



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

Issued by the Chief Inspector

Name of designated centre:	Pine Services
Name of provider:	Brothers of Charity Services Ireland CLG
Address of centre:	Roscommon
Type of inspection:	Unannounced
Date of inspection:	20 April 2023
Centre ID:	OSV-0004460
Fieldwork ID:	MON-0039768

About the designated centre

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

Pine Services is a residential and respite service, which is run by the Brothers of Charity Services Ireland. The centre provides accommodation and respite support for nine male and female adults over the age of 18 years, with an intellectual disability. The centre comprises of three bungalows, two of which are located in a village in Co. Roscommon and one which is located on the outskirts of a town in Co. Roscommon. The bungalows comprise of single residents' bedrooms, en-suites, shared bathrooms, office spaces, kitchen and dining areas, utility areas and sitting rooms. Residents also have access to garden areas to the rear and front of each bungalow. Staff are on duty both day and night to support residents availing of this service

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	9
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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
Thursday 20 April 2023	12:00hrs to 18:00hrs	Jackie Warren	Lead

What residents told us and what inspectors observed

This was an unannounced inspection to monitor the provider's arrangements for infection prevention and control in the centre. As part of this inspection, the inspector spent time in the company of residents and observed the care and support interactions between residents and staff when residents returned to the centre in the afternoon. The inspector also spoke with staff on duty, and also viewed a range of infection control documentation and processes.

The centre consisted of three houses, all of which were located close to a rural town and a village, which gave residents good access to a wide range of facilities and amenities. The centre suited the needs of the people who lived there and provided them with a safe and comfortable living environment. All houses in the centre were well furnished, and decorated in a comfortable, domestic style which created a very homely atmosphere. The houses were spacious and there was sufficient room for residents to have private space, or to carry out activities by themselves, if they chose to. Each resident had their own bedrooms the bedrooms that the inspector saw had been decorated, personalised and equipped in line with residents' preferences and needs. There was Internet access, television, games, and music choices available for residents. Each house also had a utility room where residents could do their own laundry if they close to. All houses in the centre also had spacious gardens for residents' use.

Some residents were not in the centre during the inspection, but the inspector met with three residents when they returned from day service. Residents said they were very happy with all aspects of living in the centre. These residents said that they were well supported by staff who provided them with good care. Residents told the inspector that they would feel comfortable to raise any concerns with staff and were confident that any issues would be addressed. These residents knew who was in charge in the centre, and they said that they trusted the staff. Resident also said that they enjoyed the meals in the centre. They explained that they had choices around their food shopping and meals, Some residents took part in grocery shopping, and that they were supplied with the meals that they liked. They also said that they often went out to the town for a meal, coffee or a drink and that they enjoyed this.

Residents also discussed the COVID-19 pandemic and confirmed that they were pleased that it was now coming to a end. They told the inspector that staff had explained all about the illness to them and they had been told how to keep themselves safe by doing things like frequent hand washing and social distancing. They also talked about how the vaccination programme had been explained to them, and said they had all made their own decisions about whether or not they wished to be vaccinated.

All residents in the centre attended day services on weekdays, but were doing various things that they enjoyed in the evenings and at weekends. Activities that

residents enjoyed in the centre included relaxing therapies such as foot spas, hand massages and reflexology, puzzles and games, and playing music. Residents were also involved in household activities such as gardening projects, light housework, and food preparation. Residents were involved in wider community life, which included shopping, attending Mass, going to the village pub for a drink, going to the cinema, and having beauty treatments at beauticians and hairdressers. Residents also enjoyed and took part in outings to places of interest, holidays, family visits and entertainment events. On the previous evening residents had attended a musical which they had enjoyed.

Throughout the inspection, residents were seen to be at ease and comfortable in the company of staff, and were relaxed and happy in the centre. Staff were observed spending time and interacting warmly with residents, supporting their wishes, ensuring that they were doing things that they enjoyed and providing meals and refreshments to suit their needs and preferences. Staff who spoke with the inspector had a very good knowledge of residents' likes, dislikes and care needs, and were also were aware of safe infection control processes.

Overall, it was clear that residents who availed of this service enjoyed a good quality of life, that their welfare and wellbeing were actively promoted.

The next two sections of this report present the inspection findings in relation to the governance and management in the centre, and how governance and management affects the quality and safety of the service being delivered. Although there were arrangements in place to protect residents from infection, some aspects of infection control required improvement to ensure that the safety of residents would be maintained. This is further discussed later in this report.

Capacity and capability

The provider's management arrangements ensured that a good quality and safe service was provided for people who lived in this centre, that residents' quality of life was well supported and that residents were safeguarded from infectious diseases, including COVID-19. However, some improvement was required to various aspects of infection control documentation, cleaning guidance and annual reviewing of the service to ensure that this standard would be maintained.

There was a clear organisational structure in place to manage the service. There was a suitably qualified and experienced person in charge who was responsible for the management of this designated centre only. The person in charge worked closely with residents, staff and with the wider management team. There were arrangements in place to support staff and to access the support of senior managers when the person in charge was not on duty.

The centre was suitably resourced to ensure the effective delivery of care and support to residents, and for effective infection control management. These resources included the provision of a suitable, safe and comfortable environment, sufficient numbers of suitably trained staff to support residents, and adequate supplies of personal protective equipment (PPE), hand sanitising gels, cleaning materials and equipment. There was a plentiful supply of face masks, which were being used in line with national infection control guidance.

There were measures in place in the centre to control the spread of infection and to reduce the risk of COVID-19 infection. This included adherence to national public health guidance and development daily cleaning schedules. There was a process in place for sharing information about residents' infection status in the event of any resident transferring from the centre. The provider had developed a contingency plan to reduce the risk of COVID-19 entering the centre and for the management of the infection should it occur. However, some guidance on management of cleaning equipment, required strengthening to ensure that a good standard of infection control would be maintained.

Staff were informed of infection control protocols and practices. Staff had received training in various aspects of infection control, such as training in personal protective equipment, hand hygiene, and infection prevention and control. The provider had also ensured that a range of guidance documents, policies and procedures were available to inform staff of best infection control practices. Staff who spoke with the inspector were satisfied that they had received adequate training and guidance in infection control management.

There were systems in place for reviewing and monitoring the service to ensure that a high standard of infection control management was being provided and maintained. Infection control was included in the provider's six-monthly unannounced audits, and a detailed infection control audit had also been carried out by an infection control specialist. Areas for improvement identified in these audits had been addressed. For example, the provision of covered laundry baskets had been recommended, and this had been done. However, an annual review of the service had not yet taken place for the previous year. Consequently, the provider was asked to review the role of the person in charge to establish if there was sufficient capacity to undertake required functions in a timely manner.

Quality and safety

The provider had good measures in place to ensure that the wellbeing of residents was promoted and that residents were kept safe from infection. Residents lived in a clean, comfortable environment, although some minor cleaning tasks were required to ensure that this standard would be maintained. Improvement to the management

of cleaning equipment was also required.

The centre was two adjoining houses in a rural village, and a single house in a nearby town. The location of the centre enabled residents to visit the shops, coffee shops and restaurants in the area. Some of the activities that residents enjoyed included outings to local places of interest, sensory activities, going out for coffee and restaurant meals, housekeeping tasks, table-top games and crafts, beauty treatments and music. The centre had dedicated transport, which could be used for outings or any activities that residents chose. There were also well maintained and furnished accessible gardens where residents could spend time outdoors.

During a walk around the centre, the inspector found that it was decorated and furnished in a manner that suited the needs and preferences of the people who lived there. Overall, all houses were kept in a clean and hygienic condition throughout. The kitchens were bright and comfortable, and were well equipped with readily cleanable and suitable equipment for cooking and food storage. Surfaces throughout the house were of good quality, were clean and were well maintained. Wall and floor surfaces in bathrooms were of impervious materials which could be easily cleaned. However, an internal ramp at a back door and a bathroom bin required improved cleaning.

Information about infection control had been supplied to residents in a user-friendly format. Residents were supported to access vaccination programmes if they chose to, and were assisted to make informed decisions about whether or not to become vaccinated.

Cleaning schedules had been developed to manage the centre's hygiene requirements, and staff members carried out the required daily cleaning tasks. This included daily cleaning of the centre with increased cleaning and sanitising of touch points such as door handles and light switches. Assistive equipment was also included in a cleaning plan and was found to be visibly clean on the day of inspection.

The centre had laundry facilities in each house, and the laundry of potentially infectious clothing and linens was being managed in line with good practice. There was a plentiful supply of cleaning materials such as sanitising solutions, wipes and cloths. To reduce the risk of cross-contamination a specific colour coded cleaning system was in use. However, mops and buckets were not being stored in line with public health guidance.

There were good waste management arrangements in the centre which increased infection control safety. Refuse collection was supplied by a private contractor and bins were suitably and hygienically stored while awaiting collection.

Family contact and involvement was important in the service. The visiting restrictions which had been in place during the earlier part of the COVID-19 pandemic had been discontinued, and visiting has now fully returned to normal in line with national public health guidance. Arrangements were in place for residents to have visitors in the centre as they wished, and for them to visit family and friends

in other places.

Regulation 27: Protection against infection

There were good measure in place in the centre to control the risk of infection, both on an ongoing basis and in relation to COVID-19. The centre was well maintained, had good quality, easily cleanable surfaces in higher risk areas, and was maintained in a clean and hygienic condition. There were systems, such as audits and cleaning plans, in place to reduce the risk of infection in the centre.

However, some improvements were required to improve and sustain a good level of infection control in the centre:

- there was insufficient guidance for the management and storage of cleaning equipment
- the storage of mops and mop buckets was not in line with national infection control guidance
- although there was generally a good level of hygiene and cleanliness evident in the centre, there was an ill-fitting ramp at the door of one house which created gaps where dirt and grime had built up
- the surface of a bin in one bathroom was not clean at the time of inspection
- the annual review of the service for the previous year had not yet been completed.

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 Pine Services OSV-0004460

Inspection ID: MON-0039768

Date of inspection: 20/04/2023

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> <ul style="list-style-type: none">• All cleaning equipment is now stored in line with Infection Prevention and Control Guidance as of the 21/04/2023• A new system has been introduced to ensure all mop heads and buckets are cleaned and stored in line with the National Infection Prevention and Control guidance. This action was completed on the 21/04/2023• The surface of bin has been cleaned and location changed to ensure it has less exposure to water droplets as of the 20/04/2023• Maintenance have reviewed the ramp at the back door. This ramp will be secured to ensure there are no gaps allowing dirt and grime to build up. This action will be complete 02/06/2023• The annual review for 2022 has been completed for this Designated Centre on the 28/05/2023	

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	02/06/2023