

# Mental Health Services 2012

## Inspection of Medium Support Community Residences

<b>EXECUTIVE CATCHMENT AREA/INTEGRATED SERVICE AREA</b>	Dublin North Central, North West Dublin
<b>HSE AREA</b>	Dublin North East
<b>MENTAL HEALTH SERVICE</b>	Dublin North Central
<b>RESIDENCE</b>	87 St. Lawrence Road, Clontarf
<b>TOTAL NUMBER OF BEDS</b>	7
<b>TOTAL NUMBER OF RESIDENTS</b>	7
<b>NUMBER OF RESPITE BEDS (IF APPLICABLE)</b>	0
<b>TEAM RESPONSIBLE</b>	Rehabilitation and sector teams
<b>TYPE OF INSPECTION</b>	Unannounced
<b>DATE OF INSPECTION</b>	4 September 2012

### **Summary**

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- Staff of the community residence were proactive and positive
- Routine maintenance of the residence should be carried out, when necessary, in a timely manner.
- Prescriptions should be rewritten in accordance with Medical Council guidelines.

## Description

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### Service description

Number 87 was located in suburban Dublin on a charming, tree-lined road in Clontarf, that had once been a private dwelling thought to have been built in 1890. The premises were extensively renovated in 2008. The residence was a large detached, two-storey house and was opened for its present purpose in 1992. The residence consisted of six single bedrooms and one twin-bed room. Adjacent to the premises was Bradóg Court, a purpose built Medium/Low support Unit housing 14 residents in eight self-contained flats. These premises were not inspected.

The philosophy of care was based on the concept of enhancing personal autonomy and enabling individuals who use the service to live as independently as possible. The aim of the residence was to maintain an atmosphere that was warm, welcoming and safe, while treating each individual with both respect and dignity while recognising and encouraging each person to fulfil their potential.

### Profile of residents

There were three female residents and four male residents living in the residence at the time of inspection. Age range of residents was from 25 to 50 years of age. Average length of stay was from between two to three years. No resident was a Ward of Court and all were of voluntary status. All residents were fully mobile and self-caring.

### Quality initiatives and improvements in 2011/2012

- Weekly breakfast mornings had been introduced which involved cooking groups in order to get residents together at the start of the morning.
- A security gate had been installed to prevent intruders from trespassing.
- Barbeque evenings had been introduced.
- Birthdays were celebrated in the community residence.

## Care standards

### Individual care and treatment plan

Multidisciplinary care plans were used by the service and these were recovery orientated. There was evidence of involvement of the residents and the resident co-signed their care plan. Each resident's care plan was reviewed every four to six months and sooner if necessary. The Rehabilitation team met weekly on Tuesdays in St. Vincent's Hospital, Fairview. An annual case conference occurred for each resident and this and regular team meetings involved family members. Risk assessment was used for all residents. Staff presented as being proactive. All residents had a general practitioner (GP) by whom all physical health reviews were carried out. Residents attended their GPs approximately every three months. Residents attended the GPs surgery.

### Therapeutic services and programmes provided to address the needs of service users

One resident attended Emmet House to study for a FETAC accredited computer course. Three residents attended Plunkett College in Swords Road on Friday mornings. Two residents attended the National Learning Network, Roslyn Park College, Dublin.

### How are residents facilitated in being actively involved in their own community, based on individual needs

One resident undertook voluntary work in the local St. Vincent de Paul shop. One resident was involved in the local church choir. Residents were frequently visited by family particularly during weekends and went out for coffee, lunch or in town to go shopping or attend the cinema. It was also reported that the residents got on well together and frequently socialised together. A number of buses stopped right outside the residence so travel to and from the residence was easy.

### Facilities

It was reported that the programme of maintenance was generally unsatisfactory, particularly for the adjacent Bradóg Apartments which was reported to be in need of repainting. It was reported that for this community residence, maintenance was more reactive than proactive. It was reported that the lock on the new security gate, recently installed was broken, and despite correspondence to maintenance for its repair was still in need of attention on the day of inspection.

**Staffing levels**

STAFF DISCIPLINE	DAY WTE	NIGHT WTE
CNM2	1 (shared)	0
RPN	1 (shared)	0
Social support worker	1	1 (Sleep over)
Household staff	1 (shared)	0

*Clinical Nurse Manager (CNM), Registered Psychiatric Nurse (RPN), Non Consultant Hospital Doctor (NCHD).*

**Team input**

DISCIPLINE	NUMBER	NUMBER OF SESSIONS
Consultant psychiatrist	1	1 per week
NCHD	0	-
Occupational therapist	1	1 per week
Social worker	1	1 per week
Clinical psychologist	0	-

## **Medication**

The prescriber of medication for residents was the consultant psychiatrist. Prescriptions were typed on General Medical Services forms by the resident's general practitioner (GP) and a combination of trade and generic names were used for each medicine prescribed. All residents were prescribed an antipsychotic medication. The prescription sheet for one resident was out of date, having been written in January 2012.

**MEDICATION**

<b>NUMBER OF PRESCRIPTIONS:</b>	<b>7</b>	<b>%</b>
<b>Number on benzodiazepines</b>	<b>2</b>	<b>29 %</b>
<b>Number on more than one benzodiazepine</b>	<b>0</b>	<b>0</b>
<b>Number on PRN benzodiazepines</b>	<b>0</b>	<b>0</b>
<b>Number on benzodiazepine hypnotic</b>	<b>0</b>	<b>0</b>
<b>Number on Non benzodiazepine hypnotic</b>	<b>2</b>	<b>29%</b>
<b>Number on PRN hypnotics</b>	<b>0</b>	<b>0</b>
<b>Number on antipsychotic medication</b>	<b>7</b>	<b>100%</b>
<b>Number on high dose antipsychotic medication</b>	<b>0</b>	<b>0</b>
<b>Number on more than one antipsychotic medication</b>	<b>4</b>	<b>57%</b>
<b>Number on PRN antipsychotic medication</b>	<b>0</b>	<b>0</b>
<b>Number on Depot medication</b>	<b>2</b>	<b>29%</b>
<b>Number on antidepressant medication</b>	<b>2</b>	<b>29%</b>
<b>Number on more than one antidepressant</b>	<b>0</b>	<b>0</b>
<b>Number on antiepileptic medication</b>	<b>3</b>	<b>43%</b>
<b>Number on lithium</b>	<b>1</b>	<b>14%</b>

**Tenancy rights**

The HSE owned the building and residents paid a weekly rent of €65 directly to the HSE. The complaints procedure was highlighted and a record of complaints was maintained but no complaint had been made. Community meetings were held regularly.

**Financial arrangements**

The residence had a financial policy. Staff only handled small amounts of petty cash. A debit/credit book was maintained which was signed and co-signed by staff of the residence. Each resident had a small account maintained for petty cash and receipts were maintained. All residents had their own personal bank account.

### **Service user interviews**

No resident requested to speak to the inspector. Residents chatted informally to the inspector during the course of the inspection. Residents had good access to information and to advocacy services.

### **Conclusion**

No. 87 St. Lawrence Road, was a medium support community residence that catered for seven residents. Adjacent to the building was Bradóg Court, a purpose built Medium/Low support Unit housing 14 residents in eight self-contained flats. These premises were not inspected. All residents partook in a programme of therapeutic activities throughout each week to address their specific needs. Public transport was immediately accessible to residents. Most residents were visited by family members on a regular basis and the residents were close-knit in that they got on with, and socialised together a lot. The quality of the documentation in the clinical files examined by the inspector was excellent and staff presented as being dynamic and forward thinking.

### **Recommendations and areas for development**

- 1. Routine maintenance of the residence should be carried out, when necessary, in a timely manner.*
- 2. Prescriptions should be rewritten in accordance with Medical Council guidelines.*