



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

Issued by the Chief Inspector

Name of designated centre:	Cornerstones
Name of provider:	Praxis Care
Address of centre:	Louth
Type of inspection:	Unannounced
Date of inspection:	13 September 2022
Centre ID:	OSV-0001909
Fieldwork ID:	MON-0035920

About the designated centre

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

This is a service providing residential care and support to four adults with disabilities. The centre comprises a large five-bedroom single-story detached house in Co. Louth and is near a number of large towns and villages. Each resident has their own large bedroom (all en-suite), which are decorated to their style and preference. Communal facilities include a spacious, fully furnished sitting room, a large well-equipped kitchen cum dining room, a utility facility, an entrance lobby, communal bathrooms, and a staff office/sleepover room. There is also an additional small TV room provided. The centre has a large private parking area to the front of the property, and a spacious well maintained private garden area to the rear of the property for residents to avail of. Private transport is provided to residents so as they can avail of trips to town, go on holidays and social outings. The centre is staffed on a twenty-four-hour basis with a full-time person in charge who is supported in their role by three team leaders and a number of support workers.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	4
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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 (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 13 September 2022	09:15hrs to 15:00hrs	Eoin O'Byrne	Lead

What residents told us and what inspectors observed

This was an unannounced inspection carried out to monitor and inspect the arrangements the provider had put in place concerning infection prevention and control (IPC). The inspector met with two out of the four residents and interacted with staff members during the inspection.

The inspector found that residents received appropriate care and support through observations and review of their documented information. Residents were supported to engage in activities of their choosing, and the service's staff team helped residents in a way that promoted their views and rights.

On the day of inspection, two residents were attending their day-service placements. The inspector briefly met with the other two residents who were preparing to go on an outing with the support of staff. The residents were observed to have well-established relationships with the staff members supporting them and enjoy their interactions with their staff. One of the residents was introduced to the inspector by the person in charge. The resident briefly spoke with the inspector about an upcoming holiday that all residents were due to attend in Spain. Some residents had attended a concert the previous weekend, and there were plans for others to go to another in the coming days.

The Inspector found information on infection prevention, control measures, and best practices displayed in the resident's home. Resident meetings were also used to provide them with up-to-date information regarding IPC and ensure residents were informed regarding the COVID-19 pandemic and restrictions. Some residents had also covered effective hand hygiene practices in key-working sessions.

The inspector observed a significant staff presence in the centre and that resources had been allocated to meet the needs of the residents. Staff were observed washing or sanitising their hands as per public health guidance. The infection control measures employed in the service were found to be appropriate and protected the residents.

The review of information found that there were systems in place to respond to and identify IPC risks or breaches in control measures. The provider had identified through their audits that, enhancements were required to the residents' home in order to reduce IPC risks. Significant works were being carried out in the house at the time of inspection, and further works were planned to be completed during the residents' upcoming holiday. These works, when complete, would address the IPC risks identified by the provider.

The inspection found that effective infection prevention and control practices were in place, leading to a high standard of care being delivered to the residents. While aspects of the residents' home required improvements, these issues were being addressed. This demonstrated that the systems in place to raise issues and have

them addressed were working effectively.

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, policies and procedures concerning 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

This inspection found that the governance structures had assured that the provider had effective and quality infection prevention and control practices. The service was led by a person in charge who was the lead person regarding the management of infection prevention and control within the centre. Team leads were responsible for ensuring that IPC measures were being followed each shift and there were systems in place to record and track that these measures were being implemented. The systems ensured that the service was clean. Day and night duty cleaning tasks were completed and enhanced cleaning practices for certain parts of the residents' home were also completed on a regular basis.

The inspector found that, the provider had developed a well-prepared contingency plan. The plan clearly outlined appropriate responses to an infection outbreak, the plan listed appropriate practices relating to identifying, managing, and controlling potential outbreaks. The review of records also demonstrated that the staff team had implemented appropriate procedures when staff or residents had been diagnosed with healthcare-related infections. The practices had led to effective containment, and there had been no outbreaks in the service since 2020.

The inspector spoke with a member of the staff team. They were found to be well informed regarding IPC practices. The staff member spoke of risk control measures in place and systems implemented when there had been identified healthcare infections in the service, for example, increasing the level of personal protective equipment (PPE) being used, effective donning and doffing of the PPE and enhanced cleaning. The staff member also gave a detailed response regarding the management of residents' laundry.

The provider had completed the required reviews and reports regarding the quality and safety of care provided to the residents as per the regulations. The review of these found that infection prevention and control were covered. The inspector also found that the provider had devised policies and procedures regarding infection prevention and control. These policies were in date. Policies were also developed in response to the COVID-19 pandemic, which reflected best practices.

An appraisal of previous and current staffing rosters was completed. There was a consistent staff team in place that knew the needs of the residents. The review also

demonstrated that safe staffing levels were being maintained and adequate staff to complete assigned duties regarding IPC practices.

The staff team was also provided access to appropriate training regarding IPC measures. The provider was also sourcing further training specific to cleaning practices to enhance the skills of those supporting the residents.

Quality and safety

The person in charge and the inspector walked through the residents' home. The person in charge showed the inspector an extension that was near completion. The person in charge also identified the areas that had been recognised as IPC risks, including upgrading resident and staff bathrooms, flooring and tiling in some areas. The works were in progress and were due to be completed in the coming weeks.

The staff team ensured that, the care provided to residents was carried out in a clean environment that minimised the transferring of healthcare-associated infections. There were arrangements in place for cleaning and disinfecting the premises. The review of the existing practices regarding managing residents' laundry demonstrated that it was appropriate. IPC practices and standard precautions were an integral part of each staff members' daily routine and as mentioned previously, staff spoken with demonstrated a good knowledge of procedures and control measures.

During the walk through the centre, the inspector observed that enhancements were required to the storage of mops and mop buckets. These had been stored in a temporary location due to the works. This was brought to the attention of the person in charge, who responded to the issues promptly.

A review of residents' information demonstrated that residents had access to a range of allied healthcare professionals and were supported to attend appointments if required. As noted earlier, residents received information regarding IPC practices or the COVID-19 pandemic through residents' meetings and, on occasion, key-working sessions.

The provider had developed environmental audit tools that reviewed IPC arrangements and identified risks. This was completed monthly. There were clear escalation pathways where any identified issues or risks were presented to the provider's senior management and were responded to. This was also evidenced following a review of the services quality improvement plan.

Following a review of sharps management, the inspector found that some enhancements were required. The person in charge and team leader immediately responded following the discussion, updated the staff's guidance, and sourced a more appropriate sharps bin.

The inspector reviewed a sample of residents' information and found that individual support plans had been developed for residents in response to the COVID-19 pandemic. The inspector was informed that a plan was in place to remove these plans and to store all IPC and COVID-19 information in residents' care plans. This inspector was shown where the relevant information was stored in residents' care plans and was assured that the plans were under regular review and reflected the resident's changing needs.

in addition risk assessments had been developed regarding infection prevention and control issues. These were under regular review and contained appropriate control measures.

Regulation 27: Protection against infection

Overall the provider, person in charge and staff team had adopted and implemented appropriate infection prevention and control practices that safeguarded residents. The provider had systems to monitor and deliver appropriate practices. As noted above, aspects of the residents' home posed infection prevention and control risks. However, these had been identified, and the provider was taking action to enhance the residents' home and address the issues.

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