



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

Issued by the Chief Inspector

Name of designated centre:	Beaubec Cottage
Name of provider:	St John of God Community Services Company Limited By Guarantee
Address of centre:	Louth
Type of inspection:	Unannounced
Date of inspection:	28 July 2022
Centre ID:	OSV-0005784
Fieldwork ID:	MON-0035814

About the designated centre

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

Beaubec Cottage is a four bedroom community home located on the outskirts of a large town in Co.Louth. The centre provides 24hr care and support to four male adults. The house has been adapted for wheelchair users. It consists of four bedrooms, two of which have en-suite bathrooms. There are two sitting rooms, a large bathroom and a kitchen/dining room with access to a large landscaped garden. The house is located close to community facilities and transport is also provided for residents. Residents do not attend a formal day service. A person centred approach is adopted to support individuals to establish their own personal goals. Residents have access through a referral system for allied healthcare professionals as required. There are three staff on duty each day to support this. Two waking night staff are also on duty to support residents with their needs. The skill mix includes nursing staff, social care staff and health care assistants. An out of hours on call service is available to staff 24/7. This is provided by senior nurses. The person in charge is responsible for three other designated centres under this provider. A CNM2 is employed to support the person in charge to ensure affective oversight of this centre.

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
Thursday 28 July 2022	09:20hrs to 13:20hrs	Anna Doyle	Lead

What residents told us and what inspectors observed

This was an unannounced inspection to monitor and inspect the arrangements the provider had in place for the management of infection prevention and control. The inspection was completed over one day and took place in a manner so as to comply with current public health guidelines and minimise potential risk to the residents and staff.

The service provides residential care and support to four male adults. It comprises of one large house with four bedrooms, two of which were en-suite, an open plan kitchen/dining room a small sitting room, an additional large separate sitting room, a communal bathroom, and a utility room. The inspector observed that the centre was clean and for the most part well maintained.

Outside there was a large garden which was maintained to a very high standard. Residents were observed enjoying a walk around the garden in the morning time. Some of them enjoyed growing vegetables and fruit in a large polytunnel in the garden. There were also apple and plum trees in the garden, and residents had sown potatoes. All of the produce grown was used to prepare meals in the centre.

The residents really enjoyed spending time in the kitchen and liked to watch what was going on there. The inspector was informed that some of the staff were really good cooks and that residents (and staff) loved when they were on duty because the meals prepared were extra special. The inspector observed some pictures of residents celebrating significant birthdays in the centre where the cakes had been made by some of the staff.

All of the residents had their own bedrooms which were clean and tidy. The bedrooms were personalised and contained family photos. Some of the bedrooms needed to be painted along with the hall, sitting room and some doors. However, the inspector was satisfied that the provider had a short term and long term plan to address this going forward.

One of the staff informed the inspector about how one resident had increased links with their extended family since moving to the centre. There were plenty of pictures depicting this in the residents bedroom.

The inspector met all of the residents over the course of the inspection and spoke with the person in charge, and three staff members. Residents living in this centre required some support to communicate their views and choices. The inspector observed the daily interactions and lived experience of residents and, reviewed a number of key documents, policies, guidelines and individual care plans.

Some residents were enjoying a lie-in on the morning of the inspection, while others were waiting to go out for a haircut in the local barbers and for coffee afterwards. Staff were observed to engage with residents in a warm, friendly and professional

manner and, residents appeared comfortable and at ease in their presence.

Visitors were welcome in the centre and staff were aware of the recent changes to the national public health guidelines in relation to this. It was evident from reading personal plans and other records that family members visited residents regularly or kept in touch through social media, phone calls or letters. There were also numerous compliments recorded in the centre from residents family members stating how happy they were with the staff and the care provided in the centre.

Information and guidelines on COVID-19 (in an easy to read format) were also available to residents with regard to good hand hygiene practices, social distancing and cough etiquette.

Residents were fairly active in the centre and the centre was surrounded by a small community of shops and neighbours. Some of the residents liked to go swimming, out for coffee, shopping for clothes, to the cinema and various other activities. At home in the centre, one liked to do arts and crafts, gardening, watching television or getting a takeaway.

All of the residents had been on a recent holiday. This was the first time for them all to go on holidays together and staff reported that they really enjoyed it. Two of the residents had been to a big flower show in Dublin in recent months and one resident who enjoyed zip lining regularly went to an adventure park to do this.

One resident had been supported to manage their anxieties around leaving the centre. This was something that they had found difficult for many years, however since moving to the centre, the resident was now going to the local shop, going for a coffee and enjoying trips further afar. This was a very positive outcome for the resident.

On the day of this inspection, staff were observed to follow current public health measures in relation to long-term residential care facilities. This included regular and frequent hand hygiene and the wearing of face masks. The inspector also noted throughout the inspection process that the centre was maintained to a high standard and was clean throughout.

The remainder of this report will provide an overview of how the provider had ensured they were meeting the requirements of regulation 27: Protection against infection, and how they had implemented the National Standards for infection prevention and control in community services (2018) whilst at the same time respecting residents' rights to feel safe, happy and comfortable in their own home.

Capacity and capability

Overall the provider, person in charge and the staff team had systems in place to manage infection prevention and control (IPC) in the centre.

The provider had policies and procedures in place to guide practice on infection prevention control. There were also a range of standard operating procedures specific to this centre available to staff. Some of the standard operating procedures included procedures for the management of waste, clinical waste, and the decontamination of the environment and aids such as hoists. These documents also provided additional information (in appendices) so as to provide further guidance and support to staff. For example, information and quick reference guides were available to staff, informing them of what infections needed to be reported and the IPC measures to be followed in the event of an outbreak of a range of common health care-related infections. The provider also had a risk management plan in the centre which included the controls in place for some other health care associated infections. For example, all staff and residents were offered vaccinations for Hepatitis B in the centre.

The overall IPC policy had been updated to include guidance for the management of COVID-19. The policy outlined the roles and responsibilities for the management of IPC starting with the regional director and senior management team who had overall responsibility down to front line staff. For example; there was an assigned staff member each day in the centre to manage COVID-19 precautions.

The provider also had systems in place to review IPC measure to see if any learning could be provided. Late last year there had been an outbreak of COVID-19 in the centre. Following this a review had been conducted and where learning had been identified this was implemented.

Staff were kept informed of changes to practices in IPC measures specifically in relation to COVID-19. Written updates were provided via email and changes were discussed at staff meetings which occurred every month in the centre. Staff were aware of recent changes to public health guidance and the providers contingency plan had been updated to reflect those changes. The Covid-19 self assessment tool issued by HIQA had also been updated recently.

The provider had systems in place to monitor and review IPC measures in the centre. An audit conducted highlighted some issues with the premises that needed to be addressed. These had been reported to senior managers and some had been completed at the time of the inspection. For example; some of the wooden floors had been replaced.

There was sufficient staff on duty to support the resident's needs in the centre. The staff spoken to were very knowledgeable around the residents' needs and about the control measures in place to manage IPC issues. For example; they went through some scenarios about standard precautions they would follow in relation to some IPC risks.

Staff had been provided with training in a suite of infection control training including hand hygiene, donning and doffing of personal protective equipment and standard

infection control precautions.

Quality and safety

Overall, the inspector observed that the staff team maintained good standards regarding infection prevention and control. Individual COVID-19 personal plans were in place for each resident and, as residents had their own bedrooms they were able to isolate in them during the outbreak.

Residents had personal plans in place which included a comprehensive assessment of need. Residents personal plans also included their vaccination status for other health care associated infections. For example; whether the resident had received an annual influenza vaccination.

There were also comprehensive support plans in place to support the residents needs. Residents were regularly monitored for changes in their presentation and had timely access to allied health professionals. Staff were aware of the isolation plans for residents in the event of an outbreak of COVID-19 in the centre and there were written plans in the residents' folders to guide this practice.

Residents had hospital passports in place which outlined the supports they would require should they have to move to another health care facility. These passports outlined how the residents liked to communicate. In addition a more detailed communication passport was also included to support residents should they be admitted to a hospital.

There was adequate supplies of personal protective equipment stored in the centre for routine daily use. In the event of an outbreak, a small emergency supply was available in the centre and additional PPE could be sourced from the providers central stores. The storage of paper towels needed to be reviewed as they were stored in an area where they may be at risk of cross contamination. One of the staff addressed this on the day of the inspection.

The provider had systems in place for the management of clinical waste and the staff were aware of the procedures to follow regarding this.

As stated the property was very clean and overall maintained to a good standard. Some areas of the centre needed to be repainted and the inspector was satisfied that this was being addressed at the time of this inspection.

There was a separate laundry room and residents laundered their clothes separately. Staff went through the procedures for managing/separating residents clothes and were aware of the correct temperature of the wash cycle. Staff wore gloves and aprons when handling laundry and were aware of the procedure to follow to manage soiled/contaminated linen in the centre.

The inspector reviewed a number of IPC related checklists and audits which informed that cleaning activities were being undertaken on a regular basis by staff working in the centre. These covered routine cleaning tasks such as regular cleaning of the floors and resident's bedrooms, but also included schedules for weekly deep cleaning tasks and daily touch point cleaning and disinfection, in order to support the prevention of infection transmission. Equipment stored in the centre was also routinely cleaned, along with some clinical equipment such as a blood pressure monitor and nebulizer machine.

There was equipment available for cleaning the centre. For example; colour coded mops and buckets. Mop heads were washed after they were used. Staff were knowledgeable about the different colour coded mops and buckets and what they were used for. They were also aware of the cleaning chemicals used if there had been a spill of bodily fluids in the centre.

Overall the inspector observed that the staff team maintained good standards of infection prevention and control measures. The staff were very knowledgeable about the IPC measures in place.

Regulation 27: Protection against infection

The inspector observed that the staff team maintained good standards of infection prevention and control measures. The staff were very knowledgeable about the IPC measures in place. The registered provider had systems in place to monitor and review IPC practices 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