



**Health  
Information  
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Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

# Report of a Restrictive Practice Thematic Inspection of a Designated Centre for Older People.

## Issued by the Chief Inspector

Name of designated centre:	Rosenalee Care Centre
Name of provider:	Rosenalee Care Centre Limited
Address of centre:	Poulavone, Ballincollig, Cork
Type of inspection:	Unannounced
Date of inspection:	06 March 2024
Centre ID:	OSV-0000277
Fieldwork ID:	MON-0037949

## 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 Care Settings for Older People in Ireland**. 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 Welfare of Residents in Designated Centres for Older People) Regulations 2013* as **'the intentional restriction of a person's voluntary movement or behaviour'**.

Restrictive practices may be physical or environmental<sup>1</sup> 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 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.

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<sup>1</sup> Chemical restraint does not form part of this thematic inspection programme.

## 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 6 March 2024	09:10hrs to 16:30hrs	Siobhan Bourke

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

This was an unannounced inspection which focused on the use of restrictive practices in the designated centre. This inspection found that Rosenalee Care Centre was a service where a rights-based approach to care was promoted by management and staff. Residents were supported to express their wishes and choices with regard to the care provided to them and how they spent their day. Through observations and conversations with residents, it was evident that residents, living in this designated centre, were supported to have a good quality of life.

On arrival to the centre, the inspector observed that there was adequate parking for visitors both in front of and behind the centre. As the centre was situated adjacent to a main road, there was a key-pad lock used to open and close the main entrance door, due to the few residents at a high risk of absconding. A member of staff greeted the inspector on their arrival. The inspector was informed that long term residents living in the centre and their families had access to a code for the entrance doors, unique to each resident, to enable them to freely access the centre. The inspector saw relatives use this code during the inspection. During the day, numerous visitors were coming and going from the centre and those who spoke with the inspector were happy with the visiting arrangements in place.

Rosenalee Care Centre is a family run, large two storey centre, located in the suburban town of Ballincollig and registered to accommodate 66 residents, with 60 residents living in the centre on the day of inspection. The design and layout of the premises met the individual and communal needs of the residents. The centre was laid out over two floors and was accessible by a large lift. Residents' private accommodation includes 23 single bedrooms upstairs and accommodations for 43 residents downstairs in mainly single and a small number of twin bedrooms.

Following an introductory meeting to outline the plan for the inspection, the person in charge accompanied the inspector on a walkaround the premises. The inspector observed that the physical environment allowed for care to be provided in a non-restrictive manner. Residents living in the centre had access to a wide range of assistive equipment such as wheelchairs, rollators and walking aids to enable them to be as independent as possible. A number of residents were seen mobilising independently around the centre.

The inspector saw that many of the residents were up and dressed for the day's activities, while others were enjoying a leisurely breakfast in bed. Many residents had decorated their rooms with photos and memorabilia and some residents had brought in their own furniture. There were no restrictions on when residents could access

their bedrooms. The privacy curtains in the shared rooms had been replaced since the previous inspection, to ensure residents' had adequate privacy. Many residents were watching mass streamed on their bedroom televisions in the morning and a group of residents watched mass on a large smart TV in the upstairs dayroom.

There were plenty communal areas and rooms for residents use on both floors in the centre. As well as two day rooms, one on each floor; and two dining rooms downstairs, the centre had a cosy sitting room that opened into a conservatory. The inspector saw that this room was used by many of the residents during the day to sit and chat, watch TV, or listen to music. The centre had a café style library with access to a kitchenette, where relatives and residents could sit and chat and enjoy a beverage together. While other residents were sitting near the back reception area enjoying a cup of tea and chatting to staff as they passed.

In addition to the communal areas in the centre, residents could freely access a large enclosed courtyard garden. A water feature had been installed in the previous year and added to the restfulness of the space. Mature plants and raised beds were very well maintained and was an inviting space for residents. Residents told the inspectors how they loved to sit outside or walk around the gardens when the weather was fine.

Residents spoke positively about their experience of living in the centre and detailed how staff supported them to engage in activities of their choosing. During the morning, a group of residents in the ground floor day room, participated in ball games with the activity coordinator which they appeared to enjoy. In the afternoon, a small group of residents were adding verses to a poem they were composing about their life in Rosenalee which they hoped to turn into a song. A lively proverbs session followed, led by the activity co-ordinator, in the large dayroom upstairs. Some residents chose not to take part in activities and choose to watch TV in their bedrooms or read newspapers or books.

The inspector spent time in the various communal areas of the centre observing staff and resident interaction. The inspector observed that personal care and grooming was attended to a good standard. Staff were patient and kind, and while they were assisting residents with their needs, care delivery was observed to be unhurried and respectful. Positive meaningful interactions were observed between staff and residents throughout the inspection. The inspectors saw staff assist residents with walking and encouraging them to use their mobility aids where required. The inspector observed that staff chatted freely in a friendly manner, with residents during the day. A resident described how they loved writing books and how the staff in the centre enabled them with their project. Another told the inspector how staff were "great to us." Residents' right to vote had been facilitated in the centre, for the referendum scheduled for March 8 2024.

The inspector saw that restrictive practices in use in the centre were five bedrails and one sensor mat. Restrictive practices were seen to be reviewed at least every four months, with the purpose of reducing or eliminating the practice. The management team were constantly reviewing the use of restrictive practices in the centre and engaged with residents and their relatives in this process. An information leaflet on positive risk taking for residents was available near reception in the centre.

The inspector had the opportunity to meet with five visitors on the day, who spoke positively about the care their family member received. One relative described the centre as a "home away from home" and how the nursing team were great to communicate any concerns or changes in their relatives' wellbeing. Residents were encourage to go on days out with their families.

Residents were consulted on their views of the running of the centre through residents meetings and regular surveys. Feedback from residents meeting were actioned by the management team. Residents had access to advocacy services when needed.

Conversations had with residents clearly identified that residents were very happy with the service provided. Residents stated that they felt safe living in the centre. Residents told the inspector that they choose where to spend their day, what time to get up and return to bed and that they did not feel restricted in any way. The inspector saw that residents who smoked had risk assessments in place and had no restrictions on access to their cigarettes. Residents were knowledgeable on who the person in charge was and the general manager. Residents voiced that they would not hesitate to make a complaint. Overall, the inspector summarised that residents lived a good quality of life where they were facilitated to enjoy each day and their independence was promoted.

## Oversight and the Quality Improvement arrangements

Overall, the inspector found that there was effective governance and leadership in the centre, which supported a commitment to quality improvement with respect to restrictive practices, person-centred care, and promoting residents' rights. There was a positive and proactive approach to reducing restrictive practices and promoting a restraint free environment in this service.

The person in charge was familiar with the guidance and had been working with the nursing and care team to reduce where possible, restrictive practices. The centre had completed the self-assessment questionnaire and submitted it to the Office of the Chief Inspector for review. The person in charge assessed the standards relevant to restrictive practices as being compliant, with the exception of resources and effective care, which was assessed as substantially compliant. A quality improvement plan had been actioned by the time of the inspection, in relation to ensuring night staff had access to appropriate training.

The registered provider had a policy in place for the use of restraint and restrictive practices that underpinned the arrangements in place to identify, monitor, and manage the use of restrictive practices in the centre. This policy was in accordance with national policy and best practice. There were arrangements in place to monitor and evaluate the quality of the service through scheduled audits. The programme of audits included an audit of restrictive practices.

Staff were appropriately trained in safeguarding vulnerable adults, behaviours that challenge and restrictive practice. Staff were provided with face-to-face training from an external provider, with regard to behaviours that challenge, with regular sessions scheduled each year in the centre. Staff who spoke with the inspector regarding restrictive practices and management of restraint were knowledgeable and displayed good understanding of same. Staff confirmed that there was an adequate number of staff and a good skill mix in order to meet residents' needs.

The person in charge maintained a register of all restrictive practices in use in the centre and these were updated regularly. The inspector was assured that records were maintained in relation to safety checks with regard to use of bedrails in the centre.

The centre had access to equipment and resources that ensured care could be provided in the least restrictive manner to all residents. Where necessary and appropriate, residents had access to low-low beds, instead of having bed rails raised. The physical environment was set out to maximise resident's independence with

regards to flooring, lighting and handrails along corridors. The inspector was satisfied that residents were not unduly restricted in their movement or choices, due to a lack of appropriate resources or equipment. Staff confirmed that there were adequate staff and a good skill mix in order to meet residents' needs.

The inspector reviewed the care plans for residents who had bedrails in place and found clear documentation was in place. There was evidence to show that staff had trialled alternative less restrictive methods.

Complaints were recorded separately to the residents' care plans. The complaints procedure was clearly displayed in the centre and both residents and their families were aware of the process.

Overall, the inspector found that there was a positive culture in Rosenalee Care Centre, with an emphasis on a restraint free environment to support a good quality of life, which promoted the overall wellbeing of residents while living in the centre.



## 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.

### The National Standards

This inspection is based on the *National Standards for Residential Care Settings for Older People in Ireland (2016)*. Only those National Standards which are relevant to restrictive practices are included under the respective theme. Under each theme there will be a description of what a good service looks like and what this means for the resident.

The standards are comprised of two dimensions: Capacity and capability; and Quality and safety.

There are four themes under each of the two dimensions. The **Capacity and Capability** dimension includes the following four themes:

- **Leadership, Governance and Management** — the arrangements put in place by a residential service for accountability, decision-making, risk management as well as meeting its strategic, statutory and financial obligations.
- **Use of Resources** — using resources effectively and efficiently to deliver best achievable outcomes for people for the money and resources used.
- **Responsive Workforce** — planning, recruiting, managing and organising staff with the necessary numbers, skills and competencies to respond to the needs and preferences of people in residential services.
- **Use of Information** — actively using information as a resource for planning, delivering, monitoring, managing and improving care.

The **Quality and Safety** dimension includes the following four themes:

- **Person-centred Care and Support** — how residential services place people at the centre of what they do.
- **Effective Services** — how residential services deliver best outcomes and a good quality of life for people, using best available evidence and information.
- **Safe Services** — how residential services protect people and promote their welfare. Safe services also avoid, prevent and minimise harm and learn from things when they go wrong.
- **Health and Wellbeing** — how residential services identify and promote optimum health and wellbeing for people.

List of National Standards used for this thematic inspection:

## Capacity and capability

<b>Theme: Leadership, Governance and Management</b>	
5.1	The residential service performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each resident and promote their welfare.
5.2	The residential service has effective leadership, governance and management arrangements in place and clear lines of accountability.
5.3	The residential service has a publicly available statement of purpose that accurately and clearly describes the services provided.
5.4	The quality of care and experience of residents are monitored, reviewed and improved on an ongoing basis.

<b>Theme: Use of Resources</b>	
6.1	The use of resources is planned and managed to provide person-centred, effective and safe services and supports to residents.

<b>Theme: Responsive Workforce</b>	
7.2	Staff have the required competencies to manage and deliver person-centred, effective and safe services to all residents.
7.3	Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of all residents.
7.4	Training is provided to staff to improve outcomes for all residents.

<b>Theme: Use of Information</b>	
8.1	Information is used to plan and deliver person-centred, safe and effective residential services and supports.

## Quality and safety

<b>Theme: Person-centred Care and Support</b>	
1.1	The rights and diversity of each resident are respected and safeguarded.
1.2	The privacy and dignity of each resident are respected.
1.3	Each resident has a right to exercise choice and to have their needs and preferences taken into account in the planning, design and delivery of services.
1.4	Each resident develops and maintains personal relationships and links with the community in accordance with their wishes.
1.5	Each resident has access to information, provided in a format appropriate to their communication needs and preferences.

1.6	Each resident, where appropriate, is facilitated to make informed decisions, has access to an advocate and their consent is obtained in accordance with legislation and current evidence-based guidelines.
1.7	Each resident's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.

### Theme: Effective Services

2.1	Each resident has a care plan, based on an ongoing comprehensive assessment of their needs which is implemented, evaluated and reviewed, reflects their changing needs and outlines the supports required to maximise their quality of life in accordance with their wishes.
2.6	The residential service is homely and accessible and provides adequate physical space to meet each resident's assessed needs.

### Theme: Safe Services

3.1	Each resident is safeguarded from abuse and neglect and their safety and welfare is promoted.
3.2	The residential service has effective arrangements in place to manage risk and protect residents from the risk of harm.
3.5	Arrangements to protect residents from harm promote bodily integrity, personal liberty and a restraint-free environment in accordance with national policy.

### Theme: Health and Wellbeing

4.3	Each resident experiences care that supports their physical, behavioural and psychological wellbeing.
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