



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

Issued by the Chief Inspector

Name of designated centre:	Windfall
Name of provider:	Stepping Stones Residential Care Limited
Address of centre:	Wexford
Type of inspection:	Unannounced
Date of inspection:	11 July 2024
Centre ID:	OSV-0007824
Fieldwork ID:	MON-0044102

About the designated centre

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

Windfall is located in a rural setting in Co. Wexford close to a beach and other amenities such as shops and restaurants. It is a large detached bungalow set in a garden that wraps around the property and includes an area with play equipment. Internally there is an open plan kitchen dining area and a large living room. The centre is currently in use for one child but is registered for a maximum of two children. Each child would have their own bedroom and bathroom available for their use.

The centre is staffed at all times seven days a week and 52 weeks of the year, with a minimum of two staff both day and night. The team is comprised of social care workers and health care assistants.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	2
--	---

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 11 July 2024	10:00hrs to 15:00hrs	Tanya Brady	Lead
Thursday 11 July 2024	10:00hrs to 15:00hrs	Conor Brady	Support

What residents told us and what inspectors observed

This inspection was completed to monitor compliance against Regulations and standards and was carried out by two inspectors over one day. On the day of inspection there a planned loss of power was in place which meant that the provider and person in charge had a number of external activities planned for the children who lived here. Overall findings of this inspection were that the children living in this centre were in receipt of a good quality of care and support and were supported to engage in activities that were fun and in line with their expressed preferences.

This centre is a bungalow in a rural location in County Wexford and is registered for a maximum of two and is currently fully occupied. The house comprises a large living room, kitchen-dining room, utility room, two bedrooms for the children and a staff office and one shared bathroom. Outside the garden to the rear is secure and filled with toys and play equipment, to the front is ample parking and a lawn area with a trampoline. The centre was well presented and there had been some maintenance completed since the previous inspection with new flooring and some painting completed. The centre was decorated in a manner that reflected the interests of the children who lived here.

The children were attending July educational provision when inspectors arrived to the centre however, returned to their home for lunch and personal care before leaving for planned activities for the afternoon. Inspectors had the opportunity to meet both children, the staff team and the local management team over the day. Inspectors also had the opportunity to review documentation and completed a review of the premises.

As stated the inspectors both had the opportunity to spend time with the children during the inspection. Children in the centre communicated in a number of ways which included gestures, vocalisations, body language and behaviours. Children required staff who were supporting them to be familiar with them, and in turn, to be able to recognise and respond to all forms of communication in a clear and consistent way. Staff reported that children's communication skills had developed over time and that they were seeing a positive impact as a result of the consistent approach of staff. The inspector saw positive and friendly interactions between children and staff. One child looked to staff regarding their snack options by opening the fridge and pointing to a variety of possible choices. Staff responded positively to the child's requests for lunch and the child smiled when they were told what available. The inspector saw staff responding positively to children's non-verbal interactions. For example, inspectors saw residents and staff exchanging smiles, winks and high-fives.

On arrival to the centre as stated the children were attending educational provision, however, the centre team leader and person in charge were present. The senior manager who holds the role of person participating in management ensured they were available to inspectors. The rostered staff team arrived to the centre shortly

before the children returned home. Staff were observed preparing for the children's arrival and greeted them off the bus and followed the routine of coming home including shoes off and bags away.

Children were observed relaxing in preferred areas of their home, this was either in their bedroom or in the communal areas. Staff were aware of when the children required company and engagement in play or time on their own. The children's possessions and toys were neatly displayed and available to them. In the afternoon of the inspection the children had planned activities such as to a playground or to the beach as the centre was without power.

All staff on duty met and spent time in discussion with inspectors. They spoke of their training and how they used this to support them when they approached offering choices or planning activities both in or out of the house. They spoke about trying to develop children's independence and their skills in activities of daily living. This included learning where to put their belongings when they returned home to selecting a plate or bowl from the cupboard when a snack was being prepared. These tasks supported children to maintain their autonomy in respect of their daily activities. Children were also gently prompted by staff to complete personal care, such as washing their hands.

Overall, children were well supported in their home and it was evident that the staff on duty on the day of the inspection were endeavouring to ensure that they had a good quality of life and that they continued to develop skills to enable them to become more independent. The next two sections of the report present the inspection findings in relation to the governance and management of the centre, and how governance and management affects the quality and safety of the care and support being delivered.

Capacity and capability

This section of the report sets out the findings of the inspection in relation to the leadership and management of the service, and how effective it was in ensuring that a good quality and safe service was being provided. There were management systems in place to ensure that the service provided was safe, consistent and appropriate to children's assessed needs.

Overall, the inspectors found that there were oversight arrangements in place at provider level in order to ensure the quality and safety of care. In addition inspectors found that the management systems at a local level was also ensuring that the service was consistently and effectively monitored. The person in charge had a dual role, and was person in charge for another designated centre nearby.

Regulation 15: Staffing

The inspectors observed that there were sufficient staff on duty to meet the assessed needs of the children and to provide care in an individualised and person-centred manner. The provider continues to review the total staffing complement in the centre and the inspectors were told that this was to ensure a positive impact on the children. New staff had been recruited by the provider and were scheduled to start within a few weeks of the inspection and one vacancy as a result of long term leave was currently consistently filled. Inspectors saw that children were supported by a familiar staff team who knew them and their needs well. Staff members on duty on the day of the inspection were found to provide support to children in a gentle and respectful manner.

The inspectors reviewed the rosters from the weeks preceding the inspection and the current inspection. The rosters showed that the number of staff was appropriate to the number and assessed needs of the children and was in line with the statement of purpose. There was a small panel of regular relief staff available in order to fill gaps in the roster. This was supporting continuity of care for the children.

Judgment: Compliant

Regulation 16: Training and staff development

Staff in this centre told the inspectors that they felt well-supported and that they were in receipt of supervision from the person in charge or the team leader. The inspectors found that the supervision records had been clearly maintained in a manner which allowed inspectors to verify that supervision had been completed in line with the provider's policy. The inspectors found that matters raised in supervision were followed up and there was clear evidence of queries or concerns being addressed through this process.

A training matrix was reviewed on the day of inspection. Inspectors saw that staff had completed training in key areas including fire safety, safeguarding vulnerable adults and infection prevention and control. Staff had also completed required training to meet children's assessed needs. The review of the training matrix also showed that staff had completed refresher trainings where these were required.

Judgment: Compliant

Regulation 23: Governance and management

There was a clearly defined management structure in the centre. The person in charge of the centre was a dual person in charge, and had responsibility for another designated centre nearby. They were supported in their role in this centre by a full time team leader and by a member of the provider's senior management team who held the role of person participating in management. These lines of authority and accountability were clear to the staff team who stated that they knew who to speak with if they had a concern. The centre management structure was having a positive impact on the day-to-day monitoring and oversight arrangements in the centre.

The centre had clear systems of local oversight of the day-to-day running of the centre in place. While the person in charge was not always on-site due to their additional duties in the other designated centre the team leader provided a consistent presence. The impact of this was that risks or incidents, for example, were identified on provider's audits or controlled for on a day-to-day basis. Additionally, there were no gaps in the maintenance of local paperwork, for example in staff supervision records and the emergency folder. Staff meetings were occurring as required.

The provider had completed six-monthly unannounced visits and an annual review of the quality and safety of care. These were completed in consultation with the residents in line with regulatory requirements. Actions identified on these audits were inputted on a tracker where to ensure that actions were completed in a timely manner. There was overview of progress against these actions documented in meetings between the person in charge and the person participating in management.

Judgment: Compliant

Quality and safety

This section of the report details the quality of the service and how safe it was for the children who lived in the designated centre. Overall, the welfare of children in the centre was maintained by a good standard of care and support.

Inspectors found that the premises had been upgraded since the last inspection, which meant that there was now new flooring, fresh decoration in bedrooms, refurbishment of the bathroom and new furniture for the children to use and relax in. The environment was found to be clean and well maintained.

Regulation 13: General welfare and development

From a review of care plans and progress notes, it was evident that both children were supported to engage in a number of meaningful activities in line with their assessed needs and expressed preferences. They were able to access activities and place of interest independently of one another due to the allocation of staff and transport being available.

Staff spoke of how they visited areas in advance to assess the safety of the environment for example, how secure a playground was. These advance assessments ensured children had the maximum freedom for running and playing. Children were going on walks independently of one another and together. They had been for picnics and were supported to build sandcastles on the beach.

The children were supported to attend school and both really enjoy the routine of attending and engaging with their peers. One child was developing independence skills when shopping and would push the trolley and help put items into it when supported by staff. Children were supported to maintain relationships with family members through family access visits, video calls and visits to the centre.

Judgment: Compliant

Regulation 17: Premises

Inspectors walked through the premises with the team leader, person in charge and later with the staff team. The centre was found to be clean, welcoming and homely. Consideration had been given to the individual children's assessed needs and some areas were calming and clutter free while others allowed for running and jumping. As stated this centre was a large bungalow in a rural area in County Wexford and was surrounded by a large garden.

The children had their own bedrooms and these were seen to have been individually decorated to reflect the children's current areas of interest. The children's toys and books were available for them to access and they had time to access their electronic tablets or the television as part of their daily routine.

Judgment: Compliant

Regulation 26: Risk management procedures

The inspectors viewed the risk management policy, the centre's risk register and risk assessments relating to children, incidents and accidents and the centre's safety statement. It was evident that significant work was being completed on an ongoing basis to ensure that the risk register and associated risk ratings were in line with live risks in the house.

A small number of adverse incidents had occurred in the centre. These were found to be documented and reported in line with the provider's policy. The team leader and person in charge and the person in charge and person participating in management reviewed these on a regular basis to ensure ongoing review of risk was completed.

Judgment: Compliant

Regulation 28: Fire precautions

The inspectors carried out a walk around of the property with the person in charge and found that there was fire fighting equipment, emergency lighting and smoke alarms in place. Fire doors were also in place and the inspectors noted that door closers had been installed on all fire doors and were regularly reviewed.

The fire folder for the centre was reviewed and documentation relating to weekly walk rounds, servicing and maintenance of equipment were in place. Fire drills occurred in the house, including times when the minimum staffing complement were available. The person in charge maintained oversight of these drills and any issues arising. Where required, drills were repeated to ensure that the measures in place for evacuation remained effective.

Personal emergency evacuation plans were reviewed and in place for all children.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

The provider had ensured that there were clear procedures and systems in place to support the staff team in the administration of and the management of medicines in the centre. The inspectors found that the person in charge had implemented changes to practice identified as required during the last inspection of the centre that were in line with actions identified by the provider in their submitted compliance plan following that inspection.

The inspectors observed that there was suitable storage facilities for medicines, including a system for medicines for return to the pharmacy. There was also a lockable container for the fridge available for medicinal products if that were to be

required. The keys of medication storage units were in a locked box with a code in the staff office.

Staff had completed safe administration of medicines training and they had a competency assessment completed by the local management team. Monthly audits of medicines were completed in the centre and the inspectors reviewed samples of these audits for 2024. The inspectors reviewed prescriptions (kardex) for the children, the administration records and guidance on the administration of 'as required' medicines.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

The inspectors found through the review of children's information that there were detailed assessments of need and personal plans in place. There were appropriate systems for assessing their health and social care needs. These assessments in conjunction with the assessments of health and social care professionals guided the development of personal care plans.

Children's care plans were created and reviewed regularly. Care plans captured the changing needs of the children and gave clear directions on how to support them best in line with their wishes and preferences.

Judgment: Compliant

Regulation 6: Health care

The inspectors reviewed each child's assessment of need and their personal plans and found that their healthcare needs were assessed and healthcare plans were developed and reviewed as required.

They were accessing health and social care professionals in line with their assessed needs such as occupational therapy, dietitian, dentist, physiotherapy, GP and the relevant consultants. A record of all their appointments was recorded and they were being supported to implement recommendations that arose from these appointments in a meaningful way as part of their daily routine. For example the use of deep pressure as a sensory support was provided when staff supported a child with dressing as directed by Occupational therapy.

Judgment: Compliant

Regulation 8: Protection

The provider had a number of control measures in place to safeguard children and ensure that each child was not impacted upon by the behaviour of another. These measures included appropriate staffing, sufficient transport and a home that provided space for children to be on their own at times. Inspectors noted that there were clear systems in place to engage with the external agencies who were involved in the children's care and decision making. Inspectors viewed documentation and correspondence with the external agencies that formed part of routine reviews or in relation to any incidents which had occurred. The inspectors found that engagements and management of incidents was completed by the provider in line with national policy.

Children had intimate and personal care plans in place which gave clear guidance to staff on the level of support each child needed and which ensured each child's right to autonomy, privacy and dignity were promoted and upheld during these care routines.

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	
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Quality and safety	
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant