



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

Issued by the Chief Inspector

Name of designated centre:	Corlurgan Community Home
Name of provider:	Health Service Executive
Address of centre:	Cavan
Type of inspection:	Unannounced
Date of inspection:	15 December 2022
Centre ID:	OSV-0002446
Fieldwork ID:	MON-0035840

About the designated centre

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

This is a service providing 24 hour care and support to five adults with disabilities. The house is in a rural setting, however, it is situated approximately three kilometres from Cavan town centre. Transport is provided so as residents can access nearby local towns and villages and avail of community-based amenities and activities. The house comprises of a bungalow with an entrance hall, a sitting room, and a kitchen cum dining room. There are five individual bedrooms for each resident with one having its own en-suite facility. There are also two communal bathroom available to residents and staff and a staff office. In addition to this, at the rear of the property there is staff a sleepover facility consisting of a double bedroom and en suite. There is a garden area to the front of the property with adequate private and on-street parking available. The house also has a large back garden with decking and raised flower beds. The service is managed by a full-time person in charge who is a qualified nursing professional. They are supported in their role by a team of staff nurses and healthcare assistants. During the day there are three staff on duty and at night there is one waking night staff on duty and one sleepover staff member available.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	5
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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 15 December 2022	11:00hrs to 14:30hrs	Raymond Lynch	Lead

What residents told us and what inspectors observed

This was an unannounced inspection to monitor and inspect the arrangements the provider had put in place for the management of infection prevention and control. The centre comprised of a detached house (inclusive of a one bedroom apartment) located in County Cavan and provided care and support to five residents.

On arrival to the house the inspector was met by a healthcare worker who asked for identification and, invited the inspector to use a hand sanitizing gel. The inspector observed that one of the residents had decorated some of the trees in front garden with lights for the Christmas season and they looked very festive. The house was also decorated inside with a Christmas tree and other assorted Christmas decorations. It was also observed to be clean, free from clutter and well maintained.

The apartment also appeared neat, clean and tidy and it was decorated to suit the individual needs of the resident that used it. For example, the resident had their own artwork on the wall.

The inspector met two residents and both appeared happy and comfortable in their home. They also appeared comfortable in the company and presence of staff. Staff were also observed to be person centred, caring and kind in their interactions with the residents.

Each resident had their own bedroom (some were ensuite) and two communal bathrooms were also available. The inspector observed three of the bedrooms and saw that they were clean, neat and tidy. They were also decorated to take into account the individual style and preferences of the residents.

The centre also had a sensory room with soft lights which residents could use if they wanted quiet time to relax by themselves. It also had a room with a treadmill where residents could exercise if they so wished.

The person in charge informed the inspector that one resident was attending day services and they liked to engaged in gardening programmes, go swimming, go shopping and have coffee out. On the day of this inspection two residents also went out with staff support for a coffee and one of them had an appointment to get their hair cut.

The inspector spoke to two healthcare assistants about the management of a suspected and/or confirmed case of COVID-19 in the centre and they were able to explain the steps to be taken in line with the centres individual COVID-19 plans and the contingency plans. They were also able to show the inspector where the spills kits were kept and, where PPE was stored in the centre.

A sample of feedback from family members on the quality of service was also reviewed by the inspector. Overall, family members reported that they were happy

with the care and support and thanked staff for their kindness shown to the residents. One family member also reported that their relative appeared very happy living in the centre.

Overall, residents appeared happy and settled in their home and staff were observed to be kind and caring in their interactions with the residents. The house (to include the apartment) appeared clean and free from clutter and the provider had systems in place to detect, respond and manage a suspected outbreak of COVID-19.

The next two sections of this report discuss the above in more detail.

Capacity and capability

The provider had in place a range of protocols, documents, guidelines and procedures so as to promote effective IPC systems in the house.

The person in charge was responsible for the implementation of the provider's guidance documents and procedures regarding IPC. However; to support the person in charge, the provider had put in place a mechanism for the overall governance and oversight of the service and for IPC related practices. For example, an IPC nurse specialist was available to provide support and advice to the person in charge and the centre. Additionally, the person in charge could link in with the Director and Assistant Director of Nursing to discuss any IPC related issue should one arise.

The inspector reviewed a number of documents the provider had in place to support their IPC operations. These included guidelines and procedures relating to IPC, training records, risk assessments and the providers contingency planning documents. The contingency planning document was clear and straightforward to follow. It also detailed information which guided the person in charge and staff team on how to respond to and manage, a suspected and/or confirmed outbreak of COVID-19 in the centre.

From speaking to two staff members over the course of this inspection, the inspector was assured that they were aware of the standard precautions to take in the event of a suspected and/or confirmed case of COVID-19 in the centre. Additionally, they were able to inform the inspector of the cleaning protocol in place for a piece of equipment in use in the centre.

From reviewing a small sample of records, the inspector observed that staff had training in antimicrobial stewardship, hand hygiene, the management of spills, IPC, respiratory hygiene and donning and doffing of PPE.

A number of audits to include quality enhancement plans and IPC related audits had been conducted in the centre. The most recent IPC related audit was carried out in October 2022. This audit identified areas of good practice with regard to IPC and

areas that needed addressing. Following the audit an action plan was drawn up so as to address any issues found. For example, the audit identified that a new toilet seat was needed in a bathroom, some high dusting was required around the centre, a weighing scales needed to be replaced, open foods needed to be labelled, an office chair needed to be disposed of and a new bin was required. All these issues had been actioned and addressed by the person in charge at the time of this inspection.

Quality and safety

The communication needs and preferences of the residents were clearly detailed in their personal plans and, the provider had developed a hospital passport and a communication passport for each resident so as to alert staff and other healthcare professionals to the residents assessed needs, how best to communicate with them and how best to support them.

Good practices were observed in relation to the delivery of person centred care and in some of the local implementation of infection prevention and control procedures. For example, the house was found to be clean, neat and tidy on the day of this unannounced inspection which helped to minimise the risk of acquiring a healthcare-associated infection.

There were systems in place to promote and facilitate good hand hygiene practices and antibacterial gels were available in different locations in the centre. Staff were also observed to use these hand gels over the course of the inspection. The provider had sufficient stock of PPE available in the house and staff were observed to use it in line with policy and national guidelines. There was also COVID-19 related signage on view at the entrance to the centre

The premises was found to be clean and, cleaning schedules were in place for high-touch areas such as light switches, door handles and remote controls. Cleaning schedules were also in place for bathrooms, bedrooms and the kitchen which helped ensure the overall effective hygiene of the centre. Staff were also observed to be adhering to the cleaning schedules in place in the house.

There was a colour-coded system regarding the use of mops so as to minimise the possibility of cross contamination. The person in charge informed the inspector that a new system regarding the mops and storage of same would soon be in place. They also reported that residents' linen could be washed on a 60% cycle or higher if required.

Throughout the course of this inspection, the inspector observed staff were following the provider's general guidelines and procedures on IPC, through the practices that were in place in the centre. For example, staff were observed appropriately wearing PPE, engaging in hand hygiene practices and the centre was

observed to be clean (in line with the enhanced cleaning schedules in place).

A number of issues were identified with the premises that could pose an IPC-related risk. For example, the area for laundering clothes required review, some flooring needed to be replaced and the area for storing mops required review. However, the person in charge showed evidence to the inspector that a plan was in place to address all issues regarding the premises and at the time of this inspection, many of them had already been addressed (as identified in section 1 of this report: Capacity and Capability).

Regulation 27: Protection against infection

The provider had in place a range of protocols, documents, guidelines and procedures so as to promote effective IPC systems in the house. Additionally, there were systems in place to detect, respond and manage and outbreak of COVID-19 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

