



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

Issued by the Chief Inspector

Name of designated centre:	Delta Willow
Name of provider:	Delta Centre Company Limited by Guarantee
Address of centre:	Carlow
Type of inspection:	Unannounced
Date of inspection:	24 October 2022
Centre ID:	OSV-0005526
Fieldwork ID:	MON-0036471

About the designated centre

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

In this centre care and support is provided to people with an intellectual disability, both male and female over the age of 18. The centre can accommodate nine residents in two different properties. Tintean Willow can accommodate six residents and Homefield can accommodate three residents. Both homes comprises a spacious custom built detached house in its own grounds. In Tintean Willow there is a large and bright open plan living area comprising kitchen, dining area and sitting area. there are also various other small living areas, including a seating area beside a large window, and a further small living room. Each resident has their own bedroom, each of which is decorated and furnished in accordance with the needs and preferences of the individual person. Homefield comprises an open Kitchen/Living/ Dining area, a sensory room and three individual resident bedrooms. There is a large accessible main bathroom and a smaller bathroom area. Residents are supported, both day and night, by social care leaders and care assistants. Vehicles are available for the use of residents. Both homes are in close proximity of the local town.

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
Monday 24 October 2022	09:00hrs to 15:00hrs	Sarah Mockler	Lead

What residents told us and what inspectors observed

This inspection was unannounced and the purpose of the inspection was to monitor the centres levels of compliance with Regulation 27 and the National Standards for infection prevention and control in community services (HIQA, 2018). The COVID-19 pandemic was ongoing on the day of inspection and measures were taken by staff and the inspector to reduce risk of infection. This included wearing face masks and regular hand hygiene. On arrival at the centre, a staff member carried out temperature checking and symptom monitoring with the inspector. The inspection occurred following a recent outbreak of COVID-19 within one of the units within the centre. Three residents within one home had contracted COVID-19 and all residents had recovered and were out of their isolation period.

There were two homes associated with the designated centre. The homes were approximately located three kilometers from each other. The centre had capacity to accommodate nine residents, six residents in one home and three residents in the second home. On the day of inspection there were eight residents living across both centres.

In the first home, the inspector has the opportunity to meet with all five residents that lived there. On arrival in the morning, two residents were seated in the kitchen finishing their breakfast. They were up and dressed for the day and were being supported by a member of staff from the day service. Both residents chatted with the inspector. They were both looking forward to an upcoming bowling event with the Special Olympics in a nearby town and were chatting about the relevant arrangements in relation to this event. One resident was eager to get their newspapers for the day ahead and were observed to ask staff when they could go and get these items. The other resident present spoke about family events, their peers in the home, activities they enjoyed such as baking, knitting and music. Both residents had their own individual i-pad. One resident was observed to put their favourite music on it and listen to it and the other resident showed the inspector some pictures of a recent wedding they attended.

Staff interactions during this time were kind, caring and professional. Staff were respectful of residents' wishes and preferences. For example, a resident explained in detail how they like their tea made and the staff member spent time listening to this request and checked with the resident while making the drink to ensure they were respecting their relevant preferences. Residents spoke about different staff members and when they were coming on duty.

Later in the morning the inspector met with the other three residents in the home. Residents all chose when they woke in the morning and this was facilitated to ensure residents preferences and autonomy over their routines was central to the care that was being provided. Residents were supported with their breakfast routine and were assisted in helping to prepare to leave for the day or go to different activities. Residents were seen to interact with each other in a familiar and kind

manner. They all greeted each other in the morning and were seen to speak and laugh with each other. All residents were observed to freely move around their home.

The inspector completed a walk around of the centre. It was a large, bright, warm and well maintained dormer building. There were large windows throughout the home, with spacious wide corridors. All areas of the home were extremely clean and well organised. Each resident has their own bedroom that was individually decorated with personal items and pictures on display. There were six bedrooms, two of these bedrooms were en-suite. There were two large bathrooms for residents use, one with an accessible shower and one with a Jacuzzi bath. There was a separate bathroom available for staff use. Residents had access to a large open plan living, dining and kitchen area, a utility area and a separate visitors room. In addition to this there was a sluice room downstairs. Upstairs was an open plan mezzanine area with storage rooms and a en-suite staff bedroom. The residents choose not to access the upstairs of the building.

In the afternoon the inspector went to visit the second home associated with this designated centre. Three residents were present at this time. All three residents had recently transitioned to this home in early 2022. The inspector spent a brief amount of time with residents in line with their assessed needs and preferences. On arrival at the centre one resident was returning from a session in the local gym, one resident was getting their hair done by a staff member and another resident was relaxing in the sitting room with a cosy blanket. The atmosphere in the home was relaxed and residents appeared very comfortable. One resident expressed to the inspector that they really liked their new home. Residents had recently been assisted to fill in a provider-led satisfaction form and residents had expressed they were all happy in their new home.

Again the inspector completed a walk around of the premises. The building was a bungalow located on a large piece of land. The building had been renovated before the residents moved in and was very well presented. Each resident had their own bedroom and access to a very large accessible bathroom. There was a an open kitchen, living and dining area and also a small sensory room. One bedroom within the home was allocated to staff as a sleepover room. The laundry facilities were located in a concrete built shed. This area of the home had been fitted with appropriate flooring and the washing machine and dryer were located under a new counter top and sink. Although residents had only recently moved in the house was filled with personal items and pictures. All areas of the home were clean and very well presented.

Good levels of staff support were noted in the centre. The staff team appeared knowledgeable regarding the residents individual preferences and needs when speaking with the inspector. The staff team comprised of a mix of social care workers and care staff. Within the organisation there were nurses employed and the residents could access nursing care when needed. A nurses was allocated as the infection control lead and staff could request support and advice as needed. The centre also had access to a relief panel of staff to fill shifts when required.

Overall it was found that residents appeared happy and comfortable living in their home on the day of inspection. Systems were in place to ensure that infection prevention and control measures were consistent and effectively monitored. It was evident that measures implemented were consistent with the National Standards and in line with the providers own policy on infection prevention and control.

The next two sections of the report will discuss findings from the inspectors review of infection prevention and control measures in the centre. This will be presented under two headings: Capacity and capability and Quality and Safety, before a final overall judgment on compliance against regulation 27: Protection Against Infection. High levels of compliance were noted in the centre on the day of inspection.

Capacity and capability

This was an unannounced inspection and the purpose of the inspection was to monitor the centres levels of compliance with Regulation 27 and the National Standards for infection prevention and control in community services (HIQA, 2018). Overall it was found that the registered provider was demonstrating the capacity and capability to provide a safe service with appropriate and effective systems in place to reduce the risk of COVID-19 and healthcare-associated infection in the centre. The service had up-to-date infection prevention and control (IPC) policies in place which guided the care and support that was provided in the centre.

There were clear and effective management systems in place to ensure regular oversight of infection prevention and control measures in the centre. There was a full-time person in charge in place. The centre was also supported by a senior management team which included an IPC lead who were available to support if any infection control or COVID-19 concerns arose. There was a regular management presence in the centre.

A recent audit had been completed in the centre which fully reviewed infection prevention and control measures in place. This included a review of residents care needs, equipment, waste management, use of sharps, hand hygiene, laundry management, and management of spillages. Minor areas of improvement had been identified in these audits and were completed on the day of inspection. For example the most recent audit identified the need for more attention to detail in regards to high dusting or cleaning. On the day of inspection all areas of the home were extremely clean. Infection control was also an aspect of the providers unannounced six monthly audits in the centre. Oversight systems were effectively monitoring the IPC needs within the centre.

There was full time on-call management arrangements in place and these were clearly noted in a number of documents. The organisation had established a case management forum where members of management and the IPC lead met on a frequent basis to discuss COVID-19 outbreaks. A sample of notes were reviewed by the inspector and all aspects of care and support for resident were well considered

during these meetings while ensuring relevant IPC needs were met The centre had a clear escalation pathway in place for in the event of a suspected or confirmed case of COVID-19 and staff spoken with were clear regarding this process. A centre specific COVID-19 response plan had been developed for in the event of an outbreak of COVID-19 and this included staffing procedures, management arrangements, visitation policies, meal time arrangements, cleaning, laundry procedures and correct use of PPE. The response plan had been reviewed following outbreaks of COVID-19 and amended to ensure any learning identified was communicated effectively with the staff team.

There was a large staff team employed across the designated centre. As previously stated the staff team comprised of social care workers and care assistants. The centre also had access to a relief panel of staff to fill shifts when required. Staff meetings were taking place on a regular basis. The inspector reviewed a sample of staff meeting minutes and found that infection control and COVID-19 were regularly discussed.

There was a program of training and refresher training in place for all staff. The inspector reviewed the centres staff training records and found that with regards to infection control, the majority of staff had up-to-date training in areas including hand hygiene, infection control and the donning and doffing of personal protective equipment. The person in charge regularly reviewed training records and staff training needs and had scheduled training for staff that required updated training. In addition to this as part of the COVID-19 response plan all staff had to complete face to face training in relation to hand hygiene and PPE during an outbreak of COVID-19.

Quality and safety

With regards to infection prevention and control, the registered provider and management team were ensuring that the service provided was safe and in line with national guidance for residential care facilities. It was evident that infection control was a focus in the centre and that the quality of care was regularly reviewed to ensure compliance with best practice and the National Standards for infection prevention and control in community services (HIQA, 2018).

There were systems in place for the assessment, management and ongoing review of risk in the centre. Individualised risk assessments had been developed regarding potential infection control and COVID-19 risks. Risks had been assessed and mitigating measures were implemented when necessary. Control measures in place were clearly documented. Risk had been regularly reviewed and updated as required.

As previously stated there were two homes associated with this designated centre. Both buildings were detached and had been renovated and adapted to ensure best practices in relation to accessibility. Both homes were warm and homely. Both

premises were visibly very clean during the walk around the centre. All aspects of the centre including storage areas, cupboards, bathrooms, cooking facilities, food preparation areas and laundry facilities were clean, tidy and organised. Comprehensive cleaning schedules were in place and these were carefully implemented by all staff daily. High touch points such as handles, switches, keyboards, remotes, phones and taps, were cleaned on a regular basis. Separate schedules were in place for the deep cleaning of all other aspects of the centre including residents bedrooms, bathrooms and the kitchen.

In one of the homes the centre's laundry was carried out in the utility room and in the second home it was carried out in a concrete built shed. Both these areas were clean and well maintained. The inspector observed clear systems in place for the separation of clean and dirty laundry. Signage was noted around the laundry facilities to guide staff and residents on safe laundry procedures. Staff spoken with were clear regarding procedures to take when washing soiled linen. Residents all had separate laundry baskets. A colour coding system was also in place. Separate coloured mops and cloths were used to clean different areas of the house. There were a number of hand washing facilities and alcohol gels noted around the centre. The inspector observed a staff member carrying out hand hygiene on the day of inspection and found that this was in line with training and national guidance.

It was evident that infection control measures and COVID-19 measures were regularly communicated with residents in a way that was accessible to them. A number of social stories were available for residents regarding infection control and COVID-19. The IPC needs and COVID-19 were also regularly discussed at residents meetings.

Regulation 27: Protection against infection

The purpose of the inspection day was to monitor the centres levels of compliance with Regulation 27 and the National Standards for infection prevention and control in community services (HIQA, 2018). Overall the inspector found high levels of compliance. Clear, safe and effective systems were in place for protecting residents against healthcare-associated infections. This was evident in the following areas reviewed:

- Staff supports were in place to meet the needs of the residents and to safely implement infection prevention and control measures.
- The majority of staff had completed up-to-date training in areas including infection prevention and control, hand hygiene, and donning and doffing of PPE.
- Clear management and oversight systems were in place and infection control measures were regularly audited and reviewed.
- The service had a clear and robust contingency plan in place in the event of an outbreak of COVID-19. This was regularly reviewed and amended.
- The service had up-to-date infection prevention and control policies in place

which guided the care and support that was provided in the centre.

- There was a system in place for identifying and mitigating potential and actual infection control risks in the centre.
- The premises and the environment was visibly very clean and well maintained. Schedules were in place to ensure that all aspects of the premises was regularly cleaned and deep cleaned.
- Policies and procedures were guiding safe practices in areas including laundry procedures, hand washing facilities and cleaning procedures.
- There was regular and consistent communication between staff, management and residents regarding infection prevention and control measures in the centre.

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