

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. Department of Psychiatry, Roscommon University Hospital
http://www.mhcirl.ie/File/2017IRs/DOPROS_ir2017.pdf
2. Acute Psychiatric Unit, Tallaght Hospital
http://www.mhcirl.ie/File/2017IRs/APUTal_ir2017.pdf
3. Department of Psychiatry, Connolly Hospital, Dublin
http://www.mhcirl.ie/File/2017IRs/DOPCon_ir2017.pdf
4. Acute Psychiatric Unit, Ennis Hospital, Clare
http://www.mhcirl.ie/File/2017IRs/APUEnnis_ir2017.pdf
5. An Collin, Castlebar, Mayo
http://www.mhcirl.ie/File/2017IRs/AnCoil_ir2017.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.

General:

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/

Department of Psychiatry, Roscommon University Hospital

ID Number: AC0011

2017 Approved Centre Inspection Report (Mental Health Act 2001)

Department of Psychiatry, Roscommon
University Hospital
Athlone Road
Roscommon

Approved Centre Type:
Acute Adult Mental Health Care
Psychiatry of Later Life

Most Recent Registration Date:
1 March 2017

Conditions Attached:
Yes

Registered Proprietor:
HSE

Registered Proprietor Nominee:
Mr Steve Jackson, General Manager,
CHO 2 - Mental Health Services

Inspection Team:
Noeleen Byrne, Lead Inspector
Dr Susan Finnerty
Leon Donovan
Sandra McGrath
Barbara Morrissey

Inspection Date:
5 – 8 September 2017

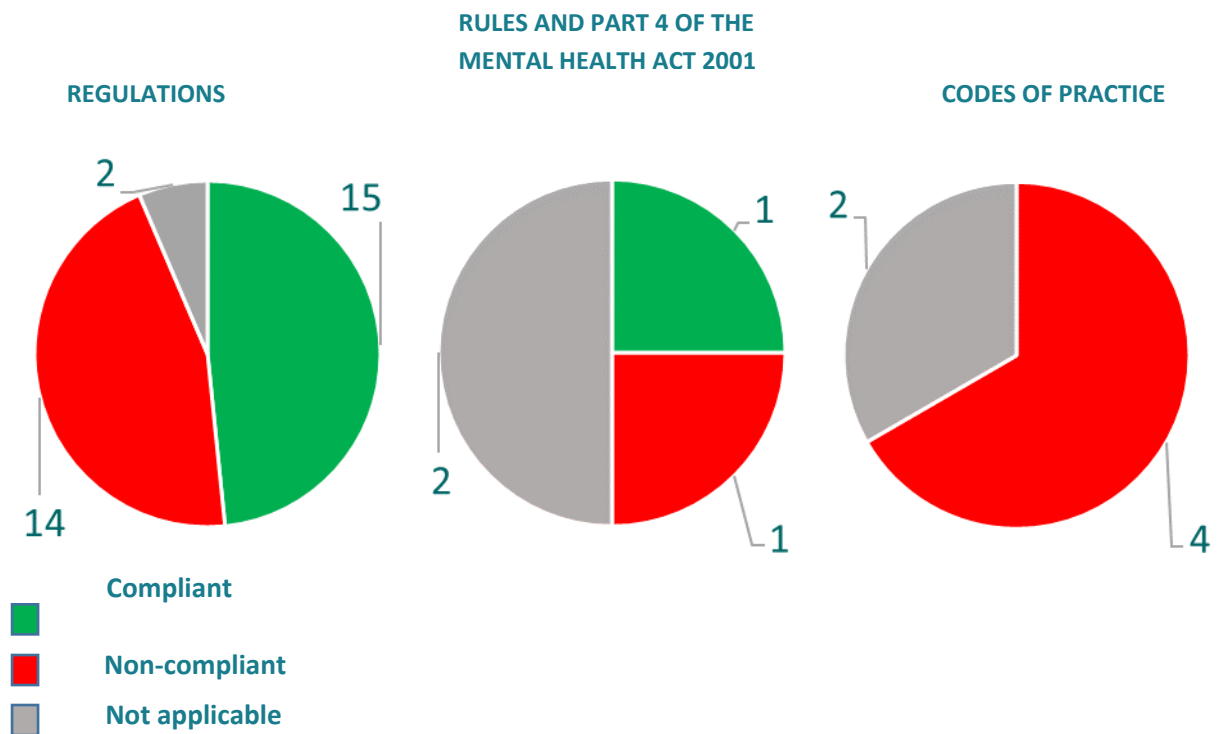
Previous Inspection Date:
15 - 18 November 2016

Inspection Type:
Unannounced Annual Inspection

The Inspector of Mental Health Services:
Dr Susan Finnerty MCRN009711

Date of Publication:
22 March 2018

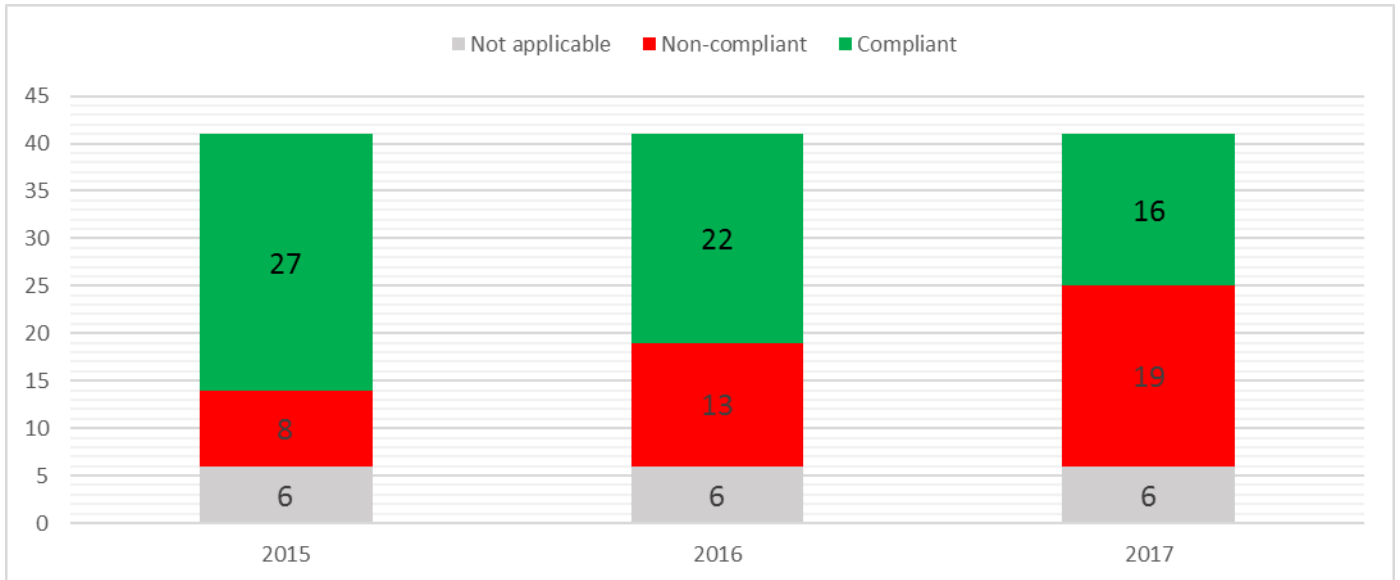
2017 COMPLIANCE RATINGS



RATINGS SUMMARY 2015 – 2017

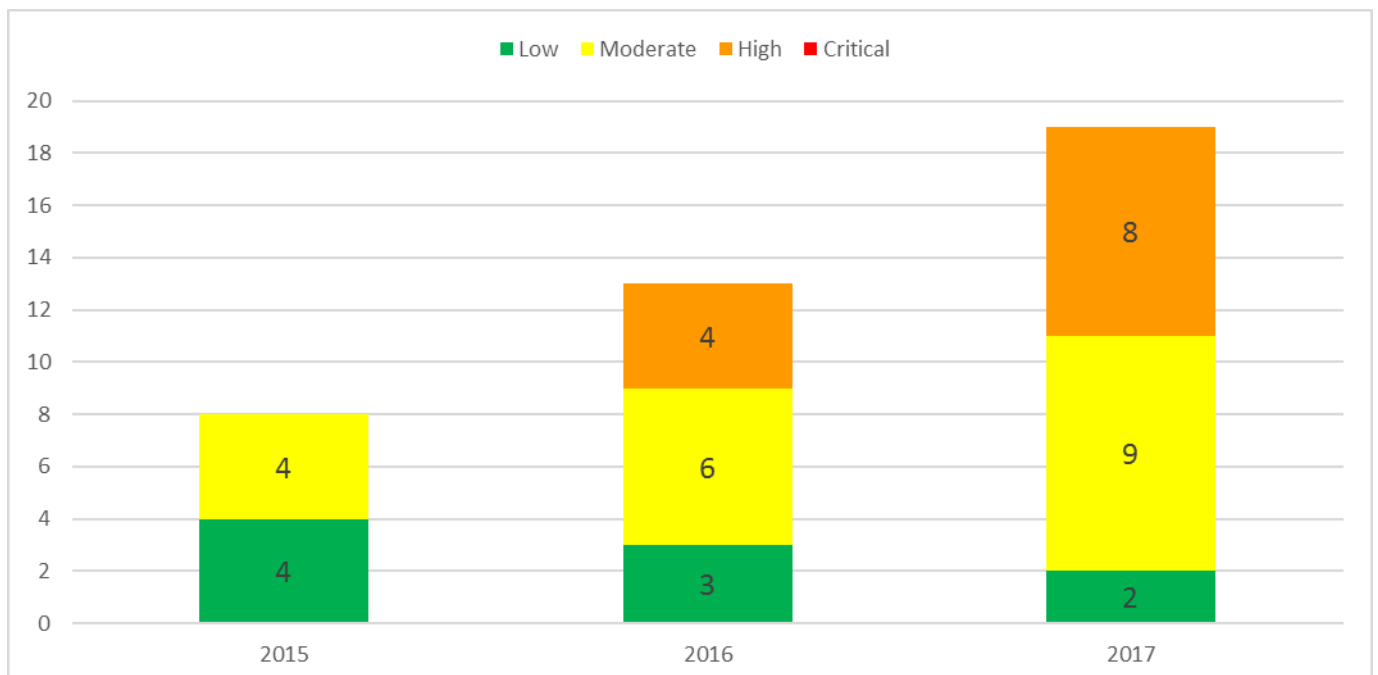
Compliance ratings across all 41 areas of inspection are summarised in the chart below.

Chart 1 – Comparison of overall compliance ratings 2015 – 2017



Where non-compliance is determined, the risk level of the non-compliance will be assessed. Risk ratings across all non-compliant areas are summarised in the chart below.

Chart 2 – Comparison of overall risk ratings 2015 – 2017



Conditions to registration

There was one condition attached to the registration of this approved centre at the time of inspection:

Condition: To ensure adherence to *Regulation 21: Privacy* and *Regulation 22: Premises*, the approved centre shall implement a programme of maintenance to ensure the premises are safe and meet the needs, privacy and dignity of the resident group. The approved centre shall provide a progress update on the programme of maintenance to the Mental Health Commission in a form and frequency prescribed by the Commission.

Non-compliant areas from 2016 inspection

The previous inspection of the approved centre on 15 – 18 November 2016 identified the following areas that were non-compliant. The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these were published with the 2016 inspection report.

Regulation/Rule/Act/Code	2017 Inspection Findings
Regulation 6: Food Safety	Non-Compliant
Regulation 16: Therapeutic Services and Programmes	Non-Compliant
Regulation 21: Privacy	Non-Compliant
Regulation 22: Premises	Non-Compliant
Regulation 23: Ordering, Prescribing, Storing and Administration of Medicines	Compliant
Regulation 26: Staffing	Non-Compliant
Regulation 27: Maintenance of Records	Non-Compliant
Regulation 28: Register of Residents	Non-Compliant
Rules Governing the Use of Seclusion	Non-Compliant
Part 4 of the Mental Health Act 2001: Consent to Treatment	Compliant
Code of Practice on the Use of Physical Restraint in Approved Centres	Non-Compliant
Code of Practice Guidance for Persons Working in Mental Health Services with People with Intellectual Disabilities	Non-Compliant
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	Non-Compliant

Non-compliant areas on this inspection

Non-compliant (X) areas on this inspection are detailed below. Also shown is whether the service was compliant (✓) or non-compliant (X) in these areas in 2016 and 2015:

Regulation/Rule/Act/Code	2015 Compliance	2016 Compliance	2017 Compliance
Regulation 5: Food and Nutrition	✓	✓	X Moderate
Regulation 6: Food Safety	✓	X	X Moderate
Regulation 9: Recreational Activities	✓	✓	X High
Regulation 11: Visits	✓	✓	X

			High
Regulation 13: Searches	✓	✓	X Moderate
Regulation 15: Individual Care Plan	X	✓	X Moderate
Regulation 16: Therapeutic Services and Programmes	✓	X	X High
Regulation 19: General Health	✓	✓	X High
Regulation 21: Privacy	✓	X	X High
Regulation 22: Premises	X	X	X High
Regulation 26: Staffing	✓	X	X Moderate
Regulation 27: Maintenance of Records	✓	X	X Low
Regulation 28: Register of Residents	X	X	X Moderate
Regulation 32: Risk Management Procedures	✓	✓	X High
Rules Governing the Use of Seclusion	✓	X	X Moderate
Code of Practice on the Use of Physical Restraint in Approved Centres	X	X	X Moderate
Code of Practice for Mental Health Services on Notification of Deaths and Incident Reporting	✓	✓	X Low
Code of Practice Guidance for Persons working in Mental Health Services with People with Intellectual Disabilities	✓	X	X Moderate
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	X	X	X High

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.

Areas of compliance rated Excellent on this inspection

The following area was rated excellent on this inspection:

Regulation

Regulation 10: Religion

Acute Psychiatric Unit, Tallaght Hospital

ID Number: AC0012

2017 Approved Centre Inspection Report (Mental Health Act 2001)

Acute Psychiatric Unit, Tallaght Hospital
Tallaght
Dublin 24

Approved Centre Type:
Acute Adult Mental Health Care
Continuing Mental Health Care/Long Stay
Mental Health Rehabilitation

Most Recent Registration Date:
1 March 2017

Conditions Attached:
Yes

Registered Proprietor:
HSE

Registered Proprietor Nominee:
Mr Kevin Brady, Head of Service,
Mental Health - CHO 7

Inspection Team:
Leon Donovan, Lead Inspector
Sandra McGrath
Mary Connellan
David McGuinness
Carol Brennan-Forsyth

Inspection Date:
12 – 15 September 2017

Previous Inspection Date:
11 – 13 October 2016

Inspection Type:
Unannounced Annual Inspection

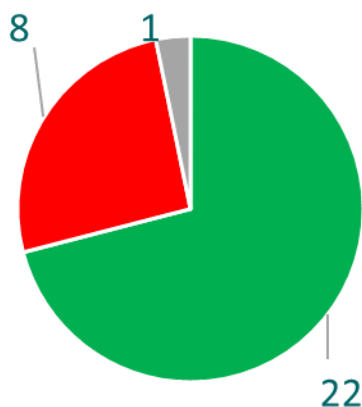
The Inspector of Mental Health Services:
Dr Susan Finnerty MCRN009711

Date of Publication:
22 March 2018

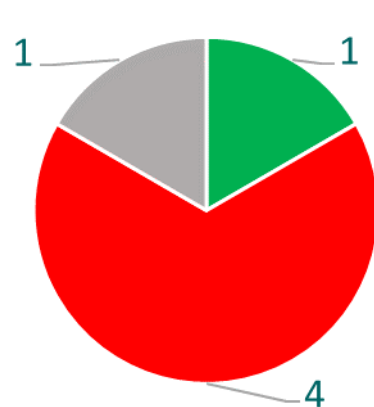
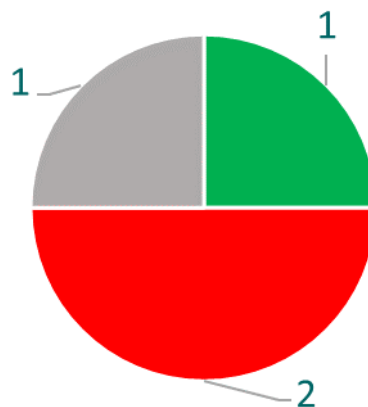
2017 COMPLIANCE RATINGS

RULES AND PART 4 OF THE MENTAL HEALTH ACT 2001

REGULATIONS



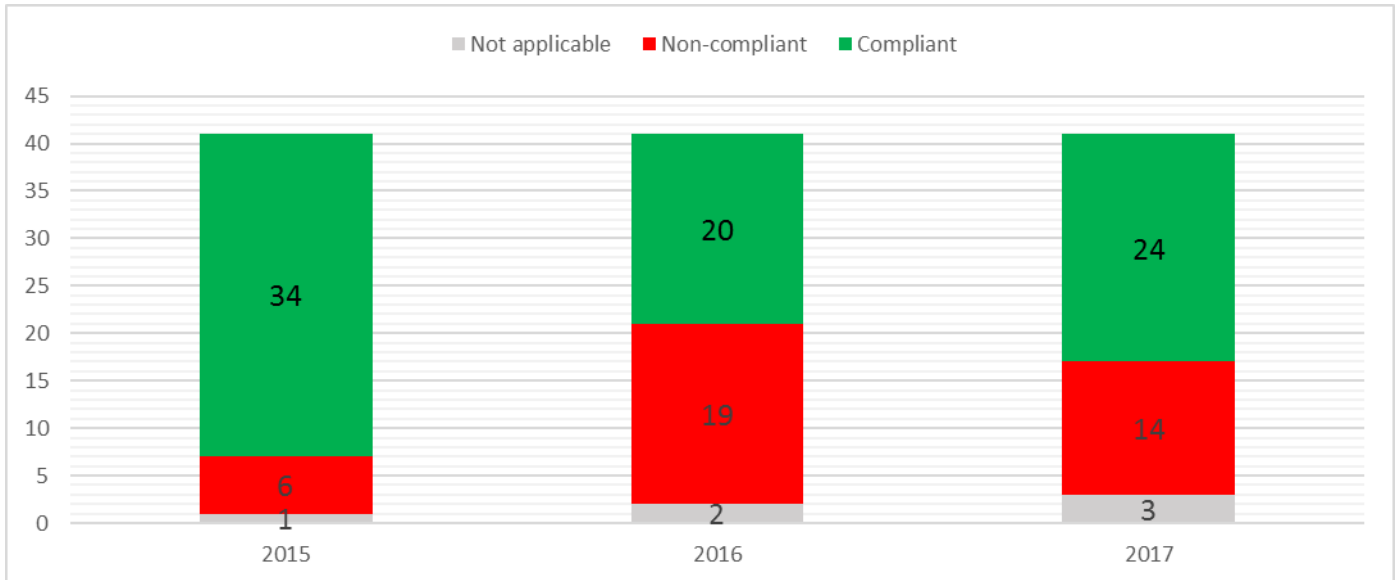
CODES OF PRACTICE



RATINGS SUMMARY 2015 – 2017

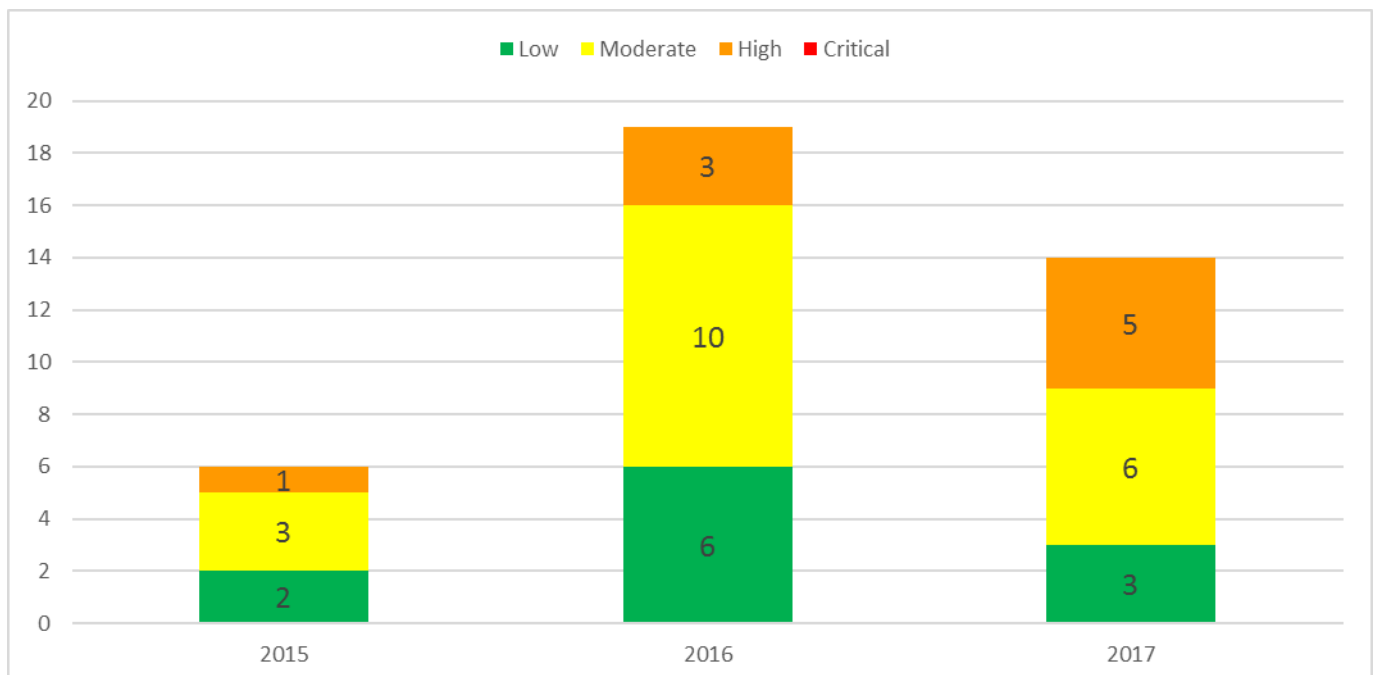
Compliance ratings across all 41 areas of inspection are summarised in the chart below.

Chart 1 – Comparison of overall compliance ratings 2015 – 2017



Where non-compliance is determined, the risk level of the non-compliance will be assessed. Risk ratings across all non-compliant areas are summarised in the chart below.

Chart 2 – Comparison of overall risk ratings 2015 – 2017



Conditions to registration

There were two conditions attached to the registration of this approved centre at the time of inspection:

Condition 1: To ensure adherence to *Regulation 15: Individual Care Plan*, the approved centre shall audit their individual care plans on a monthly basis. The approved centre shall provide a report on the results of the audits to the Mental Health Commission in a form and frequency prescribed by the Commission.

Condition 2: To ensure adherence to *Regulation 26(4): Staffing*, the approved centre shall implement a plan to ensure all healthcare professionals working in the approved centre are up-to-date in mandatory training areas. The approved centre shall provide a progress update on staff training to the Mental Health Commission in a form and frequency prescribed by the Commission.

Non-compliant areas from 2016 inspection

The previous inspection of the approved centre on 11 – 13 October 2016 identified the following areas that were non-compliant. The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these were published with the 2016 inspection report.

Regulation/Rule/Act/Code	2017 Inspection Findings
Regulation 7: Clothing	Compliant
Regulation 11: Visits	Compliant
Regulation 15: Individual Care Plan	Non-Compliant
Regulation 19: General Health	Non-Compliant
Regulation 22: Premises	Non-Compliant
Regulation 23: Ordering, Prescribing, Storing and Administration of Medicines	Non-Compliant
Regulation 26: Staffing	Non-Compliant
Regulation 27: Maintenance of Records	Non-Compliant
Regulation 28: Register of Residents	Non-Compliant
Regulation 29: Operating Policies and Procedures	Compliant
Regulation 31: Complaints Procedures	Compliant
Regulation 32: Risk Management Procedures	Non-Compliant
Rules Governing the Use of Seclusion	Non-Compliant
Part 4 of the Mental Health Act 2001: Consent to Treatment	Non-Compliant
Code of Practice on the Use of Physical Restraint in Approved Centres	Non-Compliant
Code of Practice Relating to Admission of Children Under the Mental Health Act 2001	Non-Compliant
Code of Practice for Mental Health Services on Notification of Deaths and Incident Reporting	Non-Compliant
Code of Practice Guidance for Persons working in Mental Health Services with People with Intellectual Disabilities	Not Applicable
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	Non-Compliant

Non-compliant areas on this inspection

Non-compliant (X) areas on this inspection are detailed below. Also shown is whether the service was compliant (✓) or non-compliant (X) in these areas in 2016 and 2015:

Regulation/Rule/Act/Code	2015 Compliance	2016 Compliance	2017 Compliance
Regulation 15: Individual Care Plan	X	X	X High
Regulation 19: General Health	✓	X	X Moderate
Regulation 22: Premises	✓	X	X High
Regulation 23: Ordering, Prescribing, Storing and Administration of Medicines	X	X	X Moderate
Regulation 26: Staffing	X	X	X High
Regulation 27: Maintenance of Records	✓	X	X Moderate
Regulation 28: Register of Residents	✓	X	X Low
Regulation 32: Risk Management Procedures	✓	X	X Moderate
Rules Governing the Use of Seclusion	✓	X	X High
Part 4 of the Mental Health Act 2001: Consent to Treatment	✓	X	X High
Code of Practice on the Use of Physical Restraint in Approved Centres	✓	X	X Low
Code of Practice Relating to Admission of Children Under the Mental Health Act 2001	X	X	X Moderate
Code of Practice for Mental Health Services on Notification of Deaths and Incident Reporting	✓	X	X Low
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	✓	X	X Moderate

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.

Areas of compliance rated Excellent on this inspection

The following areas were rated excellent on this inspection:

Regulation
Regulation 4: Identification of Residents

Department of Psychiatry, Connolly Hospital

ID Number: AC0020

2017 Approved Centre Inspection Report (Mental Health Act 2001)

Department of Psychiatry
Connolly Hospital
Blanchardstown
Dublin 15

Approved Centre Type:
Acute Adult Mental Health Care

Most Recent Registration Date:
7 December 2015

Conditions Attached:
None

Registered Proprietor:
HSE

Registered Proprietor Nominee:
Ms Angela Walsh, Head of Mental Health Services, CHO 9.

Inspection Team:
Barbara Morrissey, Lead Inspector
Dr Ann Marie Murray
Sandra McGrath
Siobhan Dinan
Martin McMenamin

Inspection Date:
26 – 29 September 2017

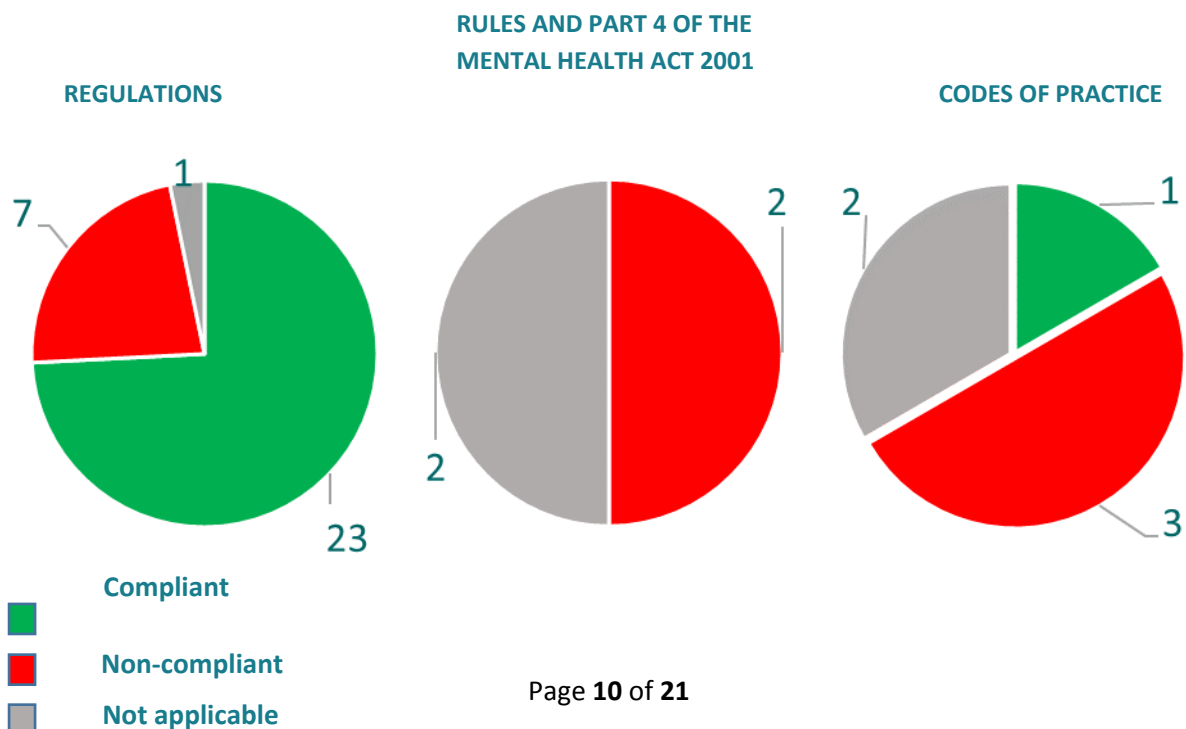
Previous Inspection Date:
18 – 21 October 2016

Inspection Type:
Unannounced Annual Inspection

The Inspector of Mental Health Services:
Dr Susan Finnerty MCRN009711

Date of Publication:
22 March 2018

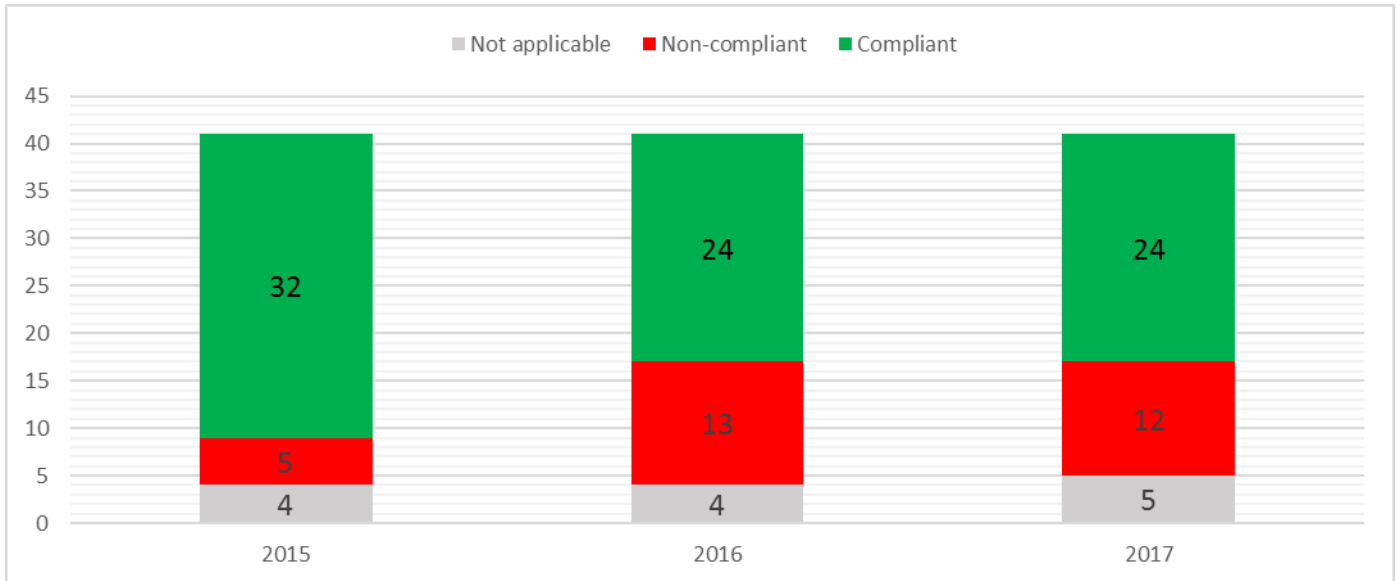
COMPLIANCE RATINGS 2017



RATINGS SUMMARY 2015 – 2017

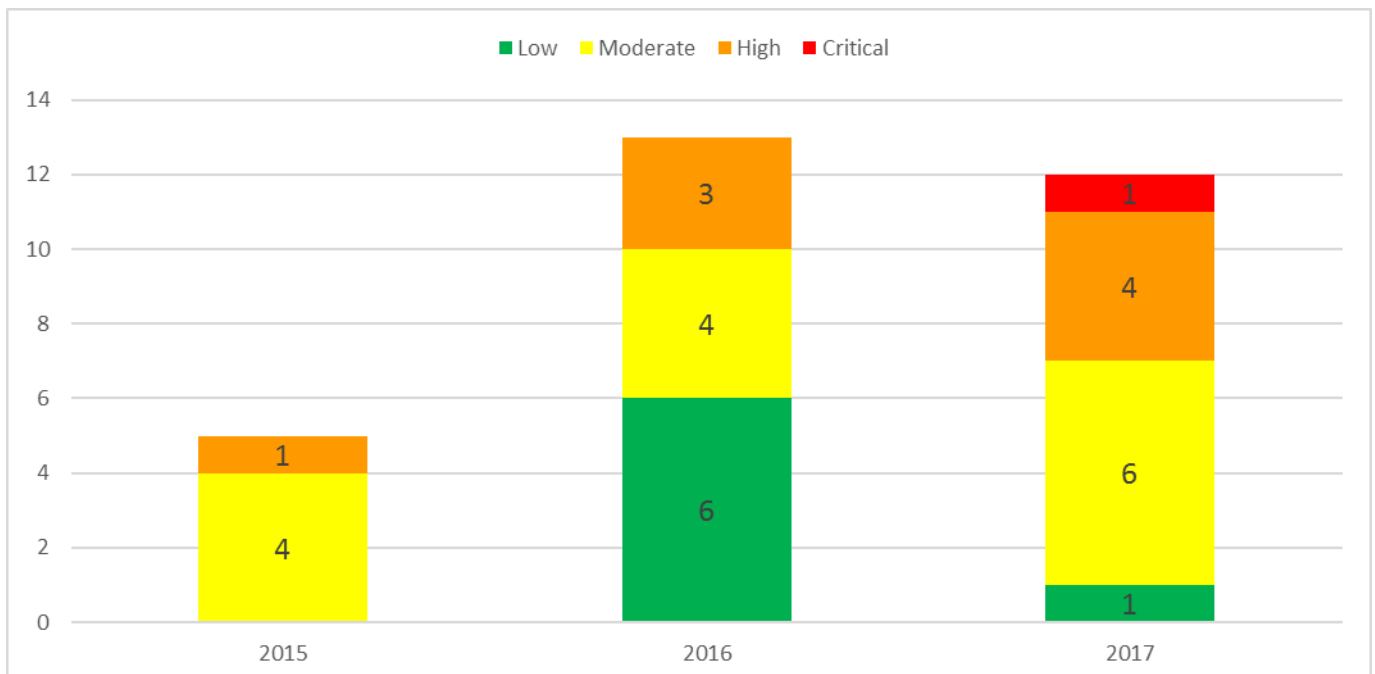
Compliance ratings across all 41 areas of inspection are summarised in the chart below.

Chart 1 – Comparison of overall compliance ratings 2015 – 2017



Where non-compliance is determined, the risk level of the non-compliance will be assessed. Risk ratings across all non-compliant areas are summarised in the chart below.

Chart 2 – Comparison of overall risk ratings 2015 – 2017



Conditions to registration

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

Non-compliant areas from 2016 inspection

The previous inspection of the approved centre on 18 – 21 October 2016 identified the following areas that were non-compliant. The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these were published with the 2016 inspection report.

Regulation/Rule/Act/Code	2017 Inspection Findings
Regulation 14: Care of the Dying	Non-Compliant
Regulation 15: Individual Care Plan	Non-Compliant
Regulation 22: Premises	Non-Compliant
Regulation 23: Ordering, Prescribing, Storing and Administration of Medicines	Non-Compliant
Regulation 26: Staffing	Non-Compliant
Regulation 27: Maintenance of Records	Non-Compliant
Rules Governing the Use of Seclusion	Non-Compliant
Part 4 of the Mental Health Act 2001: Consent to Treatment	Non-Compliant
Code of Practice on the Use of Physical Restraint in Approved Centres	Compliant
Code of Practice Relating to Admission of Children under the Mental Health Act 2001	Non-Compliant
Code of Practice for Mental Health Services on Notification of Deaths and Incident Reporting	Non-Compliant
Code of Practice Guidance for Persons working in Mental Health Services with People with Intellectual Disabilities	Not Applicable
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	Non-Compliant

Non-compliant areas on this inspection

Non-compliant (X) areas on this inspection are detailed below. Also shown is whether the service was compliant (✓) or non-compliant (X) in these areas in 2016 and 2015:

Regulation/Rule/Act/Code	2015 Compliance	2016 Compliance	2017 Compliance
Regulation 5: Food and Nutrition	✓	✓	X High
Regulation 14: Care of the Dying	✓	X	X Moderate
Regulation 15: Individual Care Plan	X	X	X High
Regulation 22: Premises	✓	X	X Moderate
Regulation 23: Ordering, Prescribing, Storing and Administration of Medicines	X	X	X High
Regulation 26: Staffing	✓	X	X Moderate
Regulation 27: Maintenance of Records	✓	X	X High
Rules Governing the Use of Seclusion	✓	X	X

			Moderate
Part 4 of the Mental Health Act 2001: Consent to Treatment	X	X	X Critical
Code of Practice Relating to Admission of Children under the Mental Health Act 2001	X	X	X Moderate
Code of Practice for Mental Health Services on Notification of Deaths and Incident Reporting	✓	X	X Moderate
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	✓	X	X 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.

Areas of compliance rated Excellent on this inspection

The following areas were rated excellent on this inspection:

Regulation
Regulation 7: Clothing
Regulation 8: Residents' Personal Property and Possessions
Regulation 9: Recreational Activities
Regulation 10: Religion
Regulation 11: Visits
Regulation 16: Therapeutic Services and Programmes
Regulation 30: Mental Health Tribunals

Acute Psychiatric Unit, Ennis Hospital

ID Number: AC0022

2017 Approved Centre Inspection Report (Mental Health Act 2001)

Acute Psychiatric Unit
Ennis Hospital
Ennis
Co. Clare

Approved Centre Type:
Acute Adult Mental Health Care
Psychiatry of Later Life
Mental Health Rehabilitation
Mental Health Care for People with
Intellectual Disability

Most Recent Registration Date:
1 March 2017

Conditions Attached:
Yes

Registered Proprietor:
HSE

Registered Proprietor Nominee:
Mr Mark Sparling, Head of Service -
Mental Health, CHO 3

Inspection Team:
Dr David McGuinness, Lead Inspector
Dr Enda Dooley
Orla O'Neill
Mary Connellan

Inspection Date:
29 August – 1 September 2017

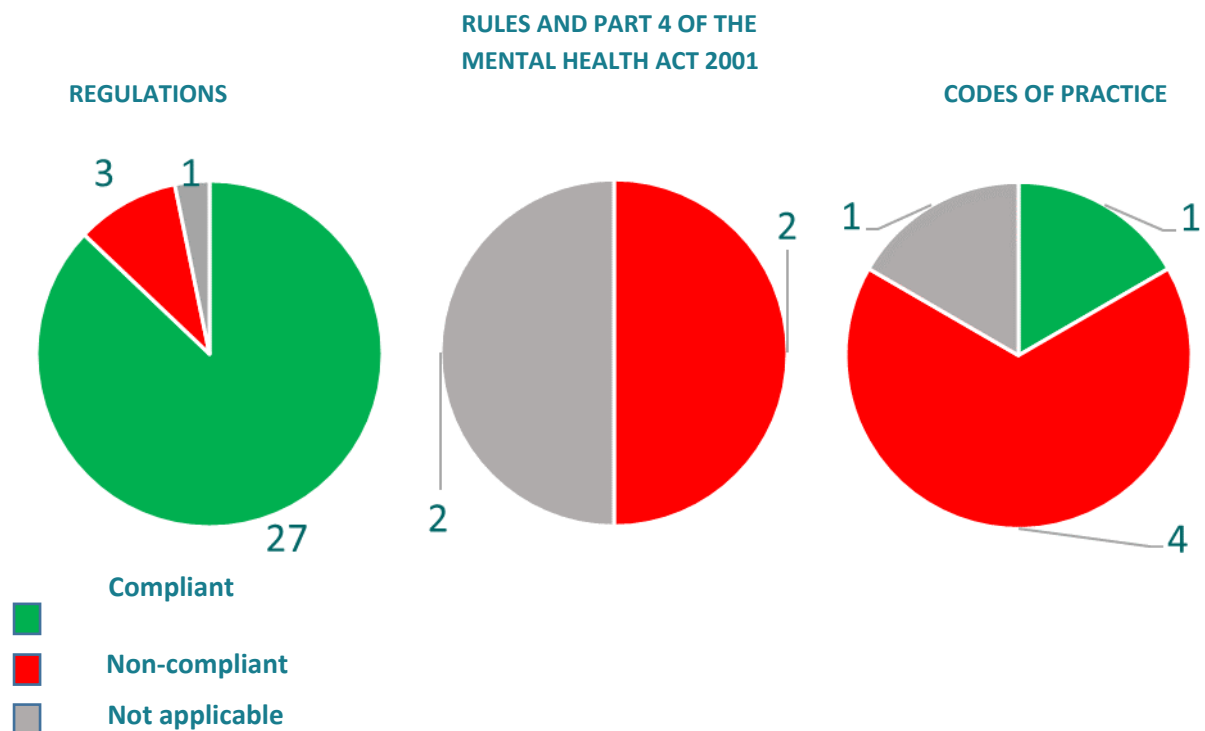
Previous Inspection Date:
25 – 28 October 2016

Inspection Type:
Unannounced Annual Inspection

The Inspector of Mental Health Services:
Dr Susan Finnerty MCRN009711

Date of Publication:
22 March 2018

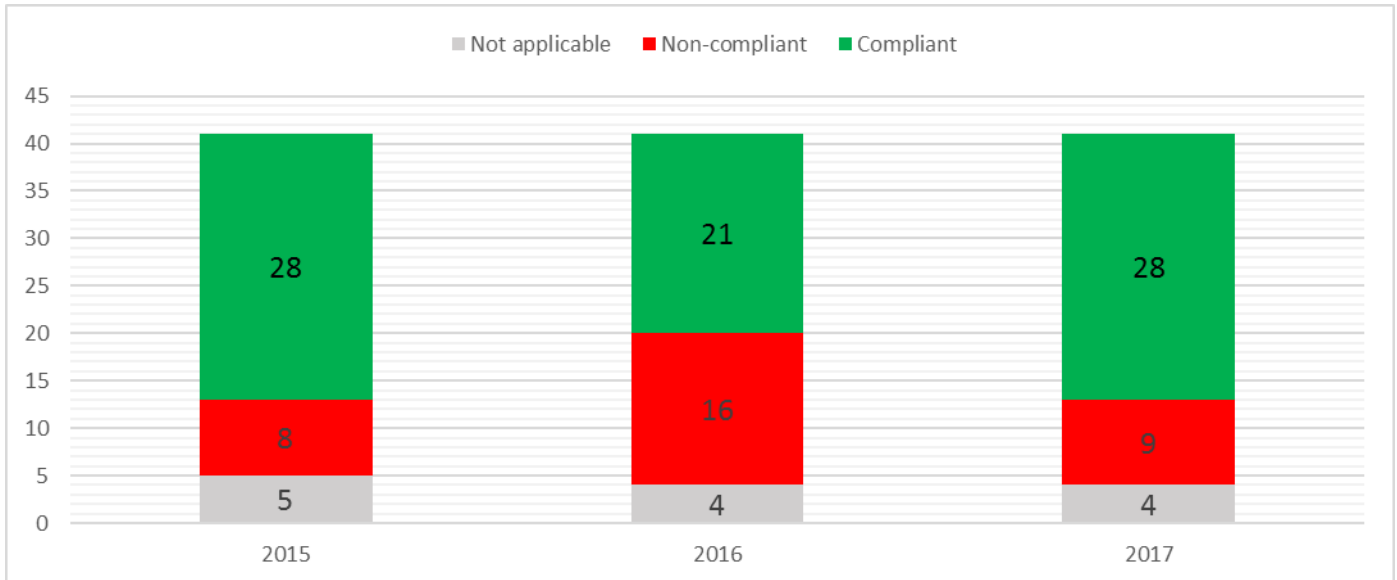
COMPLIANCE RATINGS 2017



RATINGS SUMMARY 2015 – 2017

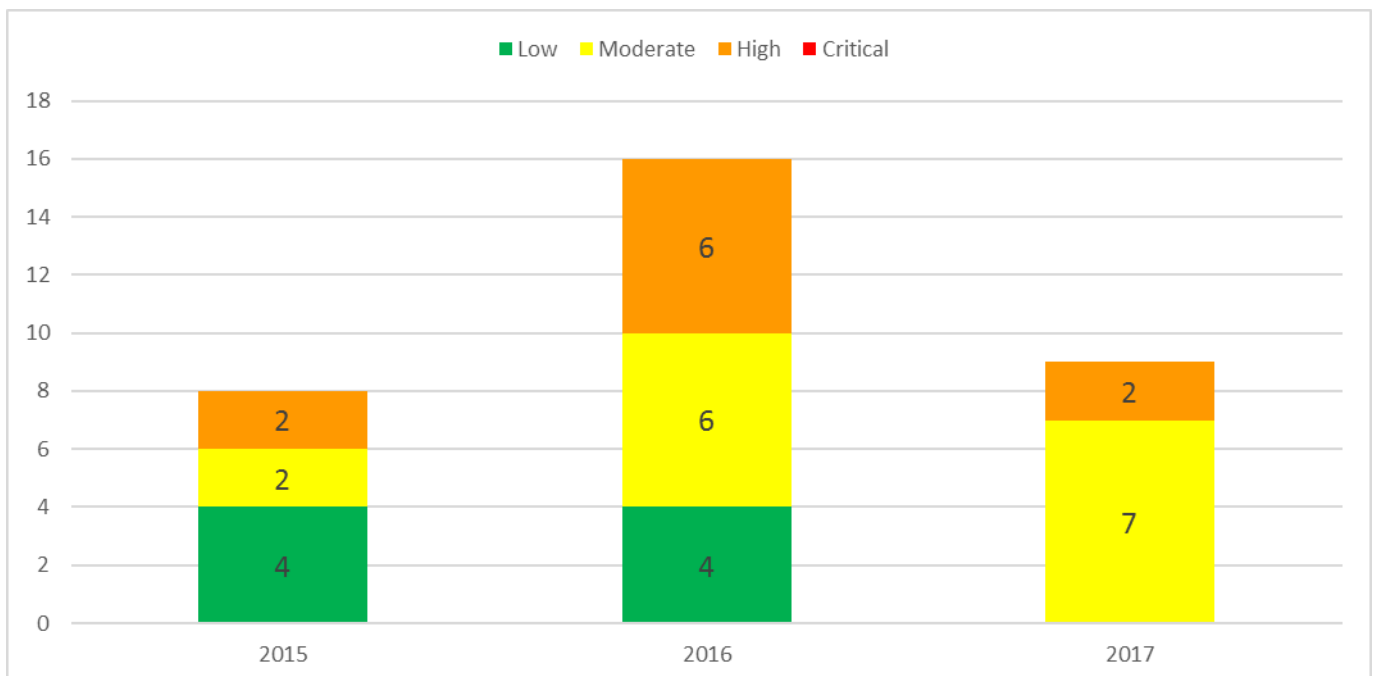
Compliance ratings across all 41 areas of inspection are summarised in the chart below.

Chart 1 – Comparison of overall compliance ratings 2015 – 2017



Where non-compliance is determined, the risk level of the non-compliance will be assessed. Risk ratings across all non-compliant areas are summarised in the chart below.

Chart 2 – Comparison of overall risk ratings 2015 – 2017



Conditions to registration

Condition 1: To ensure adherence to *Regulation 21: Privacy* and *Regulation 22: Premises*, the approved centre shall implement a programme of maintenance to ensure the premises are safe and meet the needs, privacy and dignity of the resident group. The approved centre shall provide a progress update to the Mental Health Commission on the programme of maintenance in a form and frequency prescribed by the Commission.

Condition 2: To ensure adherence to *Regulation 26 (4): Staffing* the approved centre shall implement a plan to ensure all healthcare professionals working in the approved centre are up to date in mandatory training areas. The approved centre shall provide a progress update on staff training to the Mental Health Commission in a form and frequency prescribed by the Commission.

Non-compliant areas from 2016 inspection

The previous inspection of the approved centre on 25-27 October 2016 identified the following areas that were non-compliant. The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these were published with the 2016 inspection report.

Regulation/Rule/Act/Code	2017 Inspection Findings
Regulation 7: Clothing	Compliant
Regulation 13: Searches	Compliant
Regulation 18: Transfer of Residents	Compliant
Regulation 21: Privacy	Compliant
Regulation 22: Premises	Non-compliant
Regulation 26: Staffing	Non-compliant
Regulation 27: Maintenance of Records	Non-compliant
Regulation 28: Register of Residents	Compliant
Regulation 29: Operating Policies and Procedures	Compliant
Regulation 31: Complaints Procedures	Compliant
Rules Governing the Use of Seclusion	Non-compliant
Code of Practice Relating to Admission of Children under the Mental Health Act 2001	Non-compliant
Code of Practice for Mental Health Services on Notification of Deaths and Incident Reporting	Compliant
Code of Practice Guidance for Persons Working in Mental Health Services with People with Intellectual Disabilities	Non-compliant
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	Non-compliant

Non-compliant areas on this inspection

Non-compliant (X) areas on this inspection are detailed below. Also shown is whether the service was compliant (✓) or non-compliant (X) in these areas in 2016 and 2015:

Regulation/Rule/Act/Code	2015 Compliance	2016 Compliance	2017 Compliance
Regulation 22: Premises	X	X	X Moderate
Regulation 26: Staffing	X	X	X Moderate
Regulation 27: Maintenance of Records	✓	X	X Moderate
Rules Governing the Use of Seclusion	✓	X	X Moderate
Part 4 of the Mental Health Act 2001: Consent to Treatment	✓	✓	X Moderate
Code of Practice on the Use of Physical Restraint in Approved Centres	X	✓	X High
Code of Practice Relating to Admission of Children under the Mental Health Act 2001	X	X	X Moderate
Code of Practice Guidance for Persons working in Mental Health Services with People with Intellectual Disabilities	Not Applicable	X	X Moderate
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	X	X	X High

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.

Areas of compliance rated Excellent on this inspection

No areas of compliance were rated excellent on this inspection.

An Coillín

ID Number: AC0060

2017 Approved Centre Inspection Report (Mental Health Act 2001)

An Coillín
Westport Road
Castlebar
Co. Mayo

Approved Centre Type:
Continuing Mental Health Care/Long Stay

Most Recent Registration Date:
17 May 2016

Conditions Attached:
None

Registered Proprietor:
HSE

Registered Proprietor Nominee:
Mr Steve Jackson, General Manager,
CHO 2 - Mental Health Services.

Inspection Team:
Dr David McGuinness, Lead Inspector
Noeleen Byrne
Martin McMenamín
Dr Susan Finnerty

Inspection Date:
19 – 22 September 2017

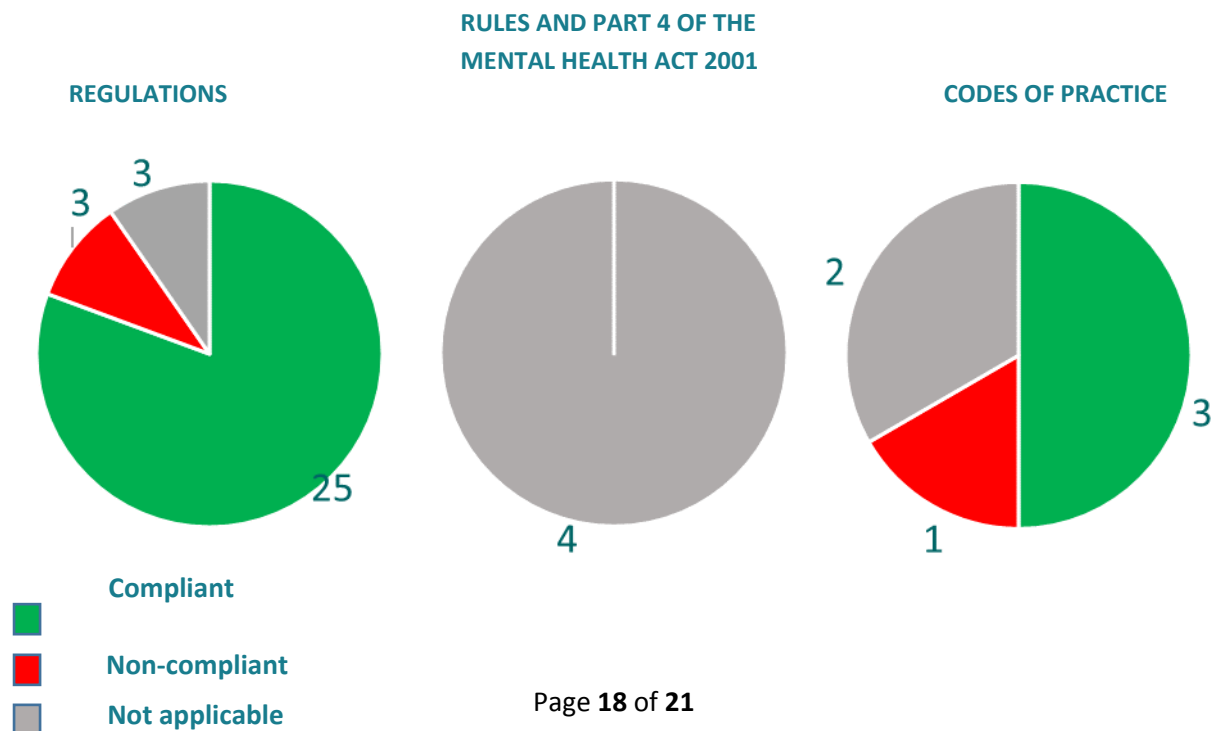
Previous Inspection Date:
4-7 October 2016

Inspection Type:
Unannounced Annual Inspection

The Inspector of Mental Health Services:
Dr Susan Finnerty MCRN009711

Date of Publication:
22 March 2018

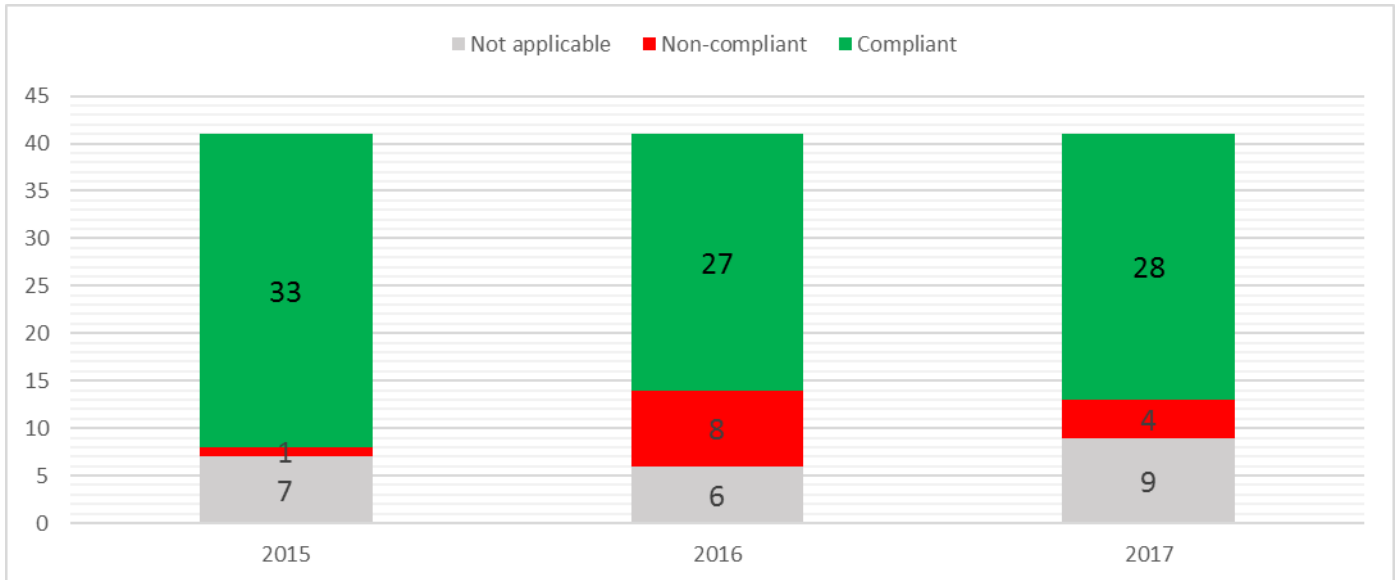
COMPLIANCE RATINGS 2017



RATINGS SUMMARY 2015 – 2017

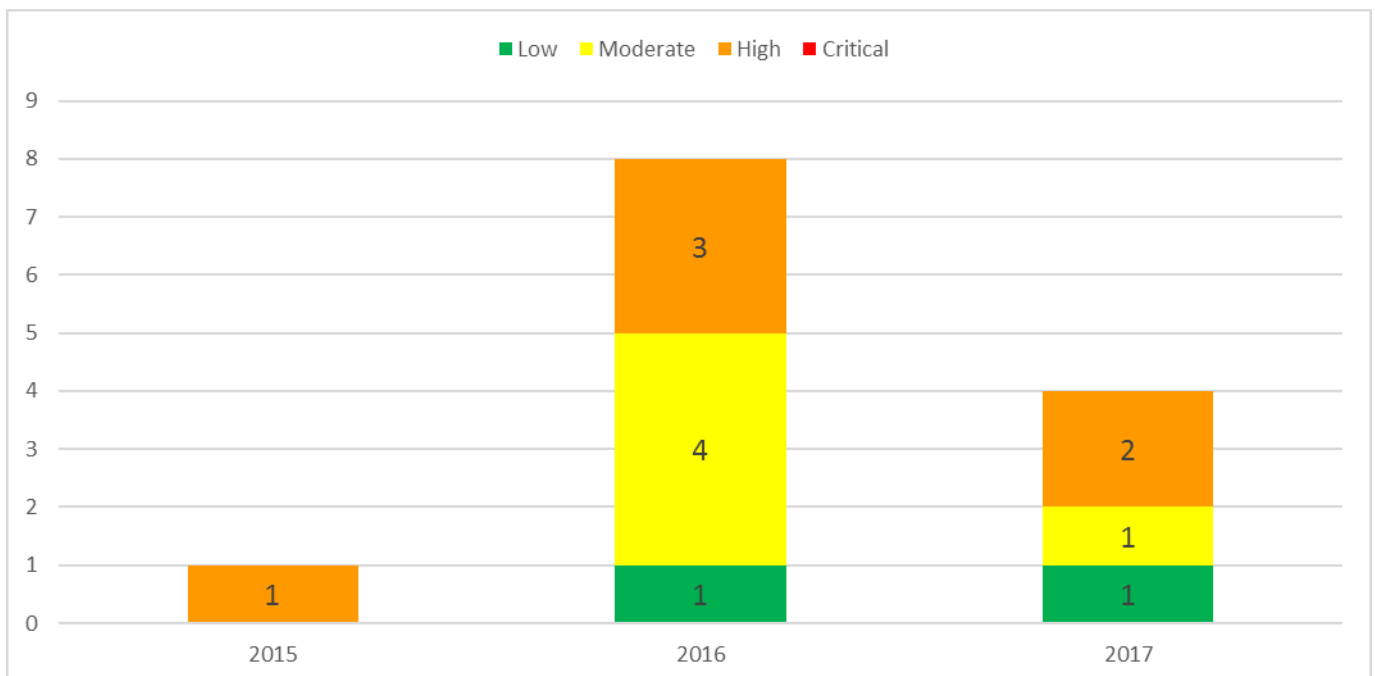
Compliance ratings across all 41 areas of inspection are summarised in the chart below.

Chart 1 – Comparison of overall compliance ratings 2015 – 2017



Where non-compliance is determined, the risk level of the non-compliance will be assessed. Risk ratings across all non-compliant areas are summarised in the chart below.

Chart 2 – Comparison of overall risk ratings 2015 – 2017



Conditions to registration

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

Non-compliant areas from 2016 inspection

The previous inspection of the approved centre on 4 – 7 October 2016 identified the following areas that were non-compliant. The approved centre was requested to provide Corrective and Preventative Actions (CAPAs) for areas of non-compliance and these were published with the 2016 inspection report.

Regulation/Rule/Act/Code	2017 Inspection Findings
Regulation 15: Individual Care Plan	Compliant
Regulation 21: Privacy	Non-Compliant
Regulation 22: Premises	Non-Compliant
Regulation 26: Staffing	Non-Compliant
Code of Practice on the Use of Physical Restraint in Approved Centres	Compliant
Code of Practice for Mental Health Services on Notification of Deaths and Incident Reporting	Compliant
Code of Practice Guidance for Persons working in in Mental Health Services with People with Intellectual Disabilities	Compliant
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	Non-Compliant

Non-compliant areas on this inspection

Non-compliant (X) areas on this inspection are detailed below. Also shown is whether the service was compliant (✓) or non-compliant (X) in these areas in 2016 and 2015:

Regulation/Rule/Act/Code	2015 Compliance	2016 Compliance	2017 Compliance
Regulation 21: Privacy	✓	X	X High
Regulation 22: Premises	X	X	X High
Regulation 26: Staffing	✓	X	X Moderate
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	✓	X	X 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.

Areas of compliance rated Excellent on this inspection

The following areas were rated excellent on this inspection:

Regulation

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 23: Ordering, Prescribing, Storing and Administration of Medicines
Regulation 29: Operating Policies and Procedures
Regulation 31: Complaints Procedures