

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

Issued by the Chief Inspector

Name of designated centre:	Seaview
Name of provider:	Talbot Care Unlimited Company
Address of centre:	Louth
Type of inspection:	Short Notice Announced
Date of inspection:	20 February 2024
Centre ID:	OSV-0008584
Fieldwork ID:	MON-0041012

About the designated centre

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

Seaview is a two storey detached property situated on a large site in the countryside in County Louth in close proximity to a seaside town. The centre can accommodate male and female adults some of whom have intellectual disabilities, autistic spectrum and/or acquired brain injuries. On the first floor, there are two bedrooms (one with en-suite bathroom) a large living area and a shared bathroom. On the ground floor, there are three bedrooms a kitchen/ dining room, a separate living room a shared bathroom/wet room, WC, office, and utility room. The property is surrounded by a large garden and driveway with ample parking outside. The staff team consists of a fulltime person in charge, two team leaders and direct support workers. There are generally three staff on duty during the day and two waking staff at night. Three of the residents attend a day service and one resident prefers to plan a meaningful day with the support of staff in Seaview. Transport is provided as the property is located in the countryside. The residents have access to a range of allied health professionals to support their needs.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	4
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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 20 February 2024	10:20hrs to 16:45hrs	Anna Doyle	Lead

What residents told us and what inspectors observed

Overall, this centre was well-resourced and provided person centred care to the residents living here. This was evidenced in the high levels of compliance found in the regulations inspected.

The centre is registered to accommodate five residents and at the time of the inspection, four residents were living there.

On arrival to the centre the inspector was greeted by a resident and the person in charge. The resident showed the inspector around their home and talked about some of the things they enjoyed doing with the support of staff.

The centre was decorated to a very high standard, clean and well maintained. All of the residents had their own bedrooms and one had an en-suite bathroom. The bedrooms were spacious and decorated in line with the residents' preferences. Some of the residents were getting additional furniture to make their bedroom more comfortable or in line with their preferences. For example; one resident was getting a recliner chair for their bedroom as they enjoyed watching music videos there. One resident had converted part of their bedroom into an office. This resident loved computers and helped with shredding/printing and laminating records in the centre.

The kitchen was spacious and well equipped. Residents and staff were observed having lunch together which created a homely feel. There was a separate utility room where residents could do their laundry if they wished.

There are two sitting rooms, one downstairs and a larger one upstairs which looked out over the sea. One of the residents said that they preferred the downstairs sitting room as it was near the kitchen and was busier. Whereas, other residents liked to go upstairs if they wanted some quiet time. For example; when one resident came home from their day service they went upstairs to relax. This resident said they liked their home and the staff working in the centre and talked about a family holiday abroad that they were looking forward to in the summer time.

The property is situated on a large site and there was ample space outside for residents to enjoy. At the time of the inspection a privacy fence was being erected.

Prior to the inspection the residents completed questionnaires with the support of staff about whether they were happy with the services provided. Overall, the feedback was very positive. Residents reported that they were happy with all aspects of care in the centre. One resident said they liked the staff, as they were kind and funny and enjoyed the food that staff cooked in the centre.

Some of the residents used different styles of communicating and the person in charge had made a referral to the speech and language therapist to see if assistive aids may enhance their communication styles. Easy read information was available

for residents and some visual aids were used to inform and educate residents. For example; there were visual education aids on the bathroom doors to show residents how to use the turn key lock on the door to maintain their privacy. For some of the residents routine and reminders were important to them so they had calendars which they wrote on to remind them when they were going home.

All the residents had access to a land line phone and WiFi. The inspector observed that some of the residents had electronic tablets, and access to the internet to watch movies they liked. One resident informed the inspector about their interest in 80's and 90's music. As a way of promoting this resident's skills/interests, they had created play lists for other residents when celebrating birthdays.

On a Sunday night residents held weekly meetings to discuss things that were happening in the centre. A sample of records viewed showed that residents were also provided with education on the importance of fire safety, protection from abuse and making a complaint. The inspector observed a good example where residents chose what was discussed at these meetings. For example; all of the residents agreed that they did not want to plan the weekly menu at these meetings; instead they wanted to decide on daily basis what they wanted to eat.

Residents were supported to maintain links with family and friends. Most of the residents had moved to this centre from their family home and so continued to go home for overnight stays. One of the residents was planning to invite one of their friends to their birthday party in the coming weeks.

The person in charge had also collated feedback from family representatives about the service provided to their family members since they had moved to the centre. Following this, the person in charge facilitated a family forum event so as all of the family representatives could meet. At this forum, the person in charge made families aware of the complaints process and advocacy services that their family member could avail of. The feedback from this forum was overall very positive. Some of the comments from this included ' staff are patient and kind', staff are brilliant and have lovely relationships with the residents', 'independence is promoted' and 'the professionalism and support of staff and management was very good when residents were moving to the centre.

On the day of the inspection, one family representative called to the centre and met with the inspector to talk about the services. They confirmed all of the above comments and said they could not speak highly enough about the service. They reported that their family member seemed to love living here and said that the atmosphere in the centre was always relaxed and happy. In particular, they said that the transition from home to the centre had being managed very well despite the fact that their family member struggles with new routines and change. They said this was down to the person in charge and staff team who really helped to support the resident but also helped allay the family representatives fears. The family member spoke about how staff had supported them and the resident to manage a hospital procedure that a resident found difficult.

The residents were observed to be very relaxed in the centre and appeared to have

a good relationship with the staff members. One of the residents and a staff member connected because of their interest in computers and the resident now helped the staff with some of the computer work or just liked to sit with the staff member when they were on the computer.

Residents were supported to have meaningful active days in line with their personal preferences. Three of the residents attended a day service and one resident liked to arrange their meaningful day with staff each day. For example; on the day of the inspection the resident was going to the barbers and to have a hot shave. This resident was also increasing their independent living skills and talked to the inspector with the support of staff about a recycling programme they had started in the centre. The staff member informed the inspector that the provider had commenced a go green initiative in the organisation and had started a competition that residents could enter and win a prize. The resident was smiling at this as they were hoping to win the prize money for their recycling programme which they intended to enter into the competition.

Some of the residents liked to go to the cinema, out for lunch or to play golf. Other residents liked walking and one in particular liked to go to a specific place that they were used to. This was very important to the resident and was facilitated by staff.

Some of the staff met with the inspector to talk about the quality of care. They all knew the residents well and gave some examples of how their training in human rights had influenced their practice. For example; they all respected the fact that this centre was the residents home and they chose what they wanted to do. One staff member gave an example of how two residents had been supported to register to vote and how they had provided education to the residents about this. Another staff spoke about building connections in the community for residents. For example; they had sourced a barber for one resident in the community as they had always found getting their hair cut difficult. The resident was now attending this barber on a regular basis.

In addition, the person in charge and staff team listened to and responded to the needs of the residents and adopted positive risk taking measures in relation to staffing. For example; the person in charge in conjunction with allied health professionals had reviewed the supports required for one resident. As a result of this the resident now only required the support of one staff instead of two when they went out in the community. This was a good example of how residents were supported with their right to lead less restrictive lives.

Residents were kept up to date about community events and were considering whether to attend the Saint Patrick's Day parade this year; as for the first year ever there would be an assigned area for people who found crowds and noise difficult.

The next two section of the report present the findings of this inspection in relation to the governance and management arrangements and how these arrangements affected the quality of care and support being provided to residents.

Capacity and capability

Overall, the governance and management systems in place were ensuring a safe quality service to the residents. The staff team led by the person in charge were providing person centred care to the residents.

The centre had a clearly defined management structure in place which consisted of an experienced person in charge who worked on a full-time basis. They were also supported by two team leaders to ensure effective oversight of the centre.

The centre was being monitored and audited as required by the regulations and other audits were also being conducted to ensure ongoing compliance with the regulations.

There were sufficient staff on duty to meet the needs of the residents. There were no vacancies in the centre at the time of this inspection.

The training records viewed indicated that all staff had completed training in order to support the residents needs in the centre.

The registered provider had appropriate procedures in place for the admission of residents to the centre.

Regulation 14: Persons in charge

The person in charge was employed full time in the organisation. They were a qualified professional with significant experience working in and managing disability residential services.

The person in charge was promoting person centred care and informed the inspector that the philosophy they worked from was that, this was the residents home and should be operated as such.

They demonstrated a good knowledge of the residents' needs, were aware of their responsibilities under the regulations and were also instigating continued improvements which were having positive outcomes for residents.

Judgment: Compliant

Regulation 15: Staffing

There was adequate staff in place to meet the needs of the residents which enabled them to live self directed lives.

Planned and actual rotas were in place and a review of a sample of rotas indicated that there was a consistent staff team employed and sufficient staff on duty to meet the needs of the residents during the day.

The provider had contingencies in place to manage planned and unplanned leave as a regular relief staff member were available to cover shifts. This meant that residents were ensured consistency of care during these times.

An on call manager was on duty 24 hours a day to support staff and offer guidance and assistance if required. A community nurse was also available to guide and support staff with residents healthcare needs where required.

The staff spoken to also had a very good knowledge of the resident's needs and said that they felt supported in their role and were able to raise concerns at any time to the person in charge.

The registered provider and staff team listened to and responded to the needs of the residents and adopted positive risk taking measures in relation to staffing. For example; the person in charge in conjunction with allied health professionals had reviewed the supports required for one resident. As a result of this the resident now only required the support of one staff instead of two when they went out in the community. This was a good example of how residents were supported with their rights to lead less restrictive lives.

A sample of staff personnel files reviewed were found to contain the requirements of the regulations. For example; references had been provided from previous employers prior to a staff member commencing employment.

Judgment: Compliant

Regulation 16: Training and staff development

From a sample of training records viewed, the inspector found that staff were provided with training to ensure they had the necessary skills to respond to the needs of the residents.

For example, all staff had undertaken training which the registered provider stated in their statement of purpose was mandatory. This included

- safeguarding of vulnerable adult
- fire safety
- manual handling
- safe administration of medicines
- infection prevention and control

- positive behavioural support
- children's first
- feeding eating and drinking
- health and safety.

Additional training had also been provided some of which included

- basic life support
- positive risk taking
- communication
- positive management of challenging behaviour.

Staff had also undertaken training in human rights. Examples of how they put this additional training into practice so as to further support the rights and individual choices of the residents were included in the first section of this report: 'What residents told us and what inspectors observed'.

From speaking to two staff members the inspector was assured that they had the required knowledge to meet the needs of the residents. As an example; staff were able to outline some of the things that might cause a resident anxiety which could lead to behaviours of concern.

Judgment: Compliant

Regulation 22: Insurance

The registered provider had submitted an up-to-date insurance policy statement as part of their application to register this centre in July 2023.

Judgment: Compliant

Regulation 23: Governance and management

The centre had a defined management structure in place which consisted of an experienced person in charge who worked on a full-time basis. They were also supported in their role by two team leaders. When these managers were not on shift a shift leader was assigned to oversee the care and support of the residents. The person in charge provided good leadership and support to their team. They reported to the assistant director of operations. They had regular contact with each other over the phone and through monthly meetings to review the care and support being provided.

Staff meetings were held monthly which the person in charge attended. A review of sample of minutes showed that various issues were discussed about the service

provided like risk management, restrictive practices, outcomes from audits conducted in the centre and the care and support provided to residents.

A six monthly unannounced quality and safety review had taken place in January 2024 where some minor improvements were required. The inspector followed up on some of these and found they had been completed or were being completed. For example; a privacy fence was required in the garden area and this in the process of being completed on the day of the inspection.

Other audits were conducted locally in the centre on some aspects of service delivery such as medicine management and residents finances. The results of the audits which were generally compliant and where actions were recommended they had been completed. For example; a recent medicine audit had identified that a pharmacist needed to complete an audit and this was scheduled for the day after the inspection.

The person in charge also had held a family forum and requested family to complete questionnaires on the quality of services. As discussed in section 1 of this report overall this feedback was very positive.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

The registered provider had an admissions criteria outlined in the statement of purpose. Part of this criteria included considering whether residents would be compatible living together. The family member who spoke to the inspector spoke about how the transition had been well planned for and confirmed that the resident had the opportunity to visit the centre prior to moving there.

Residents had contracts of care in place that outlined the services provided and fees that may be incurred. A sample viewed showed that they had been discussed with family members on behalf of the residents.

Judgment: Compliant

Regulation 3: Statement of purpose

The statement of purpose was reviewed by the inspector and found to meet the requirements of the Regulations. It had recently been updated in line with changes to the management structure in the centre.

It detailed the aim and objectives of the service and the facilities to be provided to

the residents.

The person in charge was aware of their legal remit to review and update the statement of purpose as required by the regulations.

Judgment: Compliant

Regulation 30: Volunteers

There were no volunteers employed in this centre. The registered provider had a policy in place around volunteers who may be employed in the service.

Judgment: Compliant

Regulation 31: Notification of incidents

A review of incidents that occurred in the centre since it opened, informed the inspector that the person in charge had notified the Health Information and Quality Authority(HIQA) of adverse events as required under the regulations.

Judgment: Compliant

Regulation 32: Notification of periods when the person in charge is absent

The registered provider is aware of their responsibilities to notify the Chief Inspector of any period where the person in charge is absent for 28 days or more.

Judgment: Compliant

Quality and safety

Overall, residents enjoyed a safe quality service in this centre. They were supported to have meaningful and active lives in line with their preferences within the centre and within their community.

Residents were being supported with their healthcare and emotional needs and had

regular access to allied health professionals.

The centre was modernised, decorated to a high standard, clean and well maintained. All of the residents had their own bedrooms which were spacious and decorated in line with the residents preferences.

Residents were supported to have meaningful active days in line with their personal preferences and were being supported to integrate into the local community.

There were systems in place to manage and mitigate risk and keep residents safe in the centre. Fire safety systems were also in place to minimise the risk of fire and ensure a safe evacuation of the centre.

Regulation 10: Communication

Some of the residents used different styles of communicating and the person in charge had made a referral to the speech and language therapist to see if assistive aids may enhance their communication styles. Easy read information was available for residents and some visual aids were used to inform and educate residents. For example; there were visual education aids on the bathroom doors to show residents how to use the turn key lock on the door to maintain their privacy.

For some of the residents routine and reminders were important to them so they had calendars which the residents wrote on to remember when they were going home.

All of the residents had access to a land line phone and WiFi. The inspector observed some of the residents had electronic tablets, and access to the Internet to watch movies they liked.

Judgment: Compliant

Regulation 13: General welfare and development

Residents were supported to have meaningful active days in line with their personal preferences. Three of the residents attended a day service and one resident liked to arrange their meaningful day with staff each day. For example; on the day of the inspection the resident was going to the barbers and to have a hot shave. This resident was also increasing their independent living skills and talked to the inspector with the support of staff about a recycling programmes they had started in the centre.

Some of the residents liked to go to the cinema, out for lunch or to play golf. Other residents liked walking and one in particular liked to go to a specific place that they

were used to. This was very important to the resident and was facilitated by staff.

Residents were being supported to build connections in the community. A staff spoke about building connections in the community for a resident. For example; they had sourced a barber for one resident in the community as they had always found getting their hair cut difficult. The resident was now attending this barber.

Residents were kept up to date about community events and at the time of the inspection were considering whether to attend the Saint Patricks Day parade this year; as for the first year ever there would be an assigned area for people who found crowds and noise difficult.

Residents were supported to maintain links with family and friends. Most of the residents had moved to this centre from their family home and so continued to go home for overnight stays. One of the residents was planning to invite one of their friends to their birthday party in the coming weeks. The family member spoken to said they could visit the centre whenever they wanted.

Judgment: Compliant

Regulation 17: Premises

The centre was spacious clean and decorated to a high standard. Each resident had their own bedroom which they had personalised to their own tastes and styles.

The registered provider had a system in place to ensure that the premises were well maintained. For example; a company was employed to conduct regular checks on the quality of the water and to fix maintenance issues in a timely manner.

Judgment: Compliant

Regulation 26: Risk management procedures

There were systems in place to manage and mitigate risk and keep residents safe in the centre. This included a risk register for overall risks in the centre and individual risk assessments for each resident. Incidents in the centre were reviewed regularly and any actions agreed to mitigate risks were discussed at team meetings. For example; following one incident that had happened in the centre an education piece was put in place for residents.

Individual risk assessments for residents included control measures in place to manage or reduce the likelihood of injuries occurring.

Positive risk taking was promoted in the centre. For example; as discussed under

staffing a plan had been put in place to reduce the level of staff a resident required in the community which had a positive outcome for the resident.

Transport provided in the centre had up to date insurance and evidence that it was in a roadworthy condition.

Judgment: Compliant

Regulation 28: Fire precautions

There were systems in place to manage fire in the centre. Fire equipment such as emergency lighting, the fire alarm and fire extinguishers and fire doors were being serviced. For example; the fire alarm and emergency lighting had been serviced in December 2023.

Staff also conducted daily/ weekly and monthly checks to ensure that effective fire safety systems were maintained. Fire exits were checked on a daily basis and the fire alarm was checked weekly to ensure it was working and fire doors were activated.

Residents had personal emergency evacuation plans in place outlining the supports they required.

Fire drills had been conducted to assess whether residents could be evacuated safely from the centre and the records reviewed showed that these were taking place in a timely manner.

Judgment: Compliant

Regulation 6: Health care

Residents were being supported with their healthcare related needs and had timely access to a range of allied healthcare professionals, doctors and nurses available in the organisation to include:

- Nursing staff
- Psychologist
- Occupational Therapist
- Physiotherapist
- Speech and Language Therapist
- Positive Behaviour Support Specialist
- Social Worker
- Consultant Psychiatrist.

In the community residents had access to:

- general practitioner (GP)
- dentist
- chiropody
- optician.

Additionally, each resident had a number of healthcare plans in place so as to inform and guide practice and one staff spoken with was knowledgeable of the assessed needs of the residents.

A family member spoke about how staff had supported them and a resident to manage a hospital procedure that a resident found difficult.

Judgment: Compliant

Regulation 7: Positive behavioural support

Residents were supported to experience best possible mental health and where required had access to the support of allied health professionals. Where required, residents had a positive behavioural support plan in place which was reviewed by a behaviour specialist.

Where there had been an increase or change in the residents presentation multi disciplinary team meetings were held to discuss this.

Behaviour Support plans outlined strategies that staff needed to follow to support the residents and ensure that the use of restrictive practices were minimised. The staff were knowledgeable around the residents needs. Since moving to this centre, one residents' medicines; prescribed to support the residents mental health was being reviewed regularly and the dosage of some medicines was being reduced. This had also been discussed with the resident.

The registered provider had systems in place to ensure that where restrictive practices were used, there was good governance over these practices to ensure that they were the least restrictive measure for the shortest duration.

Judgment: Compliant

Regulation 8: Protection

All staff had been provided with training in safeguarding adults. One staff met, was aware of the procedures to follow in the event of an incident of abuse occurring in

the centre.

The inspector also noted the following:

- staff spoken with said they would have no issue reporting a safeguarding concern to management if they had one
- staff spoken to said they had no concerns about the quality and safety of care
- the concept of safeguarding was discussed at staff and residents meetings
- there were no complaints about safeguarding concerns in the centre at the time of this inspection.

Judgment: Compliant

Regulation 9: Residents' rights

The residents were able to exercise choice in their daily lives and led self directed lives with the support of staff.

Residents meetings and key working meetings were conducted to inform the residents about things that were happening in the centre.

Two residents been supported to register to vote.

One resident now led a less restrictive life based on a positive risk taking plan put in place.

Residents were provided with education about how to make a complaint and advocacy services. This information was also provided to family representatives who may wish to advocate on behalf of their family member.

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 14: Persons in charge	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 22: Insurance	Compliant
Regulation 23: Governance and management	Compliant
Regulation 24: Admissions and contract for the provision of services	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 30: Volunteers	Compliant
Regulation 31: Notification of incidents	Compliant
Regulation 32: Notification of periods when the person in charge is absent	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 6: Health care	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant