

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 Fintan's Hospital – Ward 6
http://www.mhcirl.ie/File/2016IRs/StFintans_ir2016.pdf
2. Sycamore Unit, Connolly Hospital
http://www.mhcirl.ie/File/2016IRs/SycamoreConnollyHosp_ir2016.pdf
3. Department of Psychiatry, Waterford Regional Hospital
http://www.mhcirl.ie/File/2016IRs/DOP_Waterford_ir2016.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 Fintan's Hospital – Ward 6

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 10 Religion
Regulation 11 Visits
Regulation 24 Health and Safety

Outstanding issues from previous inspection

The previous inspection of the approved centre on 20, 21 & 22 July 2015 identified the following areas that were not compliant:

Inspection findings 2015 – Non compliant areas	Inspection Findings 2016
Regulation 15 Individual Care Plan	Compliant
Regulation 18 Transfer of Residents	Compliant
Regulation 21 Privacy	Non-compliant
Regulation 22 Premises	Non-compliant
Regulation 32 Risk Management Procedures	Compliant
Code of Practice on the Use of Physical Restraint	Non-compliant
Code of Practice on the Notification of Deaths and Incident Reporting	Non-compliant
Code of Practice on Admission, Transfer and Discharge	Compliant

Corrective and Preventative Actions (CAPAs) relating to the 2015 inspection were reviewed during the inspection process. Where relevant specific reference is made in the applicable Regulation and Code of Practice. The Commission monitors the implementation of CAPAs on an ongoing basis. The latest CAPA review was completed on 29 March 2016.

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 14 Care of the Dying	Low
Regulation 21 Privacy	Moderate
Regulation 22 Premises	Moderate
Regulation 23 Ordering, Prescribing, Storing and Administration of Medicines	Moderate
Regulation 26 Staffing	Moderate
Code of Practice on the Use of Physical	Low

Restraint	
Code of Practice on the Notification of Deaths and Incident Reporting	Low

The approved centre was requested to provide CAPAs for areas of non-compliance. These are included in **Appendix 1** of the report.

2. Sycamore Unit, Connolly Hospital

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

The approved centre had a condition applied to its registration requiring full compliance with Article 26 (Staffing) of S.I. No. 551 of 2006; Mental Health Act 2001 (Approved Centres) Regulations 2006.

Areas of compliance rated Excellent on this inspection

Regulation/Rule/Act/Code
Regulation 7 Clothing
Regulation 23 Ordering, Prescribing, Storing and Administration of Medicines
Regulation 24 Health & Safety

Outstanding issues from previous inspection

The previous inspection of the approved centre on 16 and 17 July 2015 identified the following areas that were not compliant:

Inspection findings 2015 – Non compliant areas	Inspection Findings 2016
Regulation 15 Individual Care Plan	Non-compliant
Regulation 22 Premises	Compliant
Regulation 29 Operating Policies and Procedures	Compliant

CAPAs in relation to a number of non-compliances were submitted following previous inspection. A number of actions had been completed and further actions were currently ongoing. Review of progress in relation to these CAPAs during the inspection indicated that significant progress had been made in relation to both Regulation 22 Premises and Regulation 29 Operating Policies and Procedures.

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 8 Resident's Personal Property & Possessions	Moderate
Regulation 14 Care of the Dying	Low
Regulation 15 Individual Care Plan	Moderate
Regulation 31 Complaints	Low
Regulation 32 Risk Management Procedures	Moderate
Code of Practice on the Notification of Deaths and Incident Reporting	Low
Code of Practice on Admission, Transfer, and Discharge	Low

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance. These are included in **Appendix 1** of the report.

3. Department of Psychiatry, Waterford Regional 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 8 Residents' Personal Property and Possessions
Regulation 13 Searches

Outstanding issues from previous inspection

The previous inspection of the approved centre on 24, 25 and 26 August 2015 identified the following areas that were not compliant:

Inspection findings 2015 – Non compliant areas	Inspection Findings 2016
Regulation 7 Clothing	Non-Compliant
Regulation 13 Searches	Compliant
Regulation 20 Provision of Information to Residents	Compliant
Regulation 21 Privacy	Non-Compliant
Regulation 22 Premises	Non-Compliant
Regulation 23 Ordering, Prescribing, Storing and Administration of Medicines	Non-Compliant
Regulation 31 Complaints Procedures	Non-Compliant
Code of Practice on the Admission of Children	Non-Compliant

Following the publication of the report on the inspection of 2015, the service was requested to submit a Corrective and Preventative Action plan (CAPA) for each area of inspection with which they were not compliant. In all, the service submitted eight CAPAs. Although the service reported that all elements of the CAPAs had been completed, the inspection team found that three CAPAs had not been implemented, two had been partially implemented and three had been completed, but remained non-compliant with the Regulation.

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 7 Clothing	High
Regulation 9 Recreational Activities	Critical
Regulation 11 Visits	High

Regulation 15 Individual Care Plan	Moderate
Regulation 16 Therapeutic Services and Programmes	Critical
Regulation 21 Privacy	Critical
Regulation 22 Premises	High
Regulation 23 Ordering, Prescribing, Storing and Administration of Medicines	Moderate
Regulation 26 Staffing	High
Regulation 27 Maintenance of Records	Moderate
Regulation 28 Register of Residents	High
Regulation 31 Complaints Procedures	Moderate
Regulation 32 Risk Management Procedures	High
Rules Governing the Use of Seclusion	Critical
Consent to Treatment, Part 4 MHA 2001	Critical
Code of Practice on the Use of Physical Restraint	Moderate
Code of Practice on the Admission of Children	Moderate
Code of Practice on the Notification of Deaths and Incident Reporting	Moderate
Code of Practice on Guidance for Persons working in Mental Health Services with People with Intellectual Disabilities	High
Code of Practice on Admission, Transfer and Discharge	Low

The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance. These are included in **Appendix 1** of the report. An Immediate Action Notice was issued to the registered proprietor in relation to Consent to Treatment, Part 4 Mental Health Act 2001 requiring that the issue in relation to consent be addressed immediately by the service.