

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. Elm Mount Unit
http://www.mhcirl.ie/File/2016IRs/ElmMountUnitStVin_ir2016.pdf
2. St Aloysius Ward, Mater Misericordiae University Hospital
http://www.mhcirl.ie/File/2016IRs/StAloyMater_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. Elm Mount Unit

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 20 Provision of Information to Residents
Regulation 22 Premises
Regulation 24 Health and Safety
Regulation 29 Operating Policies and Procedures

Outstanding issues from previous inspection

The previous inspection of the approved centre on 13 and 14 August 2015 identified the following areas that were not compliant:

Regulation/Rule/Act/Code	Inspection Findings 2016
Regulation 21 Privacy	Non-compliant
Regulation 23 Ordering, Prescribing, Storing and Administration of Medicines	Compliant
Regulation 26 Staffing	Non-compliant
Regulation 30 Mental Health Tribunals	Compliant
Regulation 32 Risk Management Procedures	Non-compliant
Code of Practice Relating to Admission of Children Under the Mental Health Act 2001	Non-compliant
Code of Practice on the Use of Physical Restraint in Approved Centres	Non-compliant

The approved centre was required to submit details of Corrective and Preventative Actions (CAPAs) to address areas of non-compliance as a result of the inspection of 2015. In all, there were seven areas of non-compliance requiring CAPAs. The inspection team assessed the actions taken by the approved centre to implement the CAPAs submitted by the service following the 2015 report.

CAPAs in relation to Regulation 23 Ordering, Prescribing, Storing and Administration of Medicines and Regulation 30 Mental Health Tribunals had been implemented.

The implementation of CAPAs in relation to Regulation 21 Privacy, Regulation 26 Staffing, Regulation 32 Risk Management Procedures, Code of Practice on the Use of Physical Restraint and Code of Practice on the Admission of Children had not been completed at the time of inspection, despite the service reporting that these CAPAs had been completed. The timeframe for completion had been exceeded.

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 7 Clothing	Low
Regulation 13 Searches	Low
Regulation 15 Individual Care Plan	Low

Regulation 21 Privacy	Low
Regulation 26 Staffing	Moderate
Regulation 31 Complaints Procedures	Moderate
Regulation 32 Risk Management Procedures	Moderate
Code of Practice on the Use of Physical Restraint in Approved Centres	Moderate
Code of Practice Relating to Admission of Children Under the Mental Health Act 2001	High
Code of Practice on 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 full report.

2. St Aloysius Ward, Mater Misericordiae 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 7 Clothing
Regulation 24 Health & Safety

Outstanding issues from previous inspection

The previous inspection of the approved centre on 21, 22 and 23 of September 2015 identified the following areas that were not compliant:

Regulation/Rule/Act/Code	Inspection Findings 2016
Regulation 9 Recreational Activities	Non-compliant
Regulation 16 Therapeutic Services and Programmes	Non-compliant
Regulation 23 Ordering, Prescribing, Storage 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

Corrective and Preventative Action Plans (CAPAs) had been provided to the Mental Health Commission for non-compliance with regulations identified in the 2015 inspection report. The Commission monitors the implementation of CAPAs on an ongoing basis. The latest CAPA review was completed on 6 January 2016. Twelve updates were required from the registered proprietor by 12 April 2016, but had not been provided by the due date. These updates and supporting documentation were provided during the inspection and are included in the findings under relevant regulations in this report.

Non-compliant areas on this inspection

Regulation/Rule/Act/Code	Risk Rating
Regulation 6 Food Safety	Moderate
Regulation 9 Recreational Activities	High
Regulation 13 Searches	Moderate
Regulation 11 Visits	Moderate
Regulation 15 Individual Care Plan	High
Regulation 16 Therapeutic Services and Programmes	Critical
Regulation 20 Provision of Information to Residents	Moderate
Regulation 21 Privacy	Moderate
Regulation 22 Premises	Moderate
Regulation 23 Ordering, Prescribing, Storing and Administration	High
Regulation 26 Staffing	High
Regulation 27 Maintenance of Records	Moderate
Regulation 29 Operating Policies and Procedures	Low
Regulation 32 Risk Management Procedures	Moderate
Rules Governing the Use of Seclusion	Low
Code of Practice on Notification of Deaths and Incident Reporting	Low
Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre	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 full report.