# Haywood Lodge

**ID Number:** AC0087

## 2019 Approved Centre Focused Inspection Report (Mental Health Act 2001)

<table>
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<th>Haywood Lodge</th>
<th>Approved Centre Type:</th>
<th>Most Recent Registration Date:</th>
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<tr>
<td>Clonmel</td>
<td>Continuing Mental Health Care/Long Stay Psychiatry of Later Life Mental Health Rehabilitation</td>
<td>23 April 2018</td>
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<tr>
<td>Co. Tipperary</td>
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<tr>
<th>Conditions Attached:</th>
<th>Registered Proprietor:</th>
<th>Registered Proprietor Nominee:</th>
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<tr>
<td>None</td>
<td>HSE</td>
<td>Mr David Heffernan, General Manager, CHO5 Mental Health Services</td>
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<tr>
<th>Inspection Team:</th>
<th>Inspection Date:</th>
<th>Previous Inspection Date:</th>
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<tr>
<td>Dr Susan Finnerty MCRN009711</td>
<td>6 March 2019</td>
<td>24 – 27 July 2018 2 – 3 August 2018</td>
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<td>Focused Inspection</td>
<td>Thursday 1 August 2019</td>
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Inspector of Mental Health Services

Summary

During the annual inspection of Haywood Lodge on 24 - 27 July and 2 - 3 August 2018, the approved centre was found non-compliant with Regulation 16: Therapeutic Services and Programmes and this non-compliance was risk rated as critical.

Following an immediate action notice issued to the registered proprietor, a focused inspection took place to assess whether the approved centre was compliant with Regulation 16 Therapeutic Services and Programmes.

During this inspection the approved centre was found to be compliant with this regulation.
2.0 Background

2.1 Reason for focused inspection

The Inspector found that during an annual inspection of Haywood Lodge on the 24 – 27 July and 2 - 3 August 2018 the therapeutic services and programmes provided by the approved centre did not meet the assessed needs of the residents, as documented in their individual care plans. There was no list of therapeutic services and programmes provided by the approved centre as no therapeutic programme was available to residents at the time of the inspection. The availability of occupational therapy and social work personnel was limited. A community occupational therapist only provided urgent seating assessments. The focus of the social work department was predominantly on assessment. This non-compliance with Regulation 16 Therapeutic Services and Programmes was rated as critical.

Following the inspection of 24 – 27 July and 2 - 3 August 2018, the Director of Standards and Quality Assurance was alerted by the Inspector to serious concerns about critical risk ratings of non-compliances with Regulation 16: Therapeutic Services and Programmes. An immediate Action Notice was issued and the service provided a plan and further information to address the Commission’s concerns. While the Commission were satisfied that appropriate steps were being taken to address concerns, it was agreed that a focused inspection should take place to ensure the plan was being implemented appropriately.

2.2 Focus of inspection

The focus of this inspection was on Regulation 16: Therapeutic Services and Programmes. Specifically, the Inspector assessed resident access to therapeutic services and programmes.
3.0 Overview of the Approved Centre

3.1 Description of approved centre

Haywood Lodge was a single-storey building situated off the Haywood Road in Clonmel, County Tipperary. The 40 bed in-patient unit was located within close proximity to South Tipperary General Hospital. The approved centre consisted of two units, which catered for Psychiatry of Later Life (East House), and Rehabilitation and Recovery (West House). Each Unit consisted of 20 spacious, en suite bedrooms, each facilitating direct access to a large enclosed garden. The units had a communal dining room, sitting room and quiet room. This was in conjunction with a shared activities, laundry and beauty therapy room, oratory and occupational kitchen.

3.2 Conditions to registration

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

Regulation 16: Therapeutic Services and Programmes

(1) The registered proprietor shall ensure that each resident has access to an appropriate range of therapeutic services and programmes in accordance with his or her individual care plan.

(2) The registered proprietor shall ensure that programmes and services provided shall be directed towards restoring and maintaining optimal levels of physical and psychosocial functioning of a resident.

During this inspection, the Inspector found that the approved centre now provided therapeutic services and programmes for all residents. Each resident’s needs had been assessed and a comprehensive individual therapy plan was in place for each resident. There was an activities nurse for both units who provided a wide range of both recreational and therapeutic programmes for the residents. Therapeutic services and programmes provided included chair yoga, Sonas, relaxation, reminiscence therapy and cookery. There was also individual one to one therapy.

An occupational therapist was in place, shared between East House and West House. A music therapist had provided a ten week programme and there were plans to continue this arrangement. An artist attended two hours a week. A psychologist provided support and behavioural therapy assessments and recommends intervention strategies for residents as clinically indicated. Two days training in Dementia Care had taken place for staff and was ongoing.

The approved centre was compliant with this regulation.
The principal functions of the Mental Health Commission are to promote, encourage and foster the establishment and maintenance of high standards and good practices in the delivery of mental health services and to take all reasonable steps to protect the interests of persons detained in approved centres.

The Commission strives to ensure its principal legislative functions are achieved through the registration and inspection of approved centres. The process for determination of the compliance level of approved centres against the statutory regulations, rules, Mental Health Act 2001 and codes of practice shall be transparent and standardised.

Section 51(1)(a) of the Mental Health Act 2001 (the 2001 Act) states that the principal function of the Inspector shall be to “visit and inspect every approved centre at least once a year in which the commencement of this section falls and to visit and inspect any other premises where mental health services are being provided as he or she thinks appropriate”.

Section 52 of the 2001 Act states that, when making an inspection under section 51, the Inspector shall

a) See every resident (within the meaning of Part 5) whom he or she has been requested to examine by the resident himself or herself or by any other person.

b) See every patient the propriety of whose detention he or she has reason to doubt.

c) Ascertain whether or not due regard is being had, in the carrying on of an approved centre or other premises where mental health services are being provided, to this Act and the provisions made thereunder.

d) Ascertain whether any regulations made under section 66, any rules made under section 59 and 60 and the provision of Part 4 are being complied with.

On a focused inspection, the Inspector does not assess all regulations, rules, code of practice, and Part 4 of the 2001 Act. The focus of the inspection will be on specific legislative requirements, or parts of legislative requirements where it is determined that there may be a risk to the safety, health and well-being of residents and/or staff members.

Following the focused inspection of an approved centre, the Inspector prepares a report on the findings of the inspection. A draft of the inspection report, including provisional compliance ratings and risk ratings, is provided to the registered proprietor of the approved centre. Areas of inspection are deemed to be either compliant or non-compliant and where non-compliant, risk is rated as low, moderate, high or critical.

In circumstances where the registered proprietor fails to comply with the requirements of the 2001 Act, Mental Health Act 2001 (Approved Centres) Regulations 2006 and Rules made under the 2001 Act, the Commission has the authority to initiate escalating enforcement actions up to, and including, removal of an approved centre from the register and the prosecution of the registered proprietor.