



Report of a Restrictive Practice Thematic Inspection of a Designated Centres for Disabilities.

Issued by the Chief Inspector

Name of designated centre:	150 Gracepark Road
Name of provider:	ChildVision Company Limited by Guarantee
Address of centre:	150 Gracepark Road Dublin 9
Type of inspection:	Unannounced
Date of inspection:	08 November 2023
Centre ID:	OSV-0002092
Fieldwork ID:	MON-0040332

What is a thematic inspection?

The purpose of a thematic inspection is to drive quality improvement. Service providers are expected to use any learning from thematic inspection reports to drive continuous quality improvement which will ultimately be of benefit to the people living in designated centres.

Thematic inspections assess compliance against the National Standards for Residential Services for Children and Adults with Disabilities. See Appendix 1 for a list of the relevant standards for this thematic programme.

There may be occasions during the course of a thematic inspection where inspectors form the view that the service is not in compliance with the regulations pertaining to restrictive practices. In such circumstances, the thematic inspection against the National Standards will cease and the inspector will proceed to a risk-based inspection against the appropriate regulations.

What is 'restrictive practice'?

Restrictive practices are defined in the *Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) with Disabilities) Regulations 2013* as **'the intentional restriction of a person's voluntary movement or behaviour'**.

Restrictive practices may be physical or environmental¹ in nature. They may also look to limit a person's choices or preferences (for example, access to cigarettes or certain foods), sometimes referred to as 'rights restraints'. A person can also experience restrictions through inaction. This means that the care and support a person requires to partake in normal daily activities are not being met within a reasonable timeframe. This thematic inspection is focussed on how service providers govern and manage the use of restrictive practices to ensure that people's rights are upheld, in so far as possible.

Physical restraint commonly involves any manual or physical method of restricting a person's movement. For example, physically holding the person back or holding them by the arm to prevent movement. **Environmental** restraint is the restriction of a person's access to their surroundings. This can include restricted access to external

¹ Chemical restraint does not form part of this thematic inspection programme.

areas by means of a locked door or door that requires a code. It can also include limiting a person’s access to certain activities or preventing them from exercising certain rights such as religious or civil liberties.

About this report

This report outlines the findings on the day of inspection. There are three main sections:

- What the inspector observed and residents said on the day of inspection
- Oversight and quality improvement arrangements
- Overall judgment

In forming their overall judgment, inspectors will gather evidence by observing care practices, talking to residents, interviewing staff and management, and reviewing documentation. In doing so, they will take account of the relevant National Standards as laid out in the Appendix to this report.

This unannounced inspection was carried out during the following times:

Date	Times of Inspection	Inspector of Social Services
Wednesday 8 November 2023	13:45hrs to 17:40hrs	Michael Muldowney

What the inspector observed and residents said on the day of inspection

From what the inspector observed and was told by residents during the inspection, it was clear that the service provided in the centre was safe and of a high quality. The centre was operated in a manner that promoted and upheld residents' rights, and the inspector found that the provider and staff team were supporting residents to have choice and control in their lives without the need for restrictive practices.

The centre comprised a large two-storey house in a busy Dublin suburb. It was close to many amenities and services used by residents including public transport, shops, and schools. The inspector carried out a thorough walk-around of the centre with a member of staff. The premises were spacious and included a large open plan kitchen dining room, study room, large sitting room, bathrooms, staff office and bedroom, and residents' bedrooms. There was also a large rear back garden with equipment used by residents such as a trampoline and football goal posts.

The inspector observed a relaxed and homely atmosphere, and found the premises to be well maintained, bright, warm, and nicely furnished and decorated. The centre is registered to accommodate six residents, however on the day of the inspection there were only four residents residing in the centre, and they all had their own bedrooms. The bedrooms were bright and comfortable, and some residents had chosen to personalise their rooms, for example, with posters.

Since the previous inspection of the centre in December 2021, renovation works had been carried out, such as upgrades to bathrooms, repainting, and new carpets on the stairs and landing. In the study room, framed poems written by residents were hung on the wall. The inspector also observed information on complaints and advocacy, and the 'house agreements' (for example, to respect each other) displayed for residents to refer to. Other important information had also been prepared in a format more accessible to residents, for example, the statement of purpose was in Braille and an easy-to-read visual format. The inspector also observed assistive aids and equipment available to residents in the centre.

There were no restrictive interventions imposed on residents, and the inspector observed them to freely move around the centre. The inspector observed residents being supported by staff to use the facilities and develop their domestic skills, for example, residents were involved in cooking their dinner, and managing their laundry.

Residents attended educational programmes during the week. On the day of the inspection, three residents were present while one resident was at home with their family. All of the residents present spent time talking with the inspector.

The first resident told the inspector that they liked living in the centre which they described as 'chilled'. In the evenings, they liked playing sports and working in an equine centre. They described the staff as being 'encouraging', and said that they had enough choice and control in their life. They felt safe and said that they could talk to staff if they had concerns, for example, during their 'link meetings' with their key

worker. The inspector viewed some of the recent link meeting minutes which noted discussions on rights, and plans to support the resident's independence such as being alone in the centre.

Another resident told the inspector that they were happy in the centre as they could make their own decisions and liked spending time with their housemates. They told the inspector about how they were supported by staff to develop their independence, for example, they were learning to cook their own meals, bake, and understand monies. They also enjoyed attending weekly advocacy classes. They said they got on well with their housemates, felt safe, and had no concerns.

The last resident was an accomplished musician and the inspector had the opportunity to hear them play music. They told the inspector that there was a very happy atmosphere in the centre, and they liked that there was always someone to talk to, for example, their housemates and staff. They were satisfied with the supports they received, and felt that they had enough freedom in their life.

The provider had effective systems to consult with residents and garner their opinions and views. Residents attended regular 'link meetings' with their key workers as well as house meetings to discuss common topics such as the 'house rules'. Some residents were also part of a representative forum that met with the provider to represent the interests of students and residents. In addition to these systems, there was an external advocacy service that residents could utilise, and residents attended weekly information sessions on advocacy to support their understanding in this area.

The provider's annual review of the centre had also consulted with residents and their representatives. Feedback from residents noted that they were happy in the centre and with the facilities, felt safe and respected, and were involved in their care planning and operation of the centre. Feedback from representatives was also positive and described the atmosphere in the centre as "always welcome, friendly, caring". There were no recent complaints, however the inspector read compliments received from residents and their representatives.

The provider had ensured that appropriate staffing arrangements were in place to support residents' needs. Staff were required to complete training to support their delivery of a human rights-based service, for example, training in Children First, behaviours of concern, and human rights.

During the inspection, the inspector met and spoke with different members of staff including the person in charge, Director of Social Care, and social care workers. The inspector observed staff and residents engaging in a relaxed and familiar manner, and staff spoke to residents with respect and warmth. For example, the inspector overheard staff consulting with residents about the food menu, and congratulating them on recent achievements.

A social care worker, working in the centre for many years, told the inspector that residents were happy, and that the service provided to them was of a high quality and person-centred. They said that residents were encouraged to make choices and have control in their lives, for example, through discussions at meetings, and

promotion of advocacy services and the complaints procedure. They said that residents were listened to and respected in their choices.

They also told the inspector that residents had active lives, for example, they attended youth and social clubs, enjoyed leisure activities such as bowling, and completed life-skill programmes such as using the Internet safely. Residents were also supported to take positive risks such as travelling independently. The social care worker had no concerns, and described the management team as being very supportive and 'hands on'. They had completed human rights training which they described as being interesting, for example, appreciating different cultures.

The person in charge described the quality of the service as being "excellent" which they attributed to the positive and human-rights ethos promoted by the provider. They had no concerns, and was satisfied that appropriate arrangements were in place to meet residents' needs, for example, adequate staffing and transport resources. They told the inspector that residents were compatible and there were no safeguarding concerns. They met with the Director regularly and was satisfied with their communication systems.

Oversight and the Quality Improvement arrangements

The provider and person in charge had made effective efforts to create an environment that maximised residents' independence and autonomy, and was free of restrictive practices.

Residents' needs had been assessed which informed the development of personal plans. The inspector reviewed a sample of the residents' plans. The plans reflected residents' input and focused on supporting residents to attain personal goals and life skills to build independence in their homes and communities. Residents' families primarily managed their healthcare needs, however staff in the centre carried out some healthcare interventions, and the provider had multidisciplinary team services for residents to avail of if required.

Prior to the inspection, the person in charge had completed a restrictive practice self-assessed questionnaire. The inspector reviewed this document and found that the policies and practices outlined within the document were consistent with what the inspector observed during the inspection.

Although there were no restrictions in the centre, the person in charge demonstrated a keen focus on enhancing the systems for implementing potential restrictions. They had recently attended a restrictive practices webinar, and had implemented learning from the webinar, for example, they revised incident form and audit templates to include reference to restrictive practices. They also told the inspector that the use of restrictions affecting other service users in the wider service had been recently reviewed and led to a reduction in use.

The Director also told the inspector about some of the provider's initiatives to enhance the promotion of residents' rights such as the development of a human rights committee.

The provider had prepared a written policy on the use of restrictive practices. The policy was readily available in the centre for staff to refer to. The policy included the arrangements for involving residents in decisions around implementing restrictions. The policy had been recently reviewed, however the inspector found that it could be enhanced by providing more detail on the arrangements for approving and overseeing the use of restrictions. However, the Director told the inspector that once the human rights committee was formally established, the policy would be updated to reflect their associated role.

The provider and person in charge had implemented systems to monitor the quality and safety of the service in the centre, including on the use of restrictive practices. The annual review and six-monthly unannounced visit report referenced use of restrictions, and the recent annual review noted that the centre operated a 'non-restrictive' approach to residents' care and support.

The person in charge also carried out regular local audits that reviewed the use of restrictions, risks, safeguarding concerns, and complaints. Where required, actions for improvement were developed.

Incidents in the centre were rare, however there were systems for recording and reviewing them if they arose to reduce any associated risks. There were also systems for recording the use of potential restrictions to demonstrate they were for the shortest duration necessary.

Overall Judgment

The following section describes the overall judgment made by the inspector in respect of how the service performed when assessed against the National Standards.

Compliant

Residents enjoyed a good quality of life where the culture, ethos and delivery of care were focused on reducing or eliminating the use of restrictive practices.