

Mental Health Services 2010

Inspection of 24-Hour Community Staffed Residences

EXECUTIVE CATCHMENT AREA	Kerry, West Cork, South Lee
HSE AREA	South
CATCHMENT AREA	Kerry
MENTAL HEALTH SERVICE INSPECTED	Cherryfield House
RESIDENCE INSPECTED	Cherryfield House
TOTAL NUMBER OF BEDS	16
TOTAL NUMBER OF RESIDENTS	15
NUMBER OF RESPITE BEDS (IF APPLICABLE)	1
TEAM RESPONSIBLE	Rehabilitation
DATE OF INSPECTION	23 June 2010

Description

Service description

Cherryfield House was an old, large cream-painted building in the grounds of St. Colomanus's Hospital. The interior was an unhomely, shabby, hospital-type setting. The residence was due to close down and the residents were due to move into a new architect-designed, purpose-built and eco-friendly residence just outside the entrance to St. Finan's Hospital. This move was due to occur on 1 July 2010. Staff expressed concern that, although the residents had been inducted to the new residence, the final papers had not yet been signed. Staff were concerned that the proposed date for moving to the new residence might be delayed. The bathrooms and toilet areas of the residence were clean as was the entire residence. It was subsequently discovered while on an unannounced reinspection of St. Finan's Hospital, adjacent to the new premises, on 14 December 2010, that the planned move of residents into the new facility had not occurred.

Profile of residents

The age profile of residents was from 24 years to 80. The majority of residents were in their 50s. Many of the latter had been transferred from St. Finan's Hospital during the mid to late 1990s as a result of ward closures. There were 11 female and five male residents, one of whom was a respite patient. Diagnoses ranged from schizophrenia and bipolar affective disorder to people with intellectual disability and mental illness.

Quality initiatives and improvements in the last year

- The residence was due to close shortly.
- The residents were about to move to a new architect-designed, purpose-built and eco-friendly residence.
- Multidisciplinary team care plan reviews occurred every six months for all residents.

Care standards (based on the Mental Health Commission Quality Framework 2007 and 2008 Inspection self-assessments)

Individual care and treatment plan

Each resident had a multidisciplinary care and treatment plan. Residents signed this care plan. The consultant psychiatrist called to the residence once a week. A multidisciplinary team review occurred weekly and it was reported that the social worker and psychologist attended this meeting. Physical health reviews were carried out by the general practitioner (GP) and there was evidence in the clinical file that these were being carried out six-monthly. All residents had their own GP. GP appointments were kept in the diary and staff were aware of appointments that were due. A number of residents had recently attended Breast check appointments. Psychiatric reviews were carried out on a six-monthly basis. All residents were under the care of the Rehabilitation team. A risk assessment was used for all residents. Staff presented as being warm, caring and proactive in terms of the needs of residents.

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

Nine residents attended Lime Grove which provided therapeutic services and programmes such as computer courses, educational morning, social outings, aerobics, swimming and walking activities. Two residents worked, one was in supportive employment, three attended Coolgrane Training Centre and two were on work placement.

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

The residence was situated on the edge of the town of Killarney. It was a five to ten minute walk to the town centre. There was a nearby public bus stop and the train station was relatively nearby. All residents went out unaccompanied by staff. One or two more vulnerable residents were paired with willing fellow residents to ensure their personal safety.

Do residents receive care and treatment in settings that are safe, well maintained and that respect right to dignity and privacy

The residence was safe but was drab in decor. Twin rooms had no privacy curtains. There was evidence that the fire officer came once a year to review fire safety procedures. The fire extinguishers had been last checked in August 2009. There was access to large parkland type grounds.

Staffing levels (full time in residence)

STAFF DISCIPLINE	DAY WTE	NIGHT WTE
Nursing	1 CNM2 + 1 Staff Nurse	2 Staff Nurses
Housekeeping	1	0

Team input (sessional)

DISCIPLINE	NUMBER OF SESSIONS
Consultant psychiatrist	1
Non Consultant Hospital Doctor (NCHD)	1
Occupational therapist	Sessional (once per week)
Social worker	As required
Clinical psychologist	As required

Team Input

Multidisciplinary team meetings occur weekly on the premises. All members attended. There was no occupational therapist on the Rehabilitation team.

Medication

Medications were reviewed at each resident's team review and more regularly, as required. One resident was receiving as required medication (PRN). There was evidence that this was being used as per clinical indications in the resident's clinical file. The GP transcribed the residents' prescription sheets to his prescription pad and these were sent to the local pharmacy. These, in turn, were dispensed and collected by a registered psychiatric nurse to the residence. Four residents were in charge of administering their own medication. A number of residents received depot medications and a number received Clozaril.

Tenancy rights

The Health Service Executive (HSE) owned the building. Residents paid €100 per week rent and €3 towards a weekly social fund. There were strict house rules regarding smoking and take away foods were limited in the context of monitoring healthy eating. The complaints procedure was displayed in a prominent area. It was reported that no complaints had been received. It was reported that community meetings involving staff and residents had been recently set up.

Financial arrangements

All residents had their own bank or post office account. The financial arrangements were examined and the Inspectorate was satisfied with the evident high standard. Each resident had their own booklet for petty cash transactions. Nurses did not handle large sums of money. The resident and two registered nurses signed the petty cash transactions in each of the resident's booklets. Six residents handled their own financial transactions without nurse assistance. There was no financial policy to back up the financial arrangements in place.

Leisure/recreational opportunities provided

All residents went to town for coffee, cinema and shopping in their free time. Many spent some time on leave with their families. There were televisions and a radio in the residence and adequate sitting rooms and quiet areas. All residents were relatively independent and were occupied throughout the day.

Service user interviews

One resident was greeted by the inspector. They were looking forward to moving to the new residence. They had seen it during the recent induction day. They were happy with the present residence, said the food was good and was generally happy with their care and treatment.

Conclusion

Cherryfield House was in the final stages of closing. The residents were about to move to a brand new architect-designed, purpose-built, eco-friendly residence just outside the entrance to St. Finan's Hospital. The residents had been inducted to the new residence and the move had been scheduled for 1 July 2010.

It was noted by the Inspectorate, and confirmed by staff of the adjacent approved centre on an unannounced re-inspection of that approved centre on 14 December 2010, that the residents of Cherryfield House had, at that date, not moved into the new residence.

Recommendations and areas for development

1. The move to the new purpose-built residence should take place immediately.
2. An occupational therapist should be appointed to the Rehabilitation team.
3. The residence should have a financial policy.