



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

Issued by the Chief Inspector

Name of designated centre:	Park Avenue, Dundalk
Name of provider:	Praxis Care
Address of centre:	Louth
Type of inspection:	Announced
Date of inspection:	23 November 2022
Centre ID:	OSV-0007780
Fieldwork ID:	MON-0029242

About the designated centre

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

The is a service providing care and support to four adults so as to enable them to live independent lives (with support as required) within their own community. Each resident has their own bedroom (one en-suite) with space for their personal possessions, belongings and private living needs, consistent with that found in any regular family home environment. The house has two large bathrooms (with both bathing and showering facilities), one on the ground floor and a second bathroom on the first floor. There is fully furnished sitting room, a large fully equipped kitchen/dining room and a utility facility available to the residents. There is also an office/sleep over facility available to staff. The house has a spacious enclosed back garden and patio area for recreational use and a front garden with a private a parking facility. On street parking is also available. The house is located in the heart of a busy, vibrant town in Co. Louth. The location of the house promotes the independence of the residents due to its close proximity to adult education facilities, local amenities and bus/train services. The house is staffed by a full-time person in charge and a team of support workers.

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
Wednesday 23 November 2022	10:00hrs to 15:30hrs	Anna Doyle	Lead

What residents told us and what inspectors observed

Overall, this centre was well managed and resourced to ensure that a safe quality service was provided. Residents were being supported to be independent and were directly involved in decisions about how their home was managed. The residents and staff worked in partnership to maintain the centre.

On arrival to the centre a resident greeted and welcomed the inspector to their home and went through some questions about infection prevention and control (IPC). The resident directed the inspector to the hand sanitisers and masks available and ensured that the inspector signed the visitors book.

As part of the COVID-19 management plan, the resident had taken this role on to ensure that anyone entering their home was monitored for signs and symptoms before being allowed to enter. It was evident that this resident had played a vital and effective role in managing COVID-19, as at the time of this inspection there had been no COVID-19 outbreaks in the centre. The resident also facilitated a large part of this inspection as they took ownership of showing the inspector around their home; providing refreshments and demonstrating a fire drill in the centre. This informed the inspector that a person-centred approach to service provision was provided which was planned and delivered with the active involvement and participation of the residents.

The centre was finished to a very high standard, was very clean, well maintained and homely. The resident showed the inspector the garden which was maintained to a high standard and spoke about how they were responsible for maintaining the garden. There was a large open plan kitchen, dining and seating area which was finished to a very high standard. The resident spoke about some of the meals they liked to prepare and had baked a pear and almond tart as a way of welcoming the inspector to their home. Later in the inspection, the resident, inspector and staff got to enjoy some of this delicious tart.

In the dining room there was large television and the resident informed the inspector that they had access to varied channels including 'netflix' which meant they could enjoy watching movies anywhere in their home. There was a small utility room off the kitchen and the resident showed the inspector how the laundry was managed and where items like personal protective equipment, colour coded mops and laundry was stored.

As part of the walk around of the centre, the resident also showed the inspector their bedroom. The resident said they loved their room, especially because it had an en suite bathroom and walk in wardrobe. During this time the resident spoke about what it was like living in the centre. During this conversation the resident provided numerous examples which demonstrated that they were empowered to live an independent life and gave examples of how they were involved in running their home. For example; they were involved in the induction of new staff to the centre,

showing them around their home and taking them through how fire drills were completed. The resident was also in the process of organising the Christmas party for residents and staff and had looked at different venues, prices and entertainment provided.

The resident was also very happy with a small business they had started which included maintaining gardens in some of the other designated centres under this provider. The resident had undertaken training to do this, such as managing garden equipment and said that the money from this helped to support some of the things they liked to do. For example; the resident was an avid football fan and had a trip planned in the new year to England to see a match. They also liked movies and went to the local cinema regularly.

Residents were aware of their rights in the centre and were provided with education and support to assert their rights. For example; the residents met were aware of the amount of rent they paid and what this amount covered in terms of utility bills. They worked in partnership with staff and directed their own lives. For example; the inspector was informed about an organisation initiative called 'co-production'. One of the aims of this initiative is to ensure that the people who use the service are valued as equal partners who contribute and share authority about decisions made in the organisation. Each year an awards ceremony takes place to recognise the contribution residents make in the organisation. This years awards had recently taken place and two residents received awards; one was in recognition of their commitment to further education and the other was valuing a residents contribution in providing gardening services in the organisation. One resident showed the inspector the awards they had won and photographs of the awards ceremony.

The ethos of 'co production' was very evident in this centre. For example; when a pergola was being built in the garden for one resident to enjoy, the builder met with the resident to discuss how it would be designed.

The residents appeared to lead very meaningful active lives. One of the residents worked in a local third level college, one was involved in a drama group and wrote their own poetry. Another resident worked on a farm and liked to cycle most places as they enjoyed being out and about. They had recently purchased a new bike which they were very happy about. Some of the residents were also involved in education programmes and one resident was studying very hard to attain a specific education certificate.

It was evident from talking to staff members and the person in charge that they knew the residents very well. They were observed treating residents with respect and dignity at all times. Interactions were observed to be natural and jovial.

The inspector only got to meet two of the residents as the other two were not in the centre on the day of the inspection. However; as part of this inspection, prior to visiting the centre, questionnaires were posted out to the centre for residents to complete about the quality and safety of care in the centre. All of the residents completed these and the feedback provided was very positive. Residents said they felt supported, liked the staff team, were encouraged and supported to maintain

relationships with family and friends and would speak to staff if they were not happy or felt unsafe. They also said that they liked their home, felt safe and got to make decisions about their own lives. Two residents who met with the inspector verified this also.

Both of the residents who met the inspector were very aware of, and managed their own health care needs. They told the inspector some of the supports in place.

They also told the inspector that they generally met as a group to talk about specific issues in the centre every month. They also met when unexpected events were occurring that they may want more information about. For; example during COVID-19, meetings were held more regularly to discuss changes in public health guidance. A meeting had also been held prior to this inspection to explain the inspection process to residents.

There were no complaints recorded in the centre at the time of the inspection. Both residents who spoke to the inspector said that they would talk to staff if they had a concern and all of the residents stated this in the questionnaires they completed prior to the inspection.

The views of family representatives and residents on how the centre was managed was also collated by the person in charge. The feedback from these were very positive. Some described the care as excellent. A family forum meeting was also held every year to inform them about the service. For example, in Jan 2022, the person in charge discussed human rights and informed family representatives about advocacy services.

Overall, the residents reported that they were very happy living in the centre and reported that they had a good quality of life living here.

Capacity and capability

Overall, the centre was well resourced and centred around providing high standards of person centred care to the residents.

The centre had a defined management structure in place which consisted of an experienced person in charge who worked on a full-time basis in the organisation. The person on charge was also responsible for another designated centre under this provider and was able to maintain over sight of both centres at the time of the inspection. The person in charge provided good leadership and support to their team, which focused on providing a service that enabled residents to lead independent meaningful lives.

The person in charge reported to a head of operations, who was also a person

participating in the management of the centre. They met regularly to discuss the care and support being provided in the centre.

The centre was being monitored and audited as required by the regulations and the registered provider completed a number of other audits to ensure that the service provided was to a high standard.

As discussed earlier, an organisation initiative called ' co-production' was driven by the person who in charge who included this topic in all staff supervision meetings to ensure that it remained a focus in this centre. There were numerous examples of how this was demonstrated on this inspection as discussed in the previous section of this report.

There was a consistent staff team employed in the centre and sufficient staff on duty to meet the needs of the residents.

Staff met said that they felt very supported in their role and were able to raise concerns, if needed, to a manager on a daily basis or via an out of hours on call system. The staff spoken to also had a very good knowledge of the resident's needs and spoke about a number of goals that they were supporting the residents with to lead more independent life.

A sample of personnel files reviewed were found to contain the information required under the regulations. There was also up to date Garda vetting in place for those staff.

The training records viewed found that staff were provided with training to ensure they had the necessary skills to respond to the needs of the resident. For example, staff had undertaken a number of in-service training sessions which included; first aid, safeguarding adults, fire safety, manual handling, and infection prevention and control. In addition, the staff had also completed training in person centred care and human rights based training and gave some examples of how this training influenced their practices in the centre. One staff said that changes were only made in the centre if the residents agreed to them or requested them and gave examples of empowering residents to lead independent lives.

Registration Regulation 5: Application for registration or renewal of registration

The registered provider had submitted an application to renew the registration of the centre.

Judgment: Compliant

Regulation 14: Persons in charge

The person in charge was a qualified professional who had the necessary skills and experience to manage the centre. At the time of the inspection they were responsible for another centre under this provider. The inspector found that this did not impact the oversight and management of this centre at the time of the inspection.

They demonstrated a very knowledge of the needs of the residents living here and promoted a service that was driven by the residents needs and preferences.

Judgment: Compliant

Regulation 15: Staffing

There was a consistent staff team employed in the centre and sufficient staff on duty to meet the needs of the residents. This meant that residents were ensured consistency of care.

A sample of staff personnel files viewed were found to contain the documents required under the regulations. This included garda vetting reports.

Judgment: Compliant

Regulation 16: Training and staff development

The training records viewed found that staff were provided with training to ensure they had the necessary skills to respond to the needs of the resident.

Staff had supervision completed regularly in the centre in order to discuss their personal development or raise concerns if any about the quality of care provided.

In addition, the staff had also completed training in person centred care and human rights based training and gave some examples of how this training influenced their practices in the centre. One staff said that changes were only made in the centre if the residents agreed to them or requested them and gave examples of empowering residents to lead independent lives.

Judgment: Compliant

Regulation 19: Directory of residents

A directory of residents was maintained in the centre.

Judgment: Compliant

Regulation 23: Governance and management

This centre was well resourced and had a defined management structure in place to ensure that the services provided were to a high standard.

The centre was being monitored and audited as required by the regulations. There was an annual review of the quality and safety of care available in the centre along with six-monthly auditing reports. Both the annual review and the last six monthly audit report had highlighted a small number of actions which required attention. The inspector followed up on some of these actions and found that they had been completed. For example; some minor repairs had been required to the property and these had been completed.

Judgment: Compliant

Regulation 3: Statement of purpose

The provider had a statement of purpose in the centre which was regularly reviewed and contained all the details of the services provided as required under the regulations.

Judgment: Compliant

Regulation 31: Notification of incidents

A review of incidents that had occurred in the centre over the last year, informed the inspector that the person in charge had notified the Health Information and Quality

Authority as required under the regulations.

Judgment: Compliant

Quality and safety

Overall the residents were being supported to have meaningful active lives and were being supported to develop and maintain friendships.

As stated the property was well maintained, clean and decorated to a high standard. Residents were involved in decisions about changes to their home and were consulted about new projects that were going on in the centre.

Personal plans were detailed, provided in an easy to read format for residents and contained up to date information. A sample of records showed that an assessment of need had been completed which was up to date and included support plans to guide staff on how residents liked/ needed to be supported. For the most part the residents managed their own needs and sought support from staff where required. An annual review was completed with the resident, their representatives, staff and anyone else the resident wished to invite. One of the residents planned this review themselves, chose a venue they wanted and invited people they wanted to attend.

Residents were supported with their health care needs and had required access to a range of allied health care professionals should they need their support. Residents were also supported to avail of national health screening services where applicable.

There were systems in place to manage and mitigate risk and keep the residents safe in the centre. This included a risk register for overall risks and individual risk assessments for residents. Incidents in the centre were reviewed regularly and any actions agreed to mitigate risks had been implemented. Overall there was a low level of incidents occurring in the centre at the time of the inspection.

All staff had been provided with training in safeguarding adults. Of the staff met, they were aware of the procedures to follow in the event of an incident of abuse occurring in the centre. Education was provided to the resident on their right to feel safe in the centre. One resident had been supported and provided with some education tips about self protection. It was also clear that when residents were concerned that they talked to staff for support and advice.

Infection control measures were also in place. Staff and residents had been provided with training in infection prevention control and donning and doffing of personal protective equipment (PPE).

The inspector found many examples of where the resident were supported with

their rights. A human rights based approach to care was promoted with residents being included in decisions about their lives.

Regulation 13: General welfare and development

The general welfare and development of residents was promoted and supported in this centre. Residents appeared to lead very active lives. Some were employed, all of them were involved in the local community and kept in regular contact with family and friends. In addition, some of the residents were back in education studying or had undertaken other training.

Judgment: Compliant

Regulation 17: Premises

The property was well maintained, clean and decorated to a very high standard. The residents said that they loved their home and some of them had recently changed the floor covering in their bedrooms, which they all liked. There was a garden to the back of the property and a large pergola had recently been constructed so as residents could enjoy the garden in all weathers.

Judgment: Compliant

Regulation 18: Food and nutrition

Residents were supported to buy prepare and cook their own meals and choices were provided at meal times. Residents were provided with education and support around their dietary needs.

Judgment: Compliant

Regulation 20: Information for residents

The registered provider had prepared a residents guide which included a summary

of the services and facilities provided; the terms and conditions relating to residency; arrangements for resident involvement in the running of the centre and the procedure to follow regarding complaints. The inspector found from talking to residents that they were very aware of these arrangements.

Judgment: Compliant

Regulation 26: Risk management procedures

There were systems in place to manage risks in the centre. At the time of the inspection there was a low level of incidents occurring in the centre.

Some staff used their private car to transport residents, as a result the registered provider kept a record to ensure that the cars were roadworthy, insured and that staff were properly licensed to drive.

Judgment: Compliant

Regulation 27: Protection against infection

There were systems in place to protect the resident from infection. This included contingencies to prevent/ manage COVID-19.

There were adequate supplies of PPE available in the centre. This was being used in line with national guidelines. There were adequate hand-washing facilities and hand sanitising gels available and enhanced cleaning schedules were in place. One of the residents was responsible for monitoring visitors when they arrived in the centre.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

The resident's personal plans included an assessment of need which had recently been updated. Personal plans were also available in an easy to read format for the residents. Support plans were developed to guide staff on how residents liked/ needed to be supported. The residents also were aware of the supports in place to manage their needs.

Judgment: Compliant

Regulation 6: Health care

Residents were supported with their health care needs and had required access to a range of allied health care professionals if required. Where a resident required support around clinical appointments this was provided.

Judgment: Compliant

Regulation 8: Protection

All staff had been provided with training in safeguarding adults. Of the staff met, they were aware of the procedures to follow in the event of an incident of abuse occurring in the centre. Education was provided to the residents on their right to feel safe in the centre.

Judgment: Compliant

Regulation 9: Residents' rights

Residents participated in and consented to decisions about their care and support. For example: one restrictive practice was implemented in the centre and the impact of this restrictive practice was discussed regularly with the resident who was affected by it. The records indicated that the resident had consented to the practice and was content for it to remain in place at the time of the inspection.

Residents had the freedom to exercise choice and control over their daily lives. For example; recently one resident did not want to get their temperature checked early in the morning and this was respected.

Residents were aware of their rights and where to seek support should they require this to exercise their rights. Residents were consulted and participated in the organisation of the designated 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	
Registration Regulation 5: Application for registration or renewal of registration	Compliant
Regulation 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 19: Directory of residents	Compliant
Regulation 23: Governance and management	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 31: Notification of incidents	Compliant
Quality and safety	
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 18: Food and nutrition	Compliant
Regulation 20: Information for residents	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 27: Protection against infection	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant