



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

Issued by the Chief Inspector

Name of designated centre:	Community Living Area G
Name of provider:	Muiríosa Foundation
Address of centre:	Laois
Type of inspection:	Unannounced
Date of inspection:	10 May 2022
Centre ID:	OSV-0004089
Fieldwork ID:	MON-0036268

About the designated centre

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

Community Living Area G is located in Co.Laois and can provide residential care for eight male or female residents over the age of 18 years. There are eight residents currently living in the centre. The centre caters for individuals with an intellectual disability and autism. The centre consists of two single story dwellings linked together and is known as "The Cottages". The premises have been adapted to meet the needs of the residents. Staff are present throughout the centre both day and night to meet the needs of residents availing of the service. The staff team consists of nurses, social care workers and support workers. Residents are supported by the staff team, a social care leader and the person in charge. A range of multi-disciplinary supports are also available to residents, if needed, through a referral process. The local area offers a wide variety of facilities including shops, clubs, pubs, cafés and restaurants.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	8
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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 10 May 2022	09:00hrs to 14:30hrs	Ivan Cormican	Lead

What residents told us and what inspectors observed

The inspector found that residents enjoyed living in this centre and that the arrangements which were implemented by the provider promoted their overall well being and safety. The inspector met with five residents on the day of inspection and the inspection was facilitated by staff who were on duty and a senior manager also attended for a period of time.

The centre comprised two separate houses which were located on one site in a village in the midlands. Both houses had been renovated in the past and gave the centre a charming feel with both traditional and modern elements incorporated into each home. One aspect of the centre provided residential services for three residents and a social model of care was provided here. The second aspect provided a nurse lead residential services for five residents who required more assistance with their medical needs. The premises was warm and inviting and each resident had their own bedroom which was cosy and decorated with items of personal interest. One resident who had an interest in farming showed the inspector their bedroom which had displays of farm machinery and posters of farm animals. The senior manager stated that this resident also likes to visit a nearby farm where they enjoy watching the cows going to and from the milking parlour.

The inspector found that many areas of the centre were well maintained and the provider had completed a review of the premises to identify areas which required maintenance such as tiling and resealing of some shower units. The inspector found this was a proactive measure to ensure that residents were living in a premises which was in a good state of repair and to assist in ensuring that staff members could effectively clean and disinfect all areas of the centre. Although, the provider was actively trying to improve maintenance within the centre, some areas which required improvement were not identified. For example, a utility room in one house had worn flooring which hindered staff from properly cleaning this area. Furthermore, this utility which was used for the laundering of clothes, was also used for the storage of some food products and cooking utensils which had the potential to impact on food safety in this centre. This was brought to the attention of the provider who acknowledged that there was an issue with space and storage in this house which required further attention.

There was a very pleasant atmosphere in both aspects of the centre and some residents were having a sleep-in on the morning of inspection. As residents got up for the day they sat and chatted with staff members as they had their breakfast. One resident sat with a staff member for a period of time looking through two photo albums which their family had assembled for them. The resident communicated non verbally with the staff member and they smiled warmly as they looked at old photographs of themselves at work and also attending family events. Three residents spoke with the inspector and they all stated that they liked their home and the staff who supported them. One resident chatted freely for a period of time and they spoke about how they attended a new hair salon recently and that staff

assisted them to get out and about. They were very relaxed and when the senior manager attended they both sat and chatted about times gone by and where the resident came from and where they had lived prior to moving to this centre. The staff member who supported them interacted in a kind manner and they also laughed and joked with the resident who responded warmly to this banter.

Residents attended regular house meetings in which topics such as meal choices, activities and the general operation and the running of the centre was discussed. The inspector observed that residents were supported to wash their hands and a resident said that they protect themselves by regularly washing their hands, especially when they go out. The provider had also provided information on the importance of hand washing in an easy-to-read format to assist residents in understanding this area of care.

Overall, the inspector found that the centre was a pleasant place in which to live and that residents enjoyed their home and the company of staff who were on duty on the day of inspection. Many areas of the centre were well maintained and clean; however, one area required further attention in terms of cleaning and maintenance.

Capacity and capability

The inspector found that overall, there were good arrangements in place to provide oversight of care practices and infection prevention and control (IPC) measures in this centre.

A senior nurse on duty facilitated the inspection and a senior member of the management team also attended the centre to further outline the oversight arrangements which were in place. Both staff members had a good understanding of the residents' needs and also of the arrangements which were in place to support them with their individual care preferences.

The provider had also prepared a COVID 19 outbreak and contingency plan which outlined how the centre had prepared for the risk of COVID 19 and also how the centre would respond should a resident become infected with the disease. The inspector found that these plans were detailed in nature and clearly outlined the arrangements which would be implemented to ensure that residents' health and wellbeing would be promoted.

Contingency planning clearly outlined how staffing ratios would be maintained during an outbreak and a consultation process with staff members had been undertaken in regards to the operation of the centre during an outbreak. Contingency planning also identified basic IPC measures which were implemented to ensure that the centre was cleaned and disinfected and also the enhanced IPC arrangements which would be implemented during an outbreak such as the use of additional personal protective equipment (PPE), donning and doffing areas and the

cleaning and disinfection of the centre.

The provider had appointed the person in charge as responsible for IPC arrangements in the centre and they were supported in their role by IPC policy documents and standard operating procedures in respect of the cleaning and disinfection of the centre. The person in charge ensured that the centre was cleaned to a good standard and a range of both cleaning checklists and audits assisted in ensuring that this standard was actively promoted and maintained. The provider had also completed a maintenance survey of the centre which identified areas of the centre which required additional maintenance and upkeep such as tiling and sealants in ensuite which were used by residents. These maintenance issues had a clear timeline for completion which would also assist in ensuring that staff members could appropriately clean and sanitise these areas.

Staff were observed to wear face masks and a staff member who spoke with the inspector identified that the centre had a specific hand washing sink which assisted in promoting hand hygiene. Staff were also observed to wash and sanitise their hands frequently and they also encouraged residents to do the same.

There was relevant information on display to remind both staff and residents of the IPC arrangements in the centre. Staff also attended regular team meetings where IPC was discussed. The person in charge also used these meetings to update staff in regards to organisational changes such as the revised IPC policy which was in draft at the time of inspection. A review of training records also indicated that staff were up-to-date with their training needs and additional training in IPC, PPE and hand hygiene had been completed by all staff.

Overall, the inspector found that the oversight and governance arrangements which were in place actively promoted IPC in this centre and in doing so, also promoted the wellbeing of residents.

Quality and safety

The inspector found that residents enjoyed a good quality of care and that their wellbeing was actively promoted.

It was very clear from the centre's outbreak management plan that residents were the sole focus of care. These plans were found to be comprehensive in nature and they highlighted each resident's individual care requirements which would need to be met should they be required to self isolate as a result of contacting COVID 19. Plans outlined how staff would continue to promote hand hygiene and how they would also ensure that laundry was appropriately segregated and washed. Staff were to assist the residents to remain in contact with their families and there was also information in regards to residents' preferred activities which they might enjoy and help them to pass the time. There was also clear guidance for staff to monitor residents' health status, including skin integrity and their nutritional and hydration

intake.

As mentioned earlier the centre was generally clean and the provider had a refurbishment plan in place to ensure that the centre was kept in a good state of repair and upkeep. A staff member spoke at length about the general cleaning arrangements and they also discussed how shared equipment such as a bath and hoist were cleaned and sanitised after use. Residents had the use of a reclining jacuzzi bath which could present as an IPC risk if it were not properly cleaned after use. The inspector found that this piece of equipment was thoroughly cleaned and door seals were free from mould and grime. The staff member explained that there was a specific wash cycle to clean and to disinfect the bath after each use and that staff also took the time to ensure that the door seal was cleaned and additional disinfectant applied after use.

Residents' individual healthcare needs were well maintained and residents were reviewed by medical professionals for scheduled checkups and also in times of illness. Residents' health and wellbeing was also actively promoted with a sample of files sampled showing that residents were supported to attend for preventative health screening with some residents participating in both breast and bowel screening.

The inspector met with residents throughout the inspection as they went about their day. One resident spoke at length about their life and how they were glad that national restrictions had eased so that they could go out and get their hair done as they wished. They explained how they washed their hands frequently and that staff are always cleaning the centre. This resident was comfortable and relaxed in the company of staff and they talked freely about COVID 19. The provider had introduced easy read information for residents with additional communication needs and scheduled residents' meetings were occurring where IPC and the importance of hand hygiene were discussed.

Overall, the inspector found that IPC arrangements were actively promoted and that the measures which were implemented by the provider assisted in ensuring that the impact of COVID 19 on residents was kept to a minimum. However, as mentioned in the opening section of this report, some additional measures were required to ensure that a utility was kept in a good state of repair and that suitable storage for food items and cooking utensils was in place.

Regulation 27: Protection against infection

IPC was actively promoted and staff had a good understanding of the arrangements to keep residents safe, including the procedures to be followed should a resident become suspected or confirmed as having COVID 19. Although the centre was generally clean and well maintained, a utility in one area of the centre required attention to ensure that it was well maintained and that there was suitable storage in place for food items and cooking utensils.

Judgment: Substantially 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	Substantially compliant

Compliance Plan for Community Living Area G OSV-0004089

Inspection ID: MON-0036268

Date of inspection: 10/05/2022

Introduction and instruction

This document sets out the regulations where it has been assessed that the provider or person in charge are not compliant with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) With Disabilities) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

This document is divided into two sections:

Section 1 is the compliance plan. It outlines which regulations the provider or person in charge must take action on to comply. In this section the provider or person in charge must consider the overall regulation when responding and not just the individual non compliances as listed section 2.

Section 2 is the list of all regulations where it has been assessed the provider or person in charge is not compliant. Each regulation is risk assessed as to the impact of the non-compliance on the safety, health and welfare of residents using the service.

A finding of:

- **Substantially compliant** - A judgment of substantially compliant means that the provider or person in charge has generally met the requirements of the regulation but some action is required to be fully compliant. This finding will have a risk rating of yellow which is low risk.
- **Not compliant** - A judgment of not compliant means the provider or person in charge has not complied with a regulation and considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of residents using the service will be risk rated red (high risk) and the inspector have identified the date by which the provider must comply. Where the non-compliance does not pose a risk to the safety, health and welfare of residents using the service it is risk rated orange (moderate risk) and the provider must take action *within a reasonable timeframe* to come into compliance.

Section 1

The provider and or the person in charge is required to set out what action they have taken or intend to take to comply with the regulation in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that regulation, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. The response must consider the details and risk rating of each regulation set out in section 2 when making the response. It is the provider's responsibility to ensure they implement the actions within the timeframe.

Compliance plan provider's response:

Regulation Heading	Judgment
Regulation 27: Protection against infection	Substantially Compliant
<p>Outline how you are going to come into compliance with Regulation 27: Protection against infection:</p> <p>Cooking utensils identified in the report on the shelf in utility room has been removed and are stored in a press in kitchen.</p> <p>A vegetable rack has been purchased and is stored in the kitchen area</p> <p>Request for replacement flooring has been sent to operations manager as of 23/06/22.</p>	

Section 2:

Regulations to be complied with

The provider or person in charge must consider the details and risk rating of the following regulations when completing the compliance plan in section 1. Where a regulation has been risk rated red (high risk) the inspector has set out the date by which the provider or person in charge must comply. Where a regulation has been risk rated yellow (low risk) or orange (moderate risk) the provider must include a date (DD Month YY) of when they will be compliant.

The registered provider or person in charge has failed to comply with the following regulation(s).

Regulation	Regulatory requirement	Judgment	Risk rating	Date to be complied with
Regulation 27	The registered provider shall ensure that residents who may be at risk of a healthcare associated infection are protected by adopting procedures consistent with the standards for the prevention and control of healthcare associated infections published by the Authority.	Substantially Compliant	Yellow	20/06/2022