

**Health Information and Quality Authority
Regulation Directorate**

**Compliance Monitoring Inspection report
Designated Centres under Health Act 2007,
as amended**



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Centre name:	A designated centre for people with disabilities operated by Nua Healthcare Services
Centre ID:	OSV-0004261
Centre county:	Tipperary
Email address:	shane@nuahealthcare.ie
Type of centre:	Health Act 2004 Section 39 Assistance
Registered provider:	Nua Healthcare Services
Provider Nominee:	Noel Dunne
Lead inspector:	Patricia Sheehan
Support inspector(s):	None
Type of inspection	Announced
Number of residents on the date of inspection:	0
Number of vacancies on the date of inspection:	0

About monitoring of compliance

The purpose of regulation in relation to designated centres is to safeguard vulnerable people of any age who are receiving residential care services. Regulation provides assurance to the public that people living in a designated centre are receiving a service that meets the requirements of quality standards which are underpinned by regulations. This process also seeks to ensure that the health, wellbeing and quality of life of people in residential care is promoted and protected. Regulation also has an important role in driving continuous improvement so that residents have better, safer lives.

The Health Information and Quality Authority has, among its functions under law, responsibility to regulate the quality of service provided in designated centres for children, dependent people and people with disabilities.

Regulation has two aspects:

- Registration: under Section 46(1) of the Health Act 2007 any person carrying on the business of a designated centre can only do so if the centre is registered under this Act and the person is its registered provider.
- Monitoring of compliance: the purpose of monitoring is to gather evidence on which to make judgments about the ongoing fitness of the registered provider and the provider's compliance with the requirements and conditions of his/her registration.

Monitoring inspections take place to assess continuing compliance with the regulations and standards. They can be announced or unannounced, at any time of day or night, and take place:

- to monitor compliance with regulations and standards
- following a change in circumstances; for example, following a notification to the Health Information and Quality Authority's Regulation Directorate that a provider has appointed a new person in charge
- arising from a number of events including information affecting the safety or well-being of residents

The findings of all monitoring inspections are set out under a maximum of 18 outcome statements. The outcomes inspected against are dependent on the purpose of the inspection. Where a monitoring inspection is to inform a decision to register or to renew the registration of a designated centre, all 18 outcomes are inspected.

Compliance with the Health Act 2007 (Care and Support of Residents in 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 inspection report sets out the findings of a monitoring inspection, the purpose of which was to inform a registration decision. This monitoring inspection was announced and took place over 1 day(s).

The inspection took place over the following dates and times

From:

28 August 2014 09:30

To:

28 August 2014 16:30

The table below sets out the outcomes that were inspected against on this inspection.

Outcome 01: Residents Rights, Dignity and Consultation
Outcome 02: Communication
Outcome 03: Family and personal relationships and links with the community
Outcome 04: Admissions and Contract for the Provision of Services
Outcome 05: Social Care Needs
Outcome 06: Safe and suitable premises
Outcome 07: Health and Safety and Risk Management
Outcome 08: Safeguarding and Safety
Outcome 09: Notification of Incidents
Outcome 10. General Welfare and Development
Outcome 11. Healthcare Needs
Outcome 12. Medication Management
Outcome 13: Statement of Purpose
Outcome 14: Governance and Management
Outcome 15: Absence of the person in charge
Outcome 16: Use of Resources
Outcome 17: Workforce
Outcome 18: Records and documentation

Summary of findings from this inspection

This inspection was the first inspection of the centre carried out by the Authority and was carried out to inform a decision to register the centre.

According to its statement of purpose the centre intended to provide a residential service for children, both male and female, who are diagnosed as being on the autistic spectrum or have a diagnosis of intellectual disability. The centre had capacity for a maximum of four children.

As part of this inspection, the inspector met with the centre manager, the deputy manager, the regional manager and the provider nominee. The inspector also inspected the premises and viewed policies, procedures and a number of templates that had been designed for use in the centre.

Overall, the inspector found that there was a significant level of compliance with the regulations and standards. The centre manager, who was the person in charge, was suitably experienced and competent to manage the service. Policies and procedures were in place, relevant training had been provided for staff and adequate preparation had been made to ensure the smooth operation of the service when the centre becomes operational.

The inspector found that the service as outlined in the statement of purpose had the potential to provide a high standard of care in a homely and safe environment.

Improvements were required in the statement of purpose, the information guide, infection control, security of the back garden and in implementing contracts for the provision of services. These improvements that are required in order to achieve compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 are set out in the Action Plan at the end of this report.

Section 41(1)(c) of the Health Act 2007. Compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children And Adults) With Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

Outcome 01: Residents Rights, Dignity and Consultation

Residents are consulted with and participate in decisions about their care and about the organisation of the centre. Residents have access to advocacy services and information about their rights. Each resident's privacy and dignity is respected. Each resident is enabled to exercise choice and control over his/her life in accordance with his/her preferences and to maximise his/her independence. The complaints of each resident, his/her family, advocate or representative, and visitors are listened to and acted upon and there is an effective appeals procedure.

Theme:

Individualised Supports and Care

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

There were systems in place to support children's rights, to promote their dignity and to ensure that they were consulted in relation to their care.

The centre manager told the inspector that prior to admission each child and their parents will be provided with an information brochure intended to provide information on the service and their individual rights. Additional information on rights was in place and the inspector found that this was comprehensive and in a user friendly format. An easy to read guide to the national standards was available for the children.

The centre manager informed the inspector that weekly forums with children will take place in order to facilitate their participation in the daily routines of the centre. These forums will offer children an opportunity to influence decision making in areas such as menus, activities and house decoration. Each child will be supported by a key worker who has a specific responsibility to plan services in consultation with the child and to advocate for that child. External advocacy services will be available and this was
escale:●●●● Outcome 13: Statement of Purpose><◀

There were comprehensive policies and procedures for the management of complaints, which included clear time frames for each step of the process and a user friendly guide. There was also an appeals process in the event of a complainant not being satisfied with the outcome. The inspector viewed the complaints policy and the template for the recording of complaints, both of which were satisfactory.

The statement of purpose stated that dignity and respect are key values of the organisation and the centre's policy on intimate care referred to the paramouncy of dignity and respect and the right to privacy. There was sufficient space for children to meet family in private. Each child will have their own single room with adequate storage

space for their personal possessions. The centre manager described to the inspector how the centre will be managed in order to facilitate childrens' choices in their daily lives and routines. For example, children will be supported to choose their own clothes and food preferences and activities which suit their needs, interests and capacities.

Policies and procedures were in place to ensure that children's belongings and finances were protected through appropriate practices and record keeping. The centre manager told the inspector that inventories of belongings will be recorded on arrival and that a safe will be provided for every child in their bedroom.

The statement of purpose stated that the children will use local community amenities and take part in community activities in addition to activities identified in their personal plan. These will include, for example, the cinema, shopping trips, karate, and gymnastics. The inspector saw that indoor activities at the centre will include television, board games, arts and crafts and an outdoor play area which will have a trampoline and other facilities.

Judgment:

Compliant

Outcome 02: Communication

Residents are able to communicate at all times. Effective and supportive interventions are provided to residents if required to ensure their communication needs are met.

Theme:

Individualised Supports and Care

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Arrangements were in place for the communication needs of children to be met.

The centre manager told the inspector that the individual communication needs of children will be assessed and children supported and assisted to communicate at all times. A communications passport will be part of the child's personal plan and this will identify any individual communication needs and the supports provided to meet those needs. In line with the communication policy, children will have access to speech and language therapies as part of the clinical team services.

The centre manager said that training had been provided to staff in communication methods such as picture exchange communication symbols and visual schedules to support children to understand the sequence of activities. The inspector saw evidence of some of this training in staff files. Any additional training required will be provided to staff and a staff training plan will be developed to meet the needs of the children as they are admitted.

Internet was available in the centre so that children could access it under supervision. There was an electronic communication policy in place in relation to the controls that would be put in place for this service. Access to television and radio were also provided. Personal portable device that assisted communication will be sought as required.

Judgment:

Compliant

Outcome 03: Family and personal relationships and links with the community

Residents are supported to develop and maintain personal relationships and links with the wider community. Families are encouraged to get involved in the lives of residents.

Theme:

Individualised Supports and Care

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Arrangements were in place for children to be supported in maintaining their personal relationships and links with the community.

The information brochure stated that families were always welcome to visit but will be asked to make arrangements in advance so that the needs of the other children could be taken into consideration. The centre manager said families will also be encouraged to contact their children by telephone and will be able to speak to their parents in private. There was space available for children to meet their parents and family in private if required.

Children will be encouraged to use community facilities and transport will be provided by the centre in order to take children to and from school and to facilitate shopping trips and social outings.

Judgment:

Compliant

Outcome 04: Admissions and Contract for the Provision of Services

Admission and discharge to the residential service is timely. Each resident has an agreed written contract which deals with the support, care and welfare of the resident and includes details of the services to be provided for that resident.

Theme:

Effective Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Criteria for admission were outlined in the statement of purpose and the admission policy and the centre manager told the inspector that admissions will be in line with the policy.

The inspector saw that there was a robust system in place regarding admission to the centre. All requests were submitted to an admissions committee and a pre admission assessment was undertaken. The needs of other children already in the centre will be considered when looking at new admissions. Once financial agreement with the Health Service Executive (HSE) has been agreed, admission planning will commence usually within a two week time period and may involve visits to the centre by the child as part of the transition process. There were policies and procedures in place to guide the admission process.

A contract template for the provision of services was not yet developed. There was no proposed written agreement in place outlining the support, care and welfare of the children and details of the services to be provided and where appropriate, the fees to be charged.

Judgment:

Non Compliant - Moderate

Outcome 05: Social Care Needs

Each resident's wellbeing and welfare is maintained by a high standard of evidence-based care and support. Each resident has opportunities to participate in meaningful activities, appropriate to his or her interests and preferences. The arrangements to meet each resident's assessed needs are set out in an individualised personal plan that reflects his /her needs, interests and capacities. Personal plans are drawn up with the maximum participation of each resident. Residents are supported in transition between services and between childhood and adulthood.

Theme:

Effective Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Children will have personal plans, based on comprehensive assessments of need, which set out their individual needs and choices and the supports they required to enable them to maximise their quality of life.

The inspector viewed the template for personal plans and found that it was comprehensive. The centre manager told the inspector that personal plans will be developed with the involvement of children and their parents and each will be signed by the child and their key worker. There will be scheduled weekly meetings between the child and key worker as well as reviews on a quarterly and annual basis.

The centre manager told the inspector that specialist assessments will be included in the development of the personal plans and will include all aspects of the children's lives such as health and wellness, communication, sensory needs, education, independent skills development, activities, transport and religious and cultural needs. The children's files will also contain personal communications passports, which will include photos of the children and their description of their routines, interests, feelings and various things they wished the staff to know about them and their lives.

There was evidence that children will be supported in transition between services. The centre manager described the preparation and planning that will take place to ensure any transition is as seamless as possible for the children. The policy on transitions clearly outlined the roles of different staff, including the regional manager, in managing the process and a commitment to the child being at the centre of the process. A document called 'my hospital passport' will be developed for each child if they have to attend hospital which will contain useful information about the child such as communication needs.

The policy on discharge contained procedures for both planned and unplanned discharges. The centre manager said that the key worker will participate in multi-disciplinary meetings to confirm the suitability of the future placement, agree any necessary aftercare arrangements and support the child in preparing for the move such as packing belongings and saying goodbye.

The centre manager told the inspector that children will be empowered with the skills and knowledge to attain the most appropriate level of independence for their particular needs in accordance with the independent living policy. The main areas identified as necessary for their ability to live as independently as possible were, for example, household maintenance, financial budgeting, personal safety, social skills, and troubleshooting day to day issues.

Judgment:
Compliant

Outcome 06: Safe and suitable premises

The location, design and layout of the centre is suitable for its stated purpose and meets residents individual and collective needs in a comfortable and homely way. There is appropriate equipment for use by residents or staff which is maintained in good working order.

Theme:

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The design and layout of the centre was suitable for its stated purpose but the back garden required attention to ensure the perimeter was sufficiently safe and secure.

The centre is a two storey house located on a spacious site approximately 3 km from a large village. The layout was as described in the statement of purpose and provided adequate private and communal space. As this was a two storey building the upstairs accommodation was not fully accessible. There were four bedrooms in total, two upstairs and two downstairs. The two bedrooms upstairs had their own en suite shower, toilet and wash-hand basin facilities. The remaining accommodation included a kitchen and dining area, a sitting room and a conservatory. The bathroom was of an adequate size and had a bath with a shower included. There was a laundry area and locked cupboards for storage of chemicals. The centre manager said that an external shed had been ordered to provide additional storage. There was no assistive equipment in place at the time of the inspection. The centre manager told the inspector that children will have access to assistive equipment where required.

At the back of the house was a large garden but the boundary between the garden and adjoining fields was not secure. The lawn was kept maintained and documentation was maintained in relation to its upkeep. There was some play equipment available. The area to the front of the house had sufficient space for car parking and the entrance to the house was secured by large gates.

The centre was warm, homely, free from hazards and well decorated with natural light and sufficient comfortable furniture and fittings. The staff office was located next to a bedroom but did not impact unduly on the homely layout of the centre which mirrored a typical family home. The centre manager told the inspector that she planned to involve the children in personalising their bedrooms.

The organisation had its own maintenance department and the centre manager stated that any maintenance requests were attended to promptly by the provider.

Judgment:

Non Compliant - Minor

Outcome 07: Health and Safety and Risk Management

The health and safety of residents, visitors and staff is promoted and protected.

Theme:

Effective Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Systems were in place to promote the health and safety of children, visitors and staff but infection control measures needed improvement.

A risk management policy was in place which was comprehensive and met the requirements of the regulations. The centre manager said that incidents and significant adverse events will be reported to the regional manager as they occur and to the incident committee for weekly review. The centre manager told the inspector that individual risk assessments will be completed for each child to include a risk assessment as appropriate for possible self harm, absconsion, aggression etc.

Training records showed that staff were trained in manual handling. An emergency plan outlined the arrangements for responding to emergencies. The centre manager told the inspector that personal emergency evacuation plans will be developed for each child. There was a centre-specific and a health and safety statement dated December 2013 in place and a health and safety committee which met on a regular basis. The centre manager told the inspector that the health and safety officer visited the centre monthly and completed health and safety audits. There was a policy and procedure in place relating to health and safety, including food safety.

The centre manager told the inspector that closed circuit television (CCTV) to monitor the entrance to the centre was not used although there was a facility for it and a policy in place which set out the responsibilities of the provider under data protection legislation. A record of all visitors to the centre will be maintained. The vehicle used for transporting children was registered and taxed and contained first aid kit and safety equipment. Arrangements were in place for the vehicle to be checked weekly and serviced regularly.

Some procedures were in place for the prevention and control of infection. While a number of staff had received food safety training, infection control training had not been provided. There were not adequate hand washing facilities for staff as there was only one sink in the main bathroom for both children and staff to wash their hands. Hand sanitizers were only available at the kitchen sink. Colour-coded cleaning materials were available and chemicals were stored in locked cupboards. Bio hazard kits for cleaning up spills were available and arrangements for the safe disposal of clinical waste were in place. The premises were clean and the centre manager will provide cleaning check lists and schedules to assist in ensuring that the premises will be cleaned on a daily basis. The inspector viewed the templates for these audits and found them to be adequate.

Fire safety precautions were in place. The inspector observed that all emergency exits were unobstructed. Daily checks on the fire alarm, the means of escape and the fire fighting equipment were carried out and recorded by staff. Suitable fire fighting equipment was available at specific locations throughout the premises. Certificates were maintained for the servicing of fire prevention and fire fighting equipment and the

inspector reviewed the most recent servicing records dated February 2014. The centre manager told the inspector that staff received fire safety training also in February 2014 with the most recent fire drill in June 2014 and that fire drills will take place at least every three months.

There were procedures for evacuation in the event of a fire and the centre manager told the inspector that personal emergency evacuation plans will be developed for each child using the centre. Prior to the inspection the provider submitted to the Authority written confirmation that the centre was in compliance with fire safety and building control regulations.

Judgment:

Non Compliant - Minor

Outcome 08: Safeguarding and Safety

Measures to protect residents being harmed or suffering abuse are in place and appropriate action is taken in response to allegations, disclosures or suspected abuse. Residents are assisted and supported to develop the knowledge, self-awareness, understanding and skills needed for self-care and protection. Residents are provided with emotional, behavioural and therapeutic support that promotes a positive approach to behaviour that challenges. A restraint-free environment is promoted.

Theme:

Safe Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Measures were in place to safeguard children and protect them from abuse.

The regional manager was the designated person for reporting allegations or suspicion of abuse and neglect in accordance with national guidance and was aware of her responsibilities. The centre manager confirmed to the inspector that all staff have received training in Children First: National Guidance for the Protection and Welfare of Children (2011). She and the deputy manager demonstrated their knowledge in relation to the reporting of any allegations of abuse or neglect and outlined the steps that would be taken in the event of an allegation of abuse of a child by a staff member. When interviewed, the provider nominee demonstrated awareness of his responsibilities in relation to the protection of children.

There was a policy in place to guide staff in ensuring that children were protected from abuse and neglect. An eLearning programme had been developed to ensure that staff had access to the training on this policy. The inspector reviewed policies and procedures for the centre and found that safeguarding measures such as vetting for all staff, supervision for children while accessing the internet and plans around the provision of

intimate care were outlined therein. Both the provider nominee and the person in charge told the inspector that they would ensure that any staff member who had concerns about the safety of the service would be encouraged and facilitated to express those concerns and that any concerns would be considered and addressed.

Individual behavioural support plans were in place and a behavioural support team was available to promote positive behavioural approaches. The organisational policy on behaviours that challenge promoted interventions that were based on a non-restrictive, multi-element behaviour support model and outlined the steps to be followed in identifying and alleviating the underlying causes of behaviour that was challenging in relation to individual children. There were good systems in place for the management of these behaviours. These included access to the behaviour specialists, psychotherapists, psychologists and psychiatrists. The centre manager told the inspector that all staff have received training in managing behaviour that challenges with plans for this training to be on a refresher basis every six months.

The centre manager confirmed to the inspector that a restraint free environment will be promoted with restrictive procedures used only if there is evidence that it has been assessed as being required due to a serious risk to the child's safety and welfare. The inspector reviewed the policy to guide staff and found it to be comprehensive.

Judgment:

Compliant

Outcome 09: Notification of Incidents

A record of all incidents occurring in the designated centre is maintained and, where required, notified to the Chief Inspector.

Theme:

Safe Services

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The centre manager was knowledgeable about reporting incidents, accidents and notifiable events to the Authority. She told the inspector that a record of all incidents occurring in the centre will be maintained. The deputy manager was also knowledgeable regarding notifiable events and literature on the notification process was available in the centre

Judgment:

Compliant

Outcome 10. General Welfare and Development

Resident's opportunities for new experiences, social participation, education, training and employment are facilitated and supported. Continuity of education, training and employment is maintained for residents in transition.

Theme:

Health and Development

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The rights of children to have an education and to socialise and participate in activities in the community were valued and supported.

The centre manager told the inspector that identifying educational needs and establishing goals and programmes to meet those educational needs of the children will be carried out as part of personal planning. The inspector viewed some of the education assessment templates and found they were comprehensive. Recommendations from the education assessment will be used to set appropriate education attainment targets and will be actioned and reviewed through the personal plan. The inspector saw that the personal plan template outlined educational goals and that this was in line with the educational policy.

Communication and engagement between the centre and schools will be a priority and the deputy manager told the inspector that good communication between schools and the centre will be fostered including any liaison meetings with school staff and that any child who is required to do homework will be facilitated and assisted to do so.

The centre manager told the inspector that children will be given the opportunity to decide on the social activities they will undertake and that there will be opportunities for social activities outside of the centre as outlined previously in outcome one.

Judgment:

Compliant

Outcome 11. Healthcare Needs

Residents are supported on an individual basis to achieve and enjoy the best possible health.

Theme:

Health and Development

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Arrangements were in place for children's healthcare needs to be addressed.

The centre manager told the inspector that an assessment of children's needs included healthcare needs. The inspector viewed the health assessment template and the more detailed health assessments specific to any areas where a health issue is identified and found they were satisfactory. The resulting health action plan will be incorporated into the personal plan and subject to quarterly review and update. There was a clear system in place to link with the nurses in the clinical team and other healthcare professionals.

The health and well being policy stated that the children will have access to a general practitioner (GP) and to an out of hours GP service. All appointments with healthcare professionals will be recorded in the daily notes and if a child needs to be admitted into hospital their hospital passport and medication details will go with them.

The statement of purpose described the clinical team services available, including speech and language therapy, occupational therapy, psychiatry and psychology. The centre manager was clear that any mental health or therapeutic service will be accessed through the clinical department.

The centre manager told the inspector that staff will be trained to address the health needs of individual children. Records showed that to date staff have received training in first aid and medication administration.

The centre manager told the inspector that staff had received training on food preparation and were aware of healthy eating standards. Children will be consulted about their food preferences and encouraged to become involved with menu planning, shopping and cooking and adopt a healthy lifestyle. Mealtimes will be an important social routine.

Judgment:

Compliant

Outcome 12. Medication Management

Each resident is protected by the designated centres policies and procedures for medication management.

Theme:

Health and Development

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Processes were in place to manage medication in order to protect children.

A policy and procedures on the ordering, prescribing, storing and administration of medicines to residents was in place. This was comprehensive and addressed all areas of medication management. Monthly medication management audits will be completed.

Medication will be stored in a locked cupboard and the inspector saw the cupboard and how keys will be kept secure. The inspector viewed templates of the prescription sheets and administration sheets which allowed for all required information to be recorded, including sections for the regular review of medication by the child's GP. The administration sheets will contain photos of the children, their names and addresses. Signature sheets will be available for staff.

The inspector saw in training records that staff have received training in medication management including practical competency assessments. Children who are assessed as competent to self-medicate will be encouraged and facilitated to do so.

Judgment:

Compliant

Outcome 13: Statement of Purpose

There is a written statement of purpose that accurately describes the service provided in the centre. The services and facilities outlined in the Statement of Purpose, and the manner in which care is provided, reflect the diverse needs of residents.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The statement of purpose set out the ethos, the aims and objectives and the services and facilities provided but did not include all the information as required by the regulations and some of the service descriptions were not accurate.

Descriptions of some of the complex needs that will be supported were not specific to children and the age range of children to be admitted was not clear. The statement of purpose did not address the arrangements made for contact between children and their families or for children to access education, and also did not address the arrangements made for participation of children in the operation of the centre. Details of how staffing compliments will be developed for each child admitted were not outlined and the description of the rooms was not accurate. The statement of purpose did not contain the date on which it was developed and the date when it will be reviewed.

The manager and deputy manager outlined to the inspector how the statement will be implemented in practice and made available in an accessible format for children and

their representatives.

Judgment:

Non Compliant - Moderate

Outcome 14: Governance and Management

The quality of care and experience of the residents are monitored and developed on an ongoing basis. Effective management systems are in place that support and promote the delivery of safe, quality care services. There is a clearly defined management structure that identifies the lines of authority and accountability. The centre is managed by a suitably qualified, skilled and experienced person with authority, accountability and responsibility for the provision of the service.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

An effective management system was in place to support and promote the delivery of a safe, quality care service. Arrangements were in place for the quality and safety of the service to be adequately monitored.

The centre manager, regional manager and provider nominee described the management structure, which identified clear lines of authority and accountability and this was set out in the statement of purpose. Social care workers will report to the centre manager who will report to a regional manager. The regional manager will report to the director of operations who in turn reports to the chief operating officer.

The centre manager outlined to the inspector her plans for the effective governance, operational management and administration of the centre. She will be based in the centre and will ensure regular staff meetings with a set agenda are held to include discussion of policies and procedures. The centre manager will be supported in her role by a deputy manager and a regional manager who maintains daily contact with the centre. Twice a month meetings between the centre manager and regional manager will take place supplemented by monthly management meetings across the company's other services. Copies of the national standards and regulations were available in the centre.

The provider nominee and centre manager described to the the inspector the systems that will be in place to review the quality of care and support to children. A computerised auditing system had been introduced within the company and there was an auditor employed as part of their quality assurance programme. A structured plan was in place to audit the centre against the regulations on a quarterly basis while also undertaking the annual review of services. The centre manager described to the inspector the weekly key performance indicator reports required and weekly audits that

will be carried out in the centre to improve practice, for example, hygiene.

The centre manager was the person in charge. Her primary qualification was in social care and she had previously managed a residential centre for children. She was in a full-time position and when interviewed, she demonstrated that she had adequate knowledge of the legislation and of her statutory responsibilities. She showed good leadership by ensuring that adequate training and facilities were in place.

The provider nominee told the inspector that the service level agreement with the HSE for 2014 was in process and the inspector viewed the schedules accompanying the draft agreement. He outlined that key performance indicators will be maintained and returned to the HSE each month for monitoring purposes alongside periodic meetings with senior managers from the HSE to monitor and review the service.

Judgment:

Compliant

Outcome 15: Absence of the person in charge

The Chief Inspector is notified of the proposed absence of the person in charge from the designated centre and the arrangements in place for the management of the designated centre during his/her absence.

Theme:

Leadership, Governance and Management

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The centre manager and the provider nominee were aware of the requirement to notify the authority regarding the continued absence of the person in charge for 28 days.

The centre manager told the inspector that, in the event of her absence, the deputy manager will deputise as the person in charge. The inspector found that the deputy manager was sufficiently experienced and competent to take on the role.

Judgment:

Compliant

Outcome 16: Use of Resources

The centre is resourced to ensure the effective delivery of care and support in accordance with the Statement of Purpose.

Theme:

Use of Resources

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

There were sufficient resources to meet the needs of children to whom the service will be provided in accordance with the statement of purpose. When interviewed, the centre manager and provider nominee told the inspector that any additional resources, such as equipment or facilities that were required in order to achieve compliance with the regulations, will be put in place.

The centre was maintained to a good standard and had a suitably equipped kitchen. Maintenance requests were dealt with promptly as there was an online maintenance management system in place. The centre will have transport to bring children to school and to social outings.

The inspector observed that there was a stock of games for children in one of the sitting rooms. Televisions and internet access were also available. The centre manager told the inspector that depending on the needs of the children that will be admitted additional play facilities will be installed in the garden.

Judgment:

Compliant

Outcome 17: Workforce

There are appropriate staff numbers and skill mix to meet the assessed needs of residents and the safe delivery of services. Residents receive continuity of care. Staff have up-to-date mandatory training and access to education and training to meet the needs of residents. All staff and volunteers are supervised on an appropriate basis, and recruited, selected and vetted in accordance with best recruitment practice.

Theme:

Responsive Workforce

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

The centre manager told the inspector that there will be appropriate staff numbers to meet the assessed needs of children and to provide the delivery of safe services. She will ensure that there is continuity of care and that staff have up-to-date mandatory training and access to other training and education. Staff will be supervised on an appropriate basis and recruited in accordance with best recruitment practice.

The centre manager told the inspector that staffing levels will be based on the assessed needs of the children and will be determined at the initial assessment of need stage when the required funding to meet the assessed needs is agreed with the HSE. An eight member staff team will be supplemented by additional resources as required from the extensive relief panel maintained by the company and this was confirmed by the provider nominee

The deputy manager will plan the staff roster taking into account the assessed needs of the resident and the size and layout of the premises. For example, some children may be assessed as requiring either one-to-one staffing or the assistance of two staff at times in relation to their needs and the particular activities they were engaged in. The centre manager told the inspector the clear process in place if extra staffing levels are required in the case of an emergency or in relation to the ongoing needs of a child.

A training plan was in place for the company and records of staff training were maintained. This included training on Children First (2011), fire safety, moving and handling, first aid, food safety, autism, managing behaviours that challenge and medication management. The centre manager and deputy manager outlined that they had recently completed team training to prepare them for the changing requirements of the service. This training had covered, for example, person centred planning.

The centre manager described the system of supervision meetings with staff. The inspector reviewed a sample of supervision meetings and saw that the purpose of these meetings included the provision of support alongside the identification of training needs and the opportunity to voice any issues. These will be held on a four weekly basis and annual appraisals will also be carried out.

There was a recruitment policy in place and the inspector reviewed a sample of staff files and saw that they included all the information and documentation specified in Schedule 2 of the regulations.

The centre manager told the inspector that there were no current plans for volunteers to work in the centre.

Judgment:
Compliant

Outcome 18: Records and documentation

The records listed in Part 6 of the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 are maintained in a manner so as to ensure completeness, accuracy and ease of retrieval. The designated centre is adequately insured against accidents or injury to residents, staff and visitors. The designated centre has all of the written operational policies as required by Schedule 5 of the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013.

Theme:

Use of Information

Outstanding requirement(s) from previous inspection(s):

This was the centre's first inspection by the Authority.

Findings:

Arrangements were in place for comprehensive records to be maintained securely on the children and the care provided to them. Some information required by the regulations was omitted from the information guide for children.

A suite of policies and procedures had been developed on the matters set out in Schedule 5 of the regulations to guide the practice of staff. Some of these policies were in the process of being amended to make them centre specific. The centre manager demonstrated an understanding of how the policies will be implemented in practice. The inspector viewed policies and procedures and the templates for record keeping and found that they were comprehensive.

The information guide for children provided information on the centre and the services provided but did not include all of the information required by the regulations.

The inspector reviewed a copy of a statement from the centre's insurers which outlined the insurance cover put in place by the provider. Adequate insurance was in place against injury to children.

Judgment:

Non Compliant - Minor

Closing the Visit

At the close of the inspection a feedback meeting was held to report on the inspection findings.

Acknowledgements

The inspector wishes to acknowledge the cooperation and assistance of all the people who participated in the inspection.

Report Compiled by:

Patricia Sheehan
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Regulation Directorate
Health Information and Quality Authority

Health Information and Quality Authority Regulation Directorate

Action Plan



Provider's response to inspection report¹

Centre name:	A designated centre for people with disabilities operated by Nua Healthcare Services
Centre ID:	OSV-0004261
Date of Inspection:	28 August 2014
Date of response:	

Requirements

This section sets out the actions that must be taken by the provider or person in charge to ensure compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

Outcome 04: Admissions and Contract for the Provision of Services

Theme: Effective Services

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

A contract template for the provision of services was not yet developed.

Action Required:

Under Regulation 24 (4) (a) you are required to: Ensure the agreement for the provision of services includes the support, care and welfare of the resident and details of the services to be provided for that resident and where appropriate, the fees to be charged.

Please state the actions you have taken or are planning to take:

¹ The Authority reserves the right to edit responses received for reasons including: clarity; completeness; and, compliance with legal norms.

Proposed Timescale:

Outcome 06: Safe and suitable premises

Theme: Effective Services

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

The back garden was not sufficiently safe and secure.

Action Required:

Under Regulation 17 (4) you are required to: Provide equipment and facilities for use by residents and staff and maintain them in good working order. Service and maintain equipment and facilities regularly, and carry out any repairs or replacements as quickly as possible so as to minimise disruption and inconvenience to residents.

Please state the actions you have taken or are planning to take:

Proposed Timescale:

Outcome 07: Health and Safety and Risk Management
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Theme: Effective Services

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

Training in infection control had not been provided and there were insufficient facilities available for staff hand washing.

Action Required:

Under Regulation 27 you are required to: 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.

Please state the actions you have taken or are planning to take:

Proposed Timescale:

Outcome 13: Statement of Purpose

Theme: Leadership, Governance and Management

The Registered Provider is failing to comply with a regulatory requirement in

the following respect:

The statement of purpose did not contain all the information required by the regulations.

Action Required:

Under Regulation 03 (1) you are required to: Prepare in writing a statement of purpose containing the information set out in Schedule 1 of the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013.

Please state the actions you have taken or are planning to take:

Proposed Timescale:**Outcome 18: Records and documentation**

Theme: Use of Information

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

The guide did not include the terms and conditions relating to residency.

Action Required:

Under Regulation 20 (2) (b) you are required to: Ensure that the guide prepared in respect of the designated centre includes the terms and conditions relating to residency.

Please state the actions you have taken or are planning to take:

Proposed Timescale:

Theme: Use of Information

The Registered Provider is failing to comply with a regulatory requirement in the following respect:

The guide did not outline how to access any inspection reports on the centre.

Action Required:

Under Regulation 20 (2) (d) you are required to: Ensure that the guide prepared in respect of the designated centre includes how to access any inspection reports on the centre.

Please state the actions you have taken or are planning to take:

Proposed Timescale:

Annual Leave

Remaining until end of December

Name	A/L to end Dec	Taken in November	Remaining Leave
Pauline Murray	77 hours	25 hours	52 hours
Geraldine Walsh	65 hours	24 hours	41 hours
Carrie Fitzgerald	76 hours		76 hours
Laura Power	116.5 hours	28 hours	88.5 hours
Louis Sandvoss	119 hours	16.5 hours <i>Took 66 in Dec</i>	102.5 hours <i>(36.5) End of Dec</i>

Name	A/L at begin Nov	Taken in November	Remaining Leave
David Britton	14 hours	16.5 hours	minus 2.5 hours
Martin Cunningham	97 hours		97 hours
Patrick Kearns	51 hours	45 hours	6 hours
Kathy Mooney	68.5 hours	24 hours plus 12(1.1.13)	32.5 hours
Kevin Veale	54 hours	25 hours	29 hours

Staff with leave titled "A/L at begin of November" can still earn annual leave for November & December

NHS