

Mental Health Commission Approved Centre Inspection Reports

Below you will find a number of Inspection Reports published by the Mental Health Commission.

The Approved Centres reported on are:

1. St Loman's Hospital
http://www.mhcirl.ie/File/2015-Inspection-Reports/StLomanMull_IR2015.pdf
2. Acute Psychiatric Unit, Tallaght Hospital
http://www.mhcirl.ie/File/2015-Inspection-Reports/APU_AMNCH_Tallaght_ir2015.pdf
3. Department of Psychiatry, Our Lady's Hospital, Navan
http://www.mhcirl.ie/File/2015-Inspection-Reports/DOP_Navan_ir2015.pdf
4. Avonmore and Glenree Units, Newcastle Hospital
http://www.mhcirl.ie/File/2015-Inspection-Reports/newcastle_ir2015.pdf
5. Bloomfield Hospital, Stocking Lane, Rathfarnham, Co. Dublin
http://www.mhcirl.ie/File/2015-Inspection-Reports/bloomfield_ir2015.pdf
6. Adolescent In-patient Unit, St Vincent's Hospital
http://www.mhcirl.ie/File/2015-Inspection-Reports/AIPU_StVinFairview_ir2015.pdf
7. Willow Grove Adolescent Unit, St Patrick's University Hospital
http://www.mhcirl.ie/File/2015-Inspection-Reports/willowgrove_ir2015.pdf
8. Child and Adolescent Mental Health In-patient Unit, Merlin Park University Hospital
http://www.mhcirl.ie/File/2015-Inspection-Reports/CAMHS_MerlinPark_ir2015.pdf
9. St Brigid's Ward and St Marie Goretti Ward, Cluain Lir Care Centre
http://www.mhcirl.ie/File/2015-Inspection-Reports/CluainLirCareCentre_ir2015.pdf

The 24-Hour Nurse Staffed Community Residences reported on are:

1. Woodview, Merlin Park University Hospital
http://www.mhcirl.ie/File/2015-Inspection-Reports/woodview_merlinparkhos_ir2015.pdf

Every Approved Centre registered by the Mental Health Commission must under law be inspected at least once a year. During each inspection the Approved Centre is assessed against all regulations, rules and codes of practice and Section 4 of the Mental Health Act 2001. A Judgement Support Framework has been developed as a guidance document to legislative requirements for Approved Centres. The Framework incorporates national and international best practice under each relevant section of the legislative requirements. In addition, the Inspectorate may inspect any mental health service.

Link below to approved centre inspection report documents on the Mental Health Commission website:

http://www.mhcirl.ie/Inspectorate_of_Mental_Health_Services/AC_IRs/

Link below to other mental health service inspection report documents on the Mental Health Commission website:

http://www.mhcirl.ie/Inspectorate_of_Mental_Health_Services/Other_MHS_Inspection_Reports/

1. St Loman's Hospital

Conditions attached, and an update on Conditions status – if any.

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 15 Individual Care Plan
Regulation 28 Register of Residents
Regulation 30 Mental Health Tribunals
Regulation 33 Insurance
Regulation 34 Certificate of Registration
Section 60 Mental Health Act 2001 Consent to Treatment

Outstanding issues from previous inspection

The previous inspection of the approved centre on 19, 20 November 2014 identified the following areas that were not fully compliant:

Regulation/Rule/Act/Code	Inspection Findings 2015
Regulation 15 Individual Care Plan	Compliant
Regulation 22 Premises	Compliant
Regulation 24 Health and Safety	Compliant
Rules Governing the Use of Seclusion	Non-compliant
Code of Practice on the Use of Physical Restraint in Approved Centres	Non-compliant
Code of Practice Admission, Transfer and Discharge	Compliant
Code of Practice on the Admission of Children Under the Mental Health Act 2001	Non-compliant
Section 60 Mental Health Act 2001 Consent to Treatment	Compliant

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 4 Identification of Residents	Moderate
Regulation 5 Food and Nutrition	Moderate
Regulation 20 Provision of Information to Residents	Moderate
Regulation 21 Privacy	Moderate
Regulation 23 Ordering, Prescribing, Storing and Administration of Medication	Low
Regulation 26 Staffing	High
Regulation 27 Maintenance of Records	Moderate
Regulation 31 Complaints Procedures	Moderate
Rules Governing the Use of Seclusion	Moderate
Code of Practice on the Use of Physical Restraint in Approved Centres	Moderate
Code of Practice Relating to the Admission of Children	Moderate

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these are included in the report, in the relevant areas.

2. Acute Psychiatric Unit, Tallaght Hospital

Conditions attached, and an update on Conditions status – if any.

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 20 Provision of Information to Residents
Regulation 22 Premises
Regulation 24 Health and Safety
Regulation 28 Register of Residents
Regulation 30 Mental Health Tribunals
Regulation 33 Insurance
Regulation 34 Certificate of Registration
Part 4 Consent to Treatment
Section 69: Rules Governing The Use of Mechanical Means of Restraint

Outstanding issues from previous inspection

The previous inspection of the approved centre on 10 and 11 June 2014 identified the following areas that were not fully compliant:

Regulation/Rule/Act/Code	Inspection Findings 2015
Regulation 6 Food Safety	Compliant
Regulation 13 Searches	Compliant
Regulation 15 Individual Care Plan	Non-compliant
Regulation 21 Privacy	Compliant
Regulation 22 Premises	Compliant
Regulation 25 CCTV	Compliant
Regulation 27 Maintenance of Records	Compliant
Regulation 31 Complaints Procedures	Compliant
Section 69: The Use of Seclusion	Compliant
Code of Practice on the Admission of Children	Non-compliant
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	Compliant

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 7 Clothing	Low
Regulation 15 Individual Care Plan	Low
Regulation 23 Ordering, Prescribing, Storing and Administration of Medicines.	Moderate
Regulation 26 Staffing	Moderate
Code of Practice on Admission of Children Under the Mental Health Act 2001	Moderate
Code of Practice on the Use of ECT for Voluntary Patients	High

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these are included in the report, in the relevant areas.

3. Department of Psychiatry, Our Lady's Hospital, Navan

Conditions attached, and an update on Conditions status – if any.

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 13 Searches
Regulation 15 Individual Care Plan
Regulation 19 General Health
Regulation 27 Maintenance of Records
Regulation 28 Register of Residents
Regulation 30 Mental Health Tribunals
Regulation 31 Complaints Procedures
Regulation 32 Risk Management Procedures
Regulation 33 Insurance
Regulation 34 Certificate of Registration
Rule on the Use of Seclusion
Code of Practice on the use of Physical Restraint in Approved Centres
Code of Practice for Mental Health Services on Notification of Deaths and Incident Reporting
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre

Outstanding issues from previous inspection

The previous inspection of the approved centre on 15 and 16 July 2014 identified the following areas that were not fully compliant:

Regulation/Rule/Act/Code	Inspection Findings 2015
Regulation 15 Individual Care Plan	Compliant
Regulation 16 Therapeutic Services and Programmes	Compliant
Regulation 21 Privacy	Compliant
Regulation 27 Maintenance of Records	Compliant
Code of Practice on Admission of Children	Compliant
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	Compliant

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 23 Ordering, Prescribing, Storing & Administration of Medicines	Moderate
Regulation 26 Staffing	Moderate
Regulation 29 Operating Policies and Procedures	Low

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these are included in the report, in the relevant areas.

4. Avonmore and Glencree Units, Newcastle Hospital

Conditions attached, and an update on Conditions status – if any.

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 6: Food Safety
Regulation 7: Clothing
Regulation 9: Recreational Activities
Regulation 19: General Health
Regulation 24: Health and Safety
Regulation 26: Staffing
Regulation 28: Register of Residents
Regulation 29: Operating Policies and Procedures
Regulation 30: Mental Health Tribunals
Regulation 31: Complaints Procedures
Regulation 33: Insurance
Regulation 34: Certificate of Registration
Rules: Section 69 Mechanical Restraint
Mental Health Act Part 4: Consent to Treatment
Code of Practice: Death Notifications and Incident Reporting

Outstanding issues from previous inspection

The previous inspection of the approved centre on the 22 and 23 October 2014 identified the following areas that were not fully compliant:

Regulation/Rule/Act/Code	Inspection Findings 2015
Regulation 20: Provision of Information to Residents	Compliant
Regulation 21: Privacy	Compliant
Regulation 22: Premises	Non-Compliant
Regulation 27: Maintenance of Records	Compliant
Regulation 32: Risk Management Procedures	Compliant
Rules: Seclusion	Non-Compliant
Code of Practice: Physical Restraint	Non-Compliant
Code of Practice: Admission, Transfer and Discharge	Compliant
Mental Health Act Part 4: Consent to Treatment	Compliant

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 22: Premises	High
Rules: Section 69 The Use of Seclusion	High
Code of Practice: Physical Restraint	High
Code of Practice: Admission of Children	Moderate

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these are included in the report, in the relevant areas.

5. Bloomfield Hospital, Stocking Lane, Rathfarnham, Co. Dublin

Conditions attached, and an update on Conditions status – if any.

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 5 – Food & Nutrition
Regulation 6 – Food Safety
Regulation 22 – Premises
Regulation 24 – Health & Safety
Regulation 32 – Risk Management Procedures
Regulation 33 – Insurance
Regulation 34 – Certificate of Registration

Outstanding issues from previous inspection

The previous inspection of the approved Centre on 5, 6 August 2014 identified the following areas that were not fully compliant:

Regulation/Rule/Act/Code	Inspection Findings 2015
Physical Restraint	Non Compliant

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 14 – Care of the Dying	Low
Regulation 15 – Individual Care Plan	High
Regulation 23 – Ordering, Prescribing, Storing and Administration of Medicines	Low
Regulation 28 – Register of Residents	Low
Code of Practice – Use of Physical Restraint	Moderate
Code of Practice – Notification of Deaths and Incident Reporting	Low

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these are included in the report, in the relevant areas.

6. Adolescent In-patient Unit, St Vincent's Hospital

Conditions attached, and an update on Conditions status – if any.

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 5 Food and Nutrition
Regulation 6 Food Safety
Regulation 10 Religion

Regulation 14 Care of the Dying
Regulation 16 Therapeutic Services and Programmes
Regulation 17 Children's Education
Regulation 24 Health and Safety
Regulation 33 Insurance
Regulation 34 Certificate of Registration
Code of Practice on Guidance for Persons Working in Mental Health Services with People with Intellectual Disabilities
Code of Practice on Admission, Transfer and Discharge

Outstanding issues from previous inspection

The previous inspection of the approved centre on 30 October 2014 identified the following areas that were not fully compliant:

Regulation/Rule/Act/Code	Inspection Findings 2015
Regulation 15 Individual Care Plan	Compliant
Regulation 16 Therapeutic Services and Programmes	Compliant
Regulation 20 Provision of Information to Residents	Compliant
Regulation 22 Premises	Non-Compliant
Regulation 28 Register of Residents	Compliant
Regulation 29 Operating Policies and Procedures	Compliant
Regulation 32 Risk Management Procedures	Compliant
Section 69: Rules Governing the Use of Seclusion	Compliant
Code of Practice on the Use of Physical Restraint in Approved Centres	Non-Compliant
Code of Practice on Notification of Deaths and Incident Reporting	Compliant
Code of Practice on Admission, Transfer and Discharge	Compliant

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 22 Premises	Moderate
Regulation 26 Staffing	Moderate
Code of Practice on the Use of Physical Restraint in Approved Centres	Moderate
Code of Practice on the Admission of Children Under the Mental Health Act 2001	Moderate

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these are included in the report, in the relevant areas.

7. Willow Grove Adolescent Unit, St Patrick's University Hospital

Conditions attached, and an update on Conditions status – if any.

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 4 – Identification of Residents
Regulation 5 – Food and Nutrition
Regulation 6 – Food Safety
Regulation 7 – Clothing
Regulation 8 – Residents' Personal Property and Possessions
Regulation 10 – Religion
Regulation 11 – Visits
Regulation 13 – Searches
Regulation 14 - Care of the Dying
Regulation 15 – Individual Care Plan
Regulation 16 – Therapeutic Services and Programmes
Regulation 17 – Children's Education
Regulation 18 – Transfer of Residents
Regulation 19 – General Health
Regulation 20 – Provision of Information to Residents
Regulation 21 – Privacy
Regulation 22 – Premises
Regulation 23 – Ordering, Prescribing, Storing and Administration of Medicines
Regulation 24 – Health and Safety
Regulation 25 – The Use of Closed Circuit Television (CCTV)
Regulation 26 – Staffing
Regulation 27 – Maintenance of Records
Regulation 28 – Register of Residents
Regulation 29 – Operating Policies and Procedures
Regulation 31 – Complaints Procedures
Regulation 32 – Risk Management Procedures
Regulation 33 – Insurance
Regulation 34 – Certificate of Registration
Code of Practice on Physical Restraint
Code of Practice on Admission of Children
Notification of Death and Incidents

Outstanding issues from previous inspection

There were no outstanding issues arising from the previous inspection.

Non-compliant areas on this inspection

The 2015 inspection showed that Willow Grove Adolescent Unit, St Patrick's University Hospital was compliant with all applicable regulations, rules and codes of practice.

8. Child and Adolescent Mental Health In-patient Unit, Merlin Park University Hospital**Conditions attached, and an update on Conditions status – if any.**

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
5 – Food and Nutrition

7 - Clothing
9- Recreational Activities
14- Care of the Dying
19- General Health
23- Ordering, Prescribing, Storing and Administration of Medicines
25 - Use of Closed Circuit Television (CCTV)
27- Maintenance of Records
28- Register of Residents
29- Operating Policies and Procedures
33- Insurance
34- Certificate of Registration
Code of Practice - Admission of Children
Code of Practice - Notification of Deaths and Incidents
Code of Practice - Admission, Transfer and Discharge to and from an Approved Centre

Outstanding issues from previous inspection

The previous inspection of the approved centre on 14 March 2014 identified the following areas that were not fully compliant:

Regulation/Rule/Act/Code	Inspection Findings 2015
20 - Provision of Information to Residents	Compliant
22 - Premises	Non-Compliant
Section 69 – The Use of Seclusion	Non-Compliant

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
22 - Premises	Moderate
Section 69- The Use of Seclusion	High

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these are included in the report, in the relevant areas.

9. St Brigid's Ward and St Marie Goretti Ward, Cluain Lir Care Centre

Conditions attached, and an update on Conditions status – if any.

There were no conditions attached to the registration of this approved centre at the time of inspection.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 6: Food Safety
Regulation 28: Register of Residents
Regulation 29: Operating Policies and Procedures
Regulation 30: Mental Health Tribunals
Regulation 33: Insurance
Regulation 34: Certificate of Registration
Consent to Treatment

Outstanding issues from previous inspection

The previous inspection of the approved centre on 1 May 2014 identified the following areas that were not fully compliant:

Regulation/Rule/Act/Code	Inspection 2015	Findings
Regulation 9: Recreational Activities	Compliant	
Regulation 12: Communication	Compliant	
Regulation 15: Individual Care Plan	Compliant	
Regulation 16: Therapeutic Services and Programmes	Non-Compliant	
Regulation 19: General Health	Compliant	
Regulation 20: Provision of Information	Compliant	
Regulation 22: Premises	Compliant	
Regulation 26: Staffing	Compliant	
Regulation 28: Register of Residents	Compliant	
Regulation 29: Operating Policies and Procedures	Compliant	
Regulation 31: Complaints Procedures	Compliant	
Regulation 32: Risk Management Procedures	Compliant	
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	Compliant	
Code of Practice on the Notification of Deaths and Incident Reporting	Compliant	
Guidance for Persons working in Mental Health Services with People with Intellectual Disabilities	Not-Applicable	
Rules Governing the use of Mechanical Means of Bodily Restraint	Non-Compliant	

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 8: Residents' Personal Property and Possessions	Low
Regulation 13: Searches	Moderate
Regulation 16: Therapeutic Services and Programmes	Moderate
Regulation 23: Ordering, Prescribing, Storing and Administration of Medicines	High
Rules Governing the use of Mechanical Means of Bodily Restraint (Part 5)	High
Code of Practice on the Use of Physical Restraint	Moderate

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these are included in the report, in the relevant areas.

The 24-Hour Nurse Staffed Community Residences reported on are:

Woodview, Merlin Park University Hospital

Is the facility a hospital or other in-patient facility?

- **Conclusion:** The inspection team concluded that the residence met the criteria for an 'in-patient' facility.

Does the facility provide care and treatment to a person with a mental illness or a mental disorder?

- **Conclusion: The inspection team concluded that, based on the description of treatment provided, care and treatment were provided to persons with a mental disorder or mental illness.**

Is the care and treatment provided under the clinical direction of a consultant psychiatrist?

- **Conclusion: Care and treatment was provided under the clinical direction of a consultant psychiatrist.**

Is the primary nature of the service to provide care and treatment to a person(s) suffering from a mental illness or a mental disorder within the meaning of the 2001 Act?

- **Conclusion: The inspection team concluded that the primary nature of the service in Woodview was to provide care and treatment to persons with a mental illness or disorder.**

The findings of the focussed inspection of Woodview community residence in Merlin Park, Galway on 29 January 2016 indicated that the facility was operating as a 'centre', as defined in the Mental Health Act 2001. The service was therefore invited to submit an application to the Mental Health Commission for registration under the Mental Health Act 2001. The unit was registered as an approved centre with effect from the 15 March 2016.