



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

Issued by the Chief Inspector

Name of designated centre:	Eden Lodge
Name of provider:	Enable Ireland Disability Services Limited
Address of centre:	Clare
Type of inspection:	Unannounced
Date of inspection:	23 September 2022
Centre ID:	OSV-0002032
Fieldwork ID:	MON-0037970

About the designated centre

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

Eden Lodge is run by Enable Ireland Disability Services Limited. The centre is located on the outskirts of a town in Co. Clare and provides respite care for up to six male and female residents who are under the age of 18 years and have an intellectual disability. The centre comprises of one large two-storey dwelling, which provides residents with their own bedroom, en-suite facilities, shared bathroom, sitting rooms, kitchen and dining area, utility and access to an enclosed garden space. Staff are on duty both day and night to support residents who avail of this service.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	2
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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
Friday 23 September 2022	10:30hrs to 17:00hrs	Cora McCarthy	Lead

What residents told us and what inspectors observed

This was an unannounced monitoring inspection. Overall, the inspector found that the children in this centre were supported to enjoy a good quality of life and to have meaningful relationships in their local community. The inspector observed that the children were consulted with in relation to the running of the centre and played an active role in decision-making within the centre. It was a person centred service.

On arrival at the centre, the person in charge guided the inspector through the infection prevention and control measures necessary on entering the designated centre. These processes included hand hygiene, the use of a face mask and, temperature check.

There were two children availing of respite however, they were at school so the inspector took the opportunity to have a full walk through of the centre and to review all documentation. One child returned in the afternoon and spent time with the inspector chatting about the service and what they liked about it. The child had limited verbal ability but was able to mention some of the activities they did in Eden Lodge such as having their nails painted and using their electronic tablet. The child also said that they enjoyed visiting Eden Lodge for respite and going out for a drink to a cafe with staff. Through facial expressions and gestures the inspector was able to see that the child they met with was happy in the centre. For example, they indicated their contentment in the centre through playful behaviour and smiling. The second child wasn't coming into the respite service until later in the evening so the inspector did not have opportunity to meet them.

Eden Lodge is decorated and furnished to a high standard and is homely and comfortable. When the inspector arrived there was a staff member cleaning the house, washing floors and doing laundry. Overall, the house was clean, the inspector noted that the sitting room was recently painted and, the person in charge informed the inspector that new curtains had also been bought for the sitting room. There was a communication board in the kitchen that had a visual menu and an activities planner for the week. It also had a visual emotion chart so that children could indicate to staff how they were feeling.

The provider had systems in place to ensure the children led meaningful life-styles during their respite stay and also ensured that they were supported by staff who knew them and their needs very well. They were all supported to attend school and engage in their local community. The children did numerous activities including baking, beauty therapy, foot spa and outings to a cafe or restaurant.

The rights of the children were further upheld in the centre in that they had a key worker to advocate for them. The children were encouraged and supported around active decision-making and social inclusion. They participated in weekly discussions where activities and other matters were discussed and decisions made.

The person in charge told the inspector that since the pandemic, the centre was operating at a lower bed capacity and this was working well for both the children and the staff team. The person in charge told the inspector that staff were regularly in contact with children's families and had a very good rapport with them. This had a positive impact on the quality and safety of care that residents received during their stay.

The centre was warm, clean and comfortable. The children had their own bedroom and seemed happy in the centre. There were fire safety arrangements in place such as fire extinguishers and fire blankets, a fire detection and alarm system panel and, emergency lighting.

In summary, the inspector found that the children's well-being and welfare was maintained to a good standard and that there was an evident person-centred culture within the designated centre.

The next two sections of the report present the findings of this inspection in relation to the governance and management arrangements in place in the centre and how these arrangements impacted on the quality and safety of the service being delivered to each child living in the centre.

Capacity and capability

The governance and management systems in place in this centre ensured that the care and support provided to the children was to a good standard and safe. There was a clearly defined management structure that identified the lines of authority and accountability for all areas of service provision. The person in charge had the necessary skills and qualifications to carry out the role. The person in charge ensured all the requested documentation was available for the inspector to review during the inspection.

On the day of inspection the provider had ensured that staff numbers and skill mix at the centre were in line with the assessed needs of the children and with the statement of purpose. The staff members with whom the inspector spoke with were very knowledgeable around the children's assessed needs. For example they were very aware of the children's methods of communication and the visual tools in place to support the children.

There was a training matrix available for review and the inspector noted that mandatory training had been completed by staff.

Clear management structures and lines of accountability were in place. The provider had also undertaken an unannounced audit of the service in Dec 2021 and June 2022. The provider had also completed an annual review of 2021 and all audits completed had an action plan to improve the quality of care and support in the centre. The audits reviewed staffing, quality and safety, safeguarding and a review

of any adverse events or incidents. The provider was effectively using the data it collected. For example, in areas highlighted for improvement by the provider it was noted that one action was to follow up and complete refresher-review of behaviour management to ensure consistency of approach and awareness for all staff. There was also an action to recruit staff to fill a vacancy that had arisen. On the day of inspection all actions were completed or actively being addressed. Following review the inspector also noted that the actions from the previous HIQA inspection had been completed.

There was an effective complaints procedure in place in an accessible format. There were no open complaint at the time of inspection.

The registered provider had a written statement of purpose in place for the centre, which contained all information required under Schedule 1 of the regulations.

During the inspection incidents records were reviewed and it was noted that the person in charge had notified the Chief Inspector of incidents that had occurred in the designated centre.

Regulation 14: Persons in charge

The person in charge worked full-time, had the required qualifications, demonstrated the relevant experience in management and ensured effective governance, operational management and administration of the centre. The person in charge was very responsive to the inspectors requests and had all documentation available for review.

Judgment: Compliant

Regulation 15: Staffing

The provider had ensured that the number, qualifications and skill mix of staff was appropriate to the number and assessed needs of the children, the statement of purpose and the size and layout of the designated centre. The children received continuity of care and support from a regular, core staff team who were familiar with their needs.

Judgment: Compliant

Regulation 16: Training and staff development

The person in charge had a training matrix for review and the inspector noted that all staff had received mandatory training. Discussions with staff indicated that staff were supported to access mandatory training in line with the provider's policies and procedures in areas such as safeguarding, manual handling, positive behaviour management and fire safety. There was significant training completed by staff in relation to protection against infection such as hand hygiene training, breaking the chain of infection, respiratory hygiene and cough etiquette and, infection prevention control training. .

Judgment: Compliant

Regulation 23: Governance and management

The provider had ensured clear management structures and lines of accountability were in place. The designated centre was resourced to ensure the effective delivery of care and support to the children in accordance with the statement of purpose. Bi-annual unannounced audits had been completed and an action plan drawn up. The audits of the service included a family survey to ascertain the views and opinions of the children's family on the quality of care and support received by the child. The formal survey had not been completed. However, there was evidence of positive feedback given verbally to staff and to the person in charge as documented in phone call records.

Judgment: Compliant

Regulation 3: Statement of purpose

The registered provider had a written statement of purpose in place for the centre, which contained all information required under Schedule 1 of the regulations. It was reviewed regularly and was available to the inspector when requested.

Judgment: Compliant

Regulation 31: Notification of incidents

The person in charge notified the Chief Inspector of incidents that occurred in the designated centre. The person in charge had also submitted quarterly notifications in respect of any restrictive practice used or non serious injuries sustained. The inspector reviewed all incidents and was satisfied that the person in charge had met

all reporting requirements and responsibilities.

Judgment: Compliant

Regulation 34: Complaints procedure

The provider had an effective complaints procedure in place which was accessible to the children. It was noted that complaints were mostly resolved locally. The provider was required to ensure that feedback from the complainant was obtained and recorded; it had not been recorded. However, this was noted on the providers unannounced audit and the matter was now addressed.

Judgment: Compliant

Quality and safety

The inspector reviewed the quality and safety of care received by the children in the centre and found it to be of a good standard. Arrangements were in place to ensure their assessed needs were met and that they had regular opportunities to engage in activities of interest to them.

The person in charge had ensured that an assessment of health, personal and social care needs had been completed for the children. There were visuals in the children's support plans of activities they had done and visuals specific to each child's needs in terms of communication or behaviour needs. These pictures gave a clear overview of the meaningful activities the children were involved in and also the support strategies that were required. These support plans were noted by the inspector to clearly identify the issues experienced by the children and how a child may present in crisis. For example, one child's plan outlined the supports the child required with transitions. The plan was created by the behaviour specialist and the staff team and gave clear guidance to the team.

Annual care planning review meetings were conducted and minutes of the meetings were recorded and kept on file. Family and professionals involved in the child's care were invited to these meetings to provide input and to receive updates. Behaviour monitoring charts were in place for children and recorded if a child was unhappy and how this was addressed to effect improvement. For example, if it was noted that environmental factors were a cause for concern, every effort was made to adjust the environment or support the child to learn to manage their anxiety around it.

The registered provider had ensured that each child had access to appropriate healthcare. There was documented appointment summaries indicating that the

children had regular visits with the psychiatrist, psychology and their general practitioner (GP) although this was mainly facilitated by the children's family members.

On the previous HIQA inspection behaviour support was noted as an area for improvement. The inspector found that this had been addressed and there was a comprehensive behaviour support plan in place for the children whose files were reviewed. The behaviour support plan gave clear guidance to staff so as to maintain a consistent approach and practices. Staff spoken with demonstrated good knowledge of how to support the children to manage their behaviour and were familiar with the needs of the children. The inspector observed the staff to effectively and positively support one child with their needs during the inspection.

The person in charge had ensured that the children were assisted and supported to communicate with visuals such as those noted on a notice board in the kitchen. The children had access to television and Internet and an electronic device was available to facilitate children to video call their family members or use the Internet.

The provider had ensured that the children had access to facilities for recreation and opportunities to participate in activities in accordance with their interests and capacities. The children were active in their community.

The provider had a risk management policy in place and all identified risks had a risk management plan in place including the risks associated with COVID-19.

The provider ensured that there was an effective fire management system in place. The person in charge had ensured that all fire equipment was maintained such as the emergency lighting and the fire alarm system.

The premises was warm and homely and there was a lovely atmosphere in the centre. The children brought personal belongings with them when they came in on respite and were able to personalise their room for the duration of their stay. Children could have visitors if they so wished while in the respite centre.

Medication practices in the centre were reviewed and found to be of a good standard.

The inspector observed that there were systems and measures in operation in the centre to protect the children from possible abuse. Staff spoken with indicated that they were fully aware of the measures in place to protect the children. Staff were facilitated with training in children first.

The provider had ensured that the children had the freedom to exercise choice and control in their daily life.

Regulation 11: Visits

The provider facilitated each child to receive visitors. However, as it was a respite service and the children were in for short periods visits did not occur often. However, there was a visiting policy in place and available on the day of inspection for the inspector to view.

Judgment: Compliant

Regulation 13: General welfare and development

The provider had ensured that the children had access to facilities for recreation and opportunities to participate in activities in accordance with their interests and capacities. The children were engaged in a variety of meaningful activities in their local community; they utilised local shops, local amenities such as parks, playgrounds, went for walks and drives. The children went to school daily also and were at school on the day of inspection.

Judgment: Compliant

Regulation 17: Premises

The provider had ensured the premises was designed and laid out to meet the aims and objectives of the service and the number and needs of children, was kept in a good state of repair externally and internally and was clean and suitably decorated.

Judgment: Compliant

Regulation 26: Risk management procedures

The provider had a risk management policy in place and all identified risks had a risk management plan in place including the risks associated with COVID-19. The provider ensured that there was a system in place in the centre for responding to emergencies. .

Judgment: Compliant

Regulation 27: Protection against infection

The provider had ensured that children who may be at risk of an infection such as

COVID-19 were protected by adopting procedures consistent with the standards for infection prevention and control. Personal protective equipment in the form of face masks were noted to be worn by all staff. Supplies of alcohol based hand sanitizers, soap and paper towels, posters for hand hygiene and cough etiquette were all in place. Easy-to-read versions were developed to aid children's understanding and compliance. Standard operating procedures were created in line with national infection prevention and control guidance to support staff to manage if a child or staff member was suspected or confirmed as having COVID-19.

Judgment: Compliant

Regulation 28: Fire precautions

The provider had ensured that there was an effective fire management system in place. Fire doors were in place, there were adequate extinguishers, fire blankets and, a fire detection and alarm system; these were checked regularly by an external fire safety company. The inspector reviewed the records of evacuation drills which were carried out regularly and found that they indicated that the children could be safely evacuated in a safe timeframe.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

The inspector noted good practices around the ordering, storage, administration and disposal of medication which were in line with policy and good practice. The medicines were locked in a cabinet and there were regular stock takes, receipt of medication forms were in place as were records of returns to the pharmacy. There was a medicines transfer box when parents were sending in medication to school for children which had to be signed for by the school, parent and centre staff.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

The person in charge had ensured that a comprehensive assessment of the health, personal and social care needs of the children was completed. Annual care planning review meetings were conducted and minutes of care planning meetings were recorded and kept on file. These meetings provided a forum for all people involved in the child's life to have input and participate in the child's care. There was

adequate guidance and support plans for staff to work effectively with the children. There were support plans in relation to transitions and a document called 'ways to help me stay calm' which guided the staffs practice. Staff spoken with acknowledged that the support plans were effective and demonstrated a good understanding of the strategies to employ when addressing different situations.

Judgment: Compliant

Regulation 6: Health care

The registered provider demonstrated that appropriate health care reviews were taking place and the required health care support was received by the children. There was evidence of regular reviews with the psychiatrist and medication had been amended on their advice. Documentation indicated that children had check-ups with the GP, this indicated that the health of the children was being supported and maintained.

Judgment: Compliant

Regulation 7: Positive behavioural support

Behaviour support guidelines were noted to be in place by the inspector and staff had training in the management of behaviour that was challenging. The restrictive practice register was reviewed and the inspector noted all restrictions in use were recorded.

Judgment: Compliant

Regulation 8: Protection

The inspector observed that there were systems and measures in operation in the centre to protect the children from possible abuse. Staff were facilitated with training in Children's First and there was documentation in relation to keeping the children safe. For example, there was a risk assessment in place for children safely crossing the road and for any safeguarding and child protection risk. The inspector spoke with the person in charge and staff regarding safeguarding of the children. They were able to clearly outline the process of recording and reporting safeguarding concerns.

Judgment: Compliant

Regulation 9: Residents' rights

The provider had ensured that the children's rights were respected and that they could exercise choice and control in their daily lives. The children were involved in the running of the centre. For example, staff set out a number of different visuals which supported the children to choose daily activities and weekly meals. When the children come in on respite there was an initial welcome meeting and the children could express their wishes in regards to activities they would like to do on respite.

Judgment: Compliant

Regulation 10: Communication

The person in charge had ensured that the children were assisted and supported to communicate. For example , a range of visuals were in use such as the visual supports observed on a notice board in the kitchen. Also, there were visuals for communicating pain and emotions so the children could communicate if they were not feeling well. The children had access to the Internet and had electronic tablets to use.

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	
Regulation 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 31: Notification of incidents	Compliant
Regulation 34: Complaints procedure	Compliant
Quality and safety	
Regulation 11: Visits	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 27: Protection against infection	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 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant
Regulation 10: Communication	Compliant