom door which displayed information that was personal to them and was supported by symbols and pictures to aid understanding. The children had plenty of storage for their personal items including a locked area should they wish to use it. All doors into the house were wide and accessible and internally the hallways and circulation spaces were spacious.

For one child who had very recently moved into the centre the person in charge and staff team were in the process of developing a personal plan. For all others there were personal plans in place which had been completed since the children had moved into this centre. While the goals outlined were broad and for some therapy focused, these were broken into 'fun' weekly goals and a 'wow' goal for each week. Clear records were kept of activities in place to support children in moving towards their overall goals. The children's preferred activities were highlighted in their personal plans as were the supports they required to engage in these activities.

All children in this centre had detailed communication passports in place which explained and outlined the method of communication used by each child. In addition, they provided guidance to others on interpreting communication cues and gave comprehensive examples to support others in interpreting behaviours they may see, as having communicative intent. There was good use of symbols to aid understanding and visual timetables and choice making systems were also in place. The person in charge and inspector discussed on the day of inspection better consistency in the use of symbols and how this would support increased consistency of understanding of language for the children.

Healthcare needs were appropriately assessed and support plans were in line with these assessed needs. The children had access to appropriate health and social care professionals in line with their assessed needs with one attending an occupational therapy appointment after school on the day of inspection. In addition there was access to dental, GP and consultant services of their choice. The children were supported to attend specialist medical appointments and hospital clinics as required, and there were up to date recommendations from these, that staff were familiar with and supported the children in complying with.

The person in charge and centre manager were promoting a positive approach to responding to behaviours that challenge. There were detailed behavioural support plans available, with clear systems for assessing their effectiveness, or if they were being adhered to. There were regular reviews of behaviours that challenge including what the most frequent behaviour observed was, and the likely trigger for that behaviour. The staff team then discussed what could be implemented or changed to help support that child in positively managing their behaviour. The inspector found that there were some restrictive practices on the day of inspection which had been included on the register in place in the centre. There was clear evidence that a number of these had been prescribed by a health and social care professional. The person in charge had a clear system in place for the assessment, review and management of restrictions that were in place and there was evidence that following review some had been reduced or in one instance removed. Where a clear Perspex screen had been in place in front of the television screens these had now been removed.

The inspector found that the provider and person in charge were proactively protecting the children in the centre. They had appropriate policies and procedures in place and staff had access to training to support them to carry out their roles and responsibilities in relation to safeguarding. Clear and detailed intimate care plans were in place to guide staff when supporting the children with personal care and each plan had a safeguarding statement built into the guidance which the inspector saw in practice on the day. There are currently no formal safeguarding plans in place in the centre but the registered provider had ensured that all policies and associated procedures to guide staff were in place and had been reviewed within the last three years.

The children in this centre were protected by policies, procedures and practices relating to health and safety and risk management. Risk management systems were effective, centre specific and considered. Individual risks were monitored on a regular basis and the frequency of this review was guided by the level of severity of the risk with orange and red rated risks reviewed more frequently than green rated risks. There was a detailed and current risk register which included clinical and environmental risks and pertinent plans and environmental adaptations made to meet the complex needs of the children. Any changes in either the children's assessed needs or as a result of an incident or accident were promptly responded to.

There were suitable arrangements to detect, contain and extinguish fires in the centre. There were bins behind a door into the utility room and a picnic table against a door into the garden and both of the doors blocked were fire exits, however these were moved and sorted on the day of inspection. Where oxygen was used for one of the children it was stored under the stairs in the hallway. Given that the stairs is the only exit route from upstairs the inspector asked that this location be reviewed by a suitably qualified fire professional which the person in charge and provider arranged for. Suitable equipment was available and there was evidence that it maintained and regularly serviced in both of the houses at this centre. The children had personal emergency evacuation procedure. Fire procedures were available in an accessible child friendly format and on display. Staff had

completed fire training and fire drills were occurring.

The registered provider and person in charge had policies and procedures in place to keep children protected from infection. These had been reviewed and updated as required to include supports and systems required for COVID-19. There was accessible and child friendly COVID-19 information on display and records were maintained for temperatures for all children and staff. Additional cleaning schedules were in place and adhered to, for both in the centre and for toys and the play equipment outside. Cleaning schedules were in place for all specialised support equipment. Staff were observed to wear personal protective equipment as per national guidance and there were designated sinks for hand hygiene and easy access to hand sanitising gels. There was a 'stop, pause and check' system in place for all who entered the centre and both staff meetings and management meetings had COVID-19 as a standing agenda item.

Regulation 10: Communication

Each child was supported by a comprehensive and personal communication plan. Where an alternative or augmentative communication system was in place such as use of direct gaze with symbol based systems these were used as appropriate.

Judgment: Compliant

Regulation 17: Premises

Overall, the inspector found that there was adequate private and communal space for the children including three sitting rooms and a large play room. The garden and outdoor areas well well maintained and contained play equipment as required. The centre decor was child friendly and the physical environment was clean.

Judgment: Compliant

Regulation 26: Risk management procedures

The safety of the children was promoted through appropriate risk assessment and the implementation of the centres' risk management and emergency planning policies and procedures. There was evidence of incident review in the centre and systems in place for learning from adverse incidents.

Judgment: Compliant

Regulation 27: Protection against infection

There were suitable systems in place to protect children from the risk of infection in the centre. These included robust systems in place for the management of COVID-19.

Judgment: Compliant

Regulation 28: Fire precautions

There were suitable arrangements to detect and extinguish fires in both houses comprising the centre. Adjustments were completed on the day of inspection in relation to access to fire exits in the centre. There was documentary evidence of servicing of equipment in line with the requirements of the regulations. Staff had appropriate training and while fire drills were held regularly. Children's personal evacuation plans were in place. The provider was seeking guidance regarding the safe storage of oxygen.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

All children had personal plans in place and for one child who had recently moved into the centre their plan was under development. While goals set were very broad they were reflective of their social, health and psychosocial needs. There was evidence that they were reviewed on a weekly basis and each child was supported by a key worker who took responsibility for their daily and weekly activities.

Judgment: Compliant

Regulation 6: Health care

The children's healthcare needs were identified, monitored and responded to promptly. The children had access to health and social care professionals and to specialist medical professionals in line with their assessed needs.

Judgment: Compliant

Regulation 7: Positive behavioural support

The provider and person in charge promoted a positive approach in responding to behaviours that challenge. The children had positive behaviour support plans which clearly guided staff to support them to manage their behaviour. Staff who spoke with the inspector were found to have the up-to-date knowledge and skills to support children to manage their behaviour.

The use of restrictive practices were in place to promote the safety of the children and there was evidence they were frequently reviewed

Judgment: Compliant

Regulation 8: Protection

A safeguarding policy was in place which gave clear guidelines for staff on procedures if a concern arose. Details of the designated officers were visible in an accessible format throughout the centre. Comprehensive detailed intimate care plans had been developed for the children.

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 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 19: Directory of residents	Compliant
Regulation 23: Governance and management	Compliant
Regulation 24: Admissions and contract for the provision of services	Compliant
Regulation 31: Notification of incidents	Compliant
Regulation 34: Complaints procedure	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 17: Premises	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 27: Protection against infection	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant