



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

Issued by the Chief Inspector

Name of designated centre:	Millbrook House
Name of provider:	The Rehab Group
Address of centre:	Offaly
Type of inspection:	Unannounced
Date of inspection:	16 August 2022
Centre ID:	OSV-0002665
Fieldwork ID:	MON-0037696

About the designated centre

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

Millbrook House is a designated centre operated by RehabCare. It provides a community residential service to up to three adults with a disability. The designated centre is a bungalow which comprises of three individualised resident bedrooms, an office, a sitting room, lounge, living room, kitchen/dining area and a shared bathroom. The designated centre is located in a rural location near a village in County Offaly with access to local amenities and facilities. The staff team consists of residential care workers. The staff team are supported by the person in charge.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	3
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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
Tuesday 16 August 2022	09:00hrs to 13:00hrs	Ivan Cormican	Lead

What residents told us and what inspectors observed

The inspector found that residents enjoyed a good quality of life and that they were actively consulted in regards to life choices and also the running and operation of their home.

This was an unannounced inspection to monitor infection prevention and control (IPC) arrangements in this centre. On the morning of inspection, two residents had left to attend day services and one resident was getting ready for the day ahead and they planned to attend their respective day service later in the morning. The inspector met with this resident as they prepared for the day ahead and they interacted on their own terms through the use of some words and gestures. They were relaxed and comfortable throughout the morning and the inspector observed that staff were patient and kind in their approach to care.

Residents had good access to their local community and they attended scheduled keyworker meetings where they discussed activities they would like to do and also issues like complaints and their satisfaction with the service which was provided. A review of minutes of these meetings indicated a general good level of satisfaction with the service and residents enjoyed a good social life by attending sporting events and going out shopping and for meals. The person in charge stated that one resident listened to the news and they were well informed in regards to COVID-19. The person in charge also indicated that IPC was discussed with residents at the keyworker meetings; however, the minutes of these meetings did not indicate that this was the case, and some improvements were required to ensure that residents were well informed in regards to public health guidance and also in regards to the IPC arrangements in this centre.

Residents enjoyed ongoing contact with their families and they went home for regular overnight stays. There were no restrictions in terms of residents having visitors and the person in charge indicated that family members would, on occasion, drop in for a cup of tea when a resident returned to the centre after a home visit. The centre also had a very homely feel and one resident had displayed their family tree which indicated how important their family was to them. There were also various photographs of them enjoying social events, parties and holidays which further indicated that residents were well supported to enjoy a good quality of life.

As mentioned above, the centre was very homely in nature and residents had the choice of two separate reception rooms in which to relax. There was a large open-plan kitchen and dining area and each resident had their own bedroom, one of which had an ensuite facility. There were two other bathrooms which residents could use and there was a pleasant patio area for residents to enjoy. Although the majority of the centre appeared clean, there were some maintenance issues which impacted on the staff's ability to clean and disinfect all areas of the centre and two domestic appliances did require further attention in terms of cleaning.

Overall, the inspector found that residents had a good quality of life and that IPC was generally promoted; however, improvements were required in terms of maintenance and the cleaning of domestic appliances.

Capacity and capability

The inspector found that the provider was aware of the importance of IPC and they were actively promoting staff awareness and practice in this centre. The IPC arrangements were also underpinned by a robust IPC policy which gave clear and concise instruction in this area of care.

The provider had produced an IPC policy which was subject to regular review and it was also readily available to staff in the centre. The policy was found to be robust as it gave clear and concise information as to how IPC was to be implemented in this centre. The policy introduced the importance of IPC as underpinning the health and wellbeing of residents and it clearly set out definitions of components such as cleaning and disinfecting. Critical functions such as the management of linen, cleaning, disinfecting, waste management and dealing with bodily fluids were clearly described in separate standing operating procedures (SOPs), which dealt with each individual topic in a practical manner and promoted an ease of use. There were 16 SOPs in total which were signed as being read by staff members and overall the inspector found that this policy and associated procedures actively assisted staff in promoting IPC in this centre.

The person in charge facilitated the inspection and they were found to have a good understanding of the residents' care need and also of the arrangements which were implemented to meet these needs. The person in charge also detailed the contents of the provider's IPC policy and how the named IPC procedures were implemented in this centre. The provider had also completed an unannounced specific IPC inspection which assisted in ensuring that IPC was generally maintained to a good standard. This audit did identify some maintenance issues which were addressed by the person in charge. There was also scheduled internal audits which did examine some aspects of IPC and again, this assisted in promoting IPC in this centre. However, both of these audits failed to identify maintenance issues which were found on this inspection. For example, flooring was worn and damaged in the kitchen area and also in the reception rooms and the hall. There was damage to a wall and some tiling was cracked in a bathroom. In addition, some kitchen cabinet doors and a kitchen counter top were also damaged which impacted on staff members' ability to clean and sanitise these areas.

The inspector met with one staff member prior to the conclusion of their shift and they were found to have a good understanding of residents' care needs and also of the IPC arrangements which promoted their health and wellbeing. For example, the staff member explained how a resident's care needs meant that staff required an increased awareness of cleaning and disinfection of surfaces and that they monitor

certain described behaviours to ensure that IPC was promoted at all times. The staff member also had a good understanding of how the centre was cleaned and sanitised and they explained how the sanitising solution which they used, required to be in contact with surfaces for a prescribed length of time in order to be effective.

The Provider ensured that staff members had been appropriately trained in order to promote IPC measures and ensure that the health and welfare of residents was to the forefront of care. Staff had completed training in IPC, the use of PPE and also in regards to hand hygiene. The person in charge also facilitated scheduled team meetings which discussed IPC which assisted in reinforcing staff knowledge in regards to IPC measures and procedures. As mentioned above, a staff member had a good knowledge of cleaning and disinfecting the centre and these topics had been recently reviewed at a staff meeting.

Overall, the inspector found that the provider had an IPC policy which promoted good practices within the centre and assisted in promoting the health and welfare of residents.

Quality and safety

The inspector found that residents were supported to enjoy a good quality of life and that the IPC arrangements generally promoted residents' health and wellbeing. However, some improvements were required in regards to maintenance and the cleaning of some domestic appliances.

There were enhanced cleaning practices in place with staff also completing additional disinfection of frequently touched points such as handles and light switches. Generally, cleaning was maintained to a good standard; however, as mentioned earlier some maintenance issues were impacting on staff members' ability to clean and sanitise these areas thoroughly. The inspector noted that one resident's needs required that surfaces were regularly cleaned and sanitised but a damaged counter top which a resident liked to frequently touch was damaged which did present as an IPC risk. The inspector examined domestic appliance and found that the centre's refrigeration appliance was well cleaned internally and both cooked and raw foods well separated. However, this appliances door seal required further attention in terms of cleaning. In addition, another appliance had a corroded interior which impacted on staff member's ability to clean it thoroughly.

There were many good examples of IPC practice in this centre. For example staff members were well aware the colour coded cleaning system which was in place and assisted in the prevention of cross contamination between various sections of the centre. Staff members could also explain the recommended cleaning and sanitisation products which they used and they had a good understanding of residents' care requirements, including isolation plans, should they acquire COVID-19. A staff member also explained how they monitor for the disease and they clearly outlined

the immediate actions they would take if a resident became symptomatic.

The provider had also completed contingency planning in regards to COVID-19 which clearly set out how the centre prepared for a potential outbreak with plans clearly outlining how residents would be supported to self isolate. The person in charge made some adjustments to these plans on the day of inspection to further clarify how staff would enter and leave the centre during an outbreak and also the proposed location of both donning and doffing areas for PPE. Planning also outlined how the centre's staffing ratios would be maintained and also the supports which would be implemented by senior management in order to ensure that the quality and safety of care would be maintained to a good standard.

There was no shared equipment in use and staff members could clearly describe the arrangements for managing waste and contaminated linen. Residents who used this service also required minimal interventions with their health needs; however, they were well supported to attend for medical attention if required and also for regular health checkups.

Overall, the inspector found that residents had a good quality of life and in general, the IPC arrangements promoted residents' health and well being; however, there were some issues in regards to maintenance, cleaning of domestic appliances and supporting residents' understanding of IPC.

Regulation 27: Protection against infection

Infection prevention and control underpins the health and wellbeing of residents who use residential services. It was clear from this inspection that the provider was aware of the importance of IPC and they had arrangements in place which actively promoted this area of care. Although the centre's policy on IPC was robust and gave clear instruction on areas such as cleaning, disinfecting and managing waste and contaminated linen, the inspector found that improvements were required in regards to maintenance, cleaning of domestic appliances and supporting residents to understand IPC and also public health guidance.

Judgment: Substantially 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	Substantially compliant

Compliance Plan for Millbrook House OSV-0002665

Inspection ID: MON-0037696

Date of inspection: 16/08/2022

Introduction and instruction

This document sets out the regulations where it has been assessed that the provider or person in charge are not compliant with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) With Disabilities) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

This document is divided into two sections:

Section 1 is the compliance plan. It outlines which regulations the provider or person in charge must take action on to comply. In this section the provider or person in charge must consider the overall regulation when responding and not just the individual non compliances as listed section 2.

Section 2 is the list of all regulations where it has been assessed the provider or person in charge is not compliant. Each regulation is risk assessed as to the impact of the non-compliance on the safety, health and welfare of residents using the service.

A finding of:

- **Substantially compliant** - A judgment of substantially compliant means that the provider or person in charge has generally met the requirements of the regulation but some action is required to be fully compliant. This finding will have a risk rating of yellow which is low risk.
- **Not compliant** - A judgment of not compliant means the provider or person in charge has not complied with a regulation and considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of residents using the service will be risk rated red (high risk) and the inspector have identified the date by which the provider must comply. Where the non-compliance does not pose a risk to the safety, health and welfare of residents using the service it is risk rated orange (moderate risk) and the provider must take action *within a reasonable timeframe* to come into compliance.

Section 1

The provider and or the person in charge is required to set out what action they have taken or intend to take to comply with the regulation in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that regulation, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. The response must consider the details and risk rating of each regulation set out in section 2 when making the response. It is the provider's responsibility to ensure they implement the actions within the timeframe.

Compliance plan provider's response:

Regulation Heading	Judgment
Regulation 27: Protection against infection	Substantially Compliant
<p>Outline how you are going to come into compliance with Regulation 27: Protection against infection:</p> <ul style="list-style-type: none">• Microwave was replaced on 22.08.22.• Fridge seals were cleaned on 16.08.22.• Cleaning of the fridge seals has been added to the weekly cleaning roster, this was completed on 18.08.22.• Housing Association visited the service to review upgrade works required on 18.08.22 to highlight the works required. These works will be completed by 30.06.23.• The provider's internal monthly audit template will be reviewed and updated to include IPC checks. This will be completed by 25.09.22.• Maintenance section has been added to the weekly audit this was completed on 05.09.22.• Staff informed at team meeting that IPC/COVID should occasionally be discussed with the residents as part of keyworking meetings, this was completed on 06.09.22.	

Section 2:

Regulations to be complied with

The provider or person in charge must consider the details and risk rating of the following regulations when completing the compliance plan in section 1. Where a regulation has been risk rated red (high risk) the inspector has set out the date by which the provider or person in charge must comply. Where a regulation has been risk rated yellow (low risk) or orange (moderate risk) the provider must include a date (DD Month YY) of when they will be compliant.

The registered provider or person in charge has failed to comply with the following regulation(s).

Regulation	Regulatory requirement	Judgment	Risk rating	Date to be complied with
Regulation 27	The registered provider shall ensure that residents who may be at risk of a healthcare associated infection are protected by adopting procedures consistent with the standards for the prevention and control of healthcare associated infections published by the Authority.	Substantially Compliant	Yellow	30.06.2023