

eDeposit Ireland

DC 14, OSV-0005315, 11 July 2018

Item Type	report
Citation	Ireland. Health Information and Quality Authority, 'DC 14, OSV-0005315, 11 July 2018', [report], Health Information and Quality Authority, 2019-02-04, Disability Services Report, Disability, Compliance Monitoring Inspection report Designated Centres under Health Act 2007, as amended
Publisher	Health Information and Quality Authority
Rights	Y
Download date	2026-05-13 22:29:12
Link to Item	https://hdl.handle.net/20.500.14765/87758



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

Name of designated centre:	DC 14
Name of provider:	St John of God Community Services Company Limited By Guarantee
Address of centre:	Kildare
Type of inspection:	Announced
Date of inspection:	11 July 2018
Centre ID:	OSV-0005315
Fieldwork ID:	MON-0021978

About the designated centre

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

The provider had a statement of purpose in place outlining that they provided 24 hour residential care to persons with intellectual disabilities. The providers statement of purpose highlights that care is always provided in a respectful and person centred manner in their services.

This designated centre consisted of two buildings at the time of inspection which provided care for up to eight residents. The provider indicated on this inspection that they intended to apply to add another building to the centre and increase in size and number. This new building was also inspected as a site visit as part of this inspection and was found to meet the safety and suitability premises requirements of the regulations. A new application and associated documentation was required to be submitted to HIQA.

The following information outlines some additional data on this centre.

Current registration end date:	02/09/2021
Number of residents on the date of inspection:	8

How we inspect

To prepare for this inspection the inspector or 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
11 July 2018	09:00hrs to 17:00hrs	Conor Brady	Lead

Views of people who use the service

Residents spoken with as part of this inspection were found to be very comfortable and relaxed. Residents informed the inspector that they loved their homes and were very happy and content with the staff who supported them. Some residents had transitioned out of larger settings to these community houses and were very positive and happy with their moves. Residents told the inspector they would never move back and would not change anything with their service. Residents permitted the inspector to join them for breakfast and a calm and relaxed atmosphere was observed. Residents were observed to be happy in each others company.

A family member was spoken with as part of the inspection. They were complimentary of the service that their relative received.

All residents spoken with and communicated with presented as very happy and well cared for over the course of this inspection.

Capacity and capability

There were good governance and management arrangements in place. The person in charge in place was suitably experienced, competent and knowledgeable. Monitoring and oversight systems were in place to ensure good quality of care delivery. Residents were supported very well and staff teams were in place that demonstrated competence and professionalism in their roles.

Supervision and performance management was in place and the management team had completed auditing, unannounced visits, practice reviews and quality enhancement planning that was improving services.

Overall the provider, person in charge, management team and staff were found to be delivering a good quality service to the residents in this designated centre.

Regulation 14: Persons in charge

The person in charge was qualified, competent and very knowledgeable.

Judgment: Compliant

Regulation 15: Staffing
There was an appropriate number and skill mix of staff in place.
Judgment: Compliant
Regulation 23: Governance and management
Governance and management systems were clear and effective in monitoring service delivery to the residents.
Judgment: Compliant
Regulation 3: Statement of purpose
A statement of purpose was in place that reflected the service delivered at the time of inspection.
Judgment: Compliant
Regulation 31: Notification of incidents
Incidents were appropriately notified and were followed up by the provider.
Judgment: Compliant
Regulation 34: Complaints procedure
Complaints procedures and systems were evident, clearly displayed and followed up.
Judgment: Compliant

Regulation 4: Written policies and procedures

Policies and procedures were in place and met the requirements of the regulations.

Judgment: Compliant

Quality and safety

The quality of care delivery was found to be person centred and professional. Residents were found to be living meaningful lives and were well supported by staff teams who knew their individual needs, wishes and preferences very well. Residents were involved in regular activities, social outings, holidays and presented as very comfortable with the staff team who supported them.

Residents were found to be calm and comfortable in their environment and were observed coming and going as they chose. Professional staff were observed on duty providing good care in accordance with residents assessed needs.

The inspector reviewed residents care plans, spoke with residents and staff and reviewed measures in place to ensure residents social, health and quality of life needs were being met. Residents had regular and consistent access to allied health professionals and were supported to enjoy best possible health. There was good evidence of choice and consultation in residents lives.

The inspector found that there were measures in place to monitor and manage risk and the provider was found to be responsive in instances whereby incidents occurred. Safeguarding measures were in place to protect the residents from abuse and the provider demonstrated learning from safeguarding incidents that occurred in the centre and implemented improved control measures resulting from same. For example, there was extensive follow up and appropriate investigation of a case of alleged financial abuse which was resolved.

Overall a good quality and safety culture was evident in the centre on this inspection.

Regulation 10: Communication

Residents were communicated with in a caring and respectful manner. Technology

was adopted and utilised to support residents with communication difficulties.
Judgment: Compliant
Regulation 11: Visits
Visits were welcome and the inspector observed a family member enjoying a planned visit on the date of inspection.
Judgment: Compliant
Regulation 12: Personal possessions
Residents had ample room and space for their personal possessions. Residents homes and room were well decorated to personal tastes.
Judgment: Compliant
Regulation 13: General welfare and development
Residents welfare and development needs were well cared for and supported.
Judgment: Compliant
Regulation 17: Premises
The premises inspected were suitable to the residents assessed needs and were very homely.
Judgment: Compliant
Regulation 18: Food and nutrition
Residents were observed eating nutritious meals in line with their assessed support needs. Residents had ample choice and were observed enjoying a relaxed meal time

experience.
Judgment: Compliant
Regulation 26: Risk management procedures
Risks were identified, measured and managed within the designated centre.
Judgment: Compliant
Regulation 28: Fire precautions
The fire precautions and safety measures reviewed were found to be appropriate.
Judgment: Compliant
Regulation 29: Medicines and pharmaceutical services
Medicines management policies, procedures and protocols were found to be secure, safe and in line with best practices requirements.
Judgment: Compliant
Regulation 5: Individual assessment and personal plan
Personal plans reviewed were found to be clear, comprehensive and up to date.
Judgment: Compliant
Regulation 6: Health care
Residents health care needs were well supported and facilitated in this centre. Health care plans were

Judgment: Compliant

Regulation 8: Protection

Measures were in place to protect residents from all forms of abuse.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

Regulation Title	Judgment
Capacity and capability	
Regulation 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 23: Governance and management	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 31: Notification of incidents	Compliant
Regulation 34: Complaints procedure	Compliant
Regulation 4: Written policies and procedures	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 11: Visits	Compliant
Regulation 12: Personal possessions	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 18: Food and nutrition	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant