

Statement of Purpose

PRAXIS CARE Ardee 'The Avenue'

The Avenue, Dawsons Demense, Tierney St., Ardee, Co. Louth



Registration Number 0032360

Date: 10th October 2023

Expiry Date of Registration: 02 April 2024

Revision Number: 5

<p>Registered Provider: (as per Certificate of Registration)</p>	<p>Praxis Care, Unit 18, Ardee Business Park, Hale St, Ardee, Co. Louth Telephone: 041-6871904 The Registered Provider is Praxis Care.</p>
<p>Person in Charge: (as per Certificate of Registration)</p>	<p>Aaron McQuaid Mobile:085 8820944 Email: aarommcquaid@praxiscare.ie</p>
<p>Persons participating in Management: (as per Certificate of Registration)</p>	<p>Head of Operations Noeleen Ryan Phone: 085 8705193 Email: noeleenryan@praxiscare.ie</p>

Services and Facilities in the Designated Centre

Aims and objectives of the designated centre:

The service will provide appropriate quality care and support to adults aged 18 years or older with an Intellectual Disability/Autism or Mental Illness and who are assessed as requiring this input to enable them to live as independently as possible in his/her own community.

The specific care and support needs that the designated centre is intended to meet:

Praxis Care, The Avenue provides a full range of care and support needs for a maximum of 2 residents aged 18 years or older with an intellectual disability/Autism.

The service endeavours to meet the following needs. (Please note that the following is not an exhaustive list)

Housing Support

- Assistance acquiring essential household items
- Locating essential local services
- Paying bills
- Maintaining the property
- Safety issues
- Signposting to specialist services
- Budgeting
- Good neighbour relations / dealing with disputes
- Essential daily living tasks
- Emotional support
- Supporting people to comply with treatment
- Where appropriate, notifying agencies of concerns about a service user

Care Tasks

- Administering medications
- Health care
- Specific rehabilitation tasks
- Intensive / therapeutic behaviour management
- Supervision of people at night - time
- Personal care

Facilities which are to be provided

- The Avenue is a residential centre, providing care and support for up to two service users aged 18 years old or older with an intellectual disability/ Autism who may have associated mental illness.

Praxis Care The Avenue will provide housing, care and support to residents with Intellectual Disability/ Autism and associated mental health diagnosis, who will live there on a permanent basis. The house is a detached dormer bungalow on 0.25 acres, located in a quiet cul-de-sac adjacent to the river Dee.

As you enter the front door of the house, there is a lounge area to the right and a staff room to the left. Further down the hallway there is a visitors WC to the left and the kitchen area to the right. The utility room is accessible from the kitchen area. A staircase allows access to the upper floor of the premises. On entering the landing of the premises there is a bathroom straight ahead. One en-suite bedroom to the left and two bedrooms to the right.

- The Avenue has a team of team leader & support workers. Staff are available 24 hours per day, 7 days a week. The Person in Charge is available during administration hours 9am-5pm.
- There is an on-call system in place. The on-call rota will be found in the Rota Folder. Management on-call systems are in place for annual leave, sick leave or days off. There is also an Head of Operations and Director on-call system at all times. Details are again found in the Rota Folder.
- Further information on the service can be found in the Residents Handbook.
- Praxis Care is committed to the ongoing training and professional development of all staff. There will be regularly scheduled supervision of all staff members in order to facilitate high standards of care for all service users within the service

Services which are to be provided

Praxis Care works with residents, and his/her friends, relatives or representatives (if appropriate) to draw up a written plan of the support the organisation will aim to provide. The plan sets out the resident's needs, risks that need management; support/care provided and desired outcomes. This is reviewed as required after admission and at least annually thereafter to ensure all needs are assessed and reviewed.

Each resident is provided with a copy of his/her assessment and plan and is encouraged to participate as fully as possible in the support planning process. It is a priority that all residents are supported and are able to access this information in a user friendly format and in a language that is age appropriate to aid them in their understanding.

Prior to the commencement of a service at Praxis Care, The Avenue, a risk assessment is carried out with all residents and agreed upon by MDT. This risk assessment is reviewed on an individual level on a regular basis but particularly when there have been significant changes to the individual's life.

There is a formal review held annually or more frequently following admission as required. An emergency review can be convened at any time. From time to time further assessments of the service user's needs are required to ensure that the support provided by the organisation is relevant to helping the service user achieve his/her full potential.

All Service Users are empowered to enjoy everyday living, irrespective of the complexity of their needs. This is evidence based through the setting of person centred outcomes which are measured on a regular basis to evidence achievement. The staffing of the centre reflects the care and support needs of the the service users which are outlined in their personal plans.

Admissions to the Designated Centre

Registered Bed Numbers:	The maximum number of persons that may be accommodated at the designated centre is 2.
Age range of residents to be accommodated:	The Avenue offers accommodation to residents aged 18 years or older.
Gender of residents to be accommodated:	The Avenue is an Adult Residential Centre which offers accommodation to males and females.

Criteria used for admissions:

Referral Process

Referrals for admissions will only be accepted from members of **Disability Services (H.S.E.)** multi-disciplinary team. Referral agents from outside the geographical area should in the first instance contact their local Health Service Executive office.

- Noeleen Ryan Head of Operations, Praxis Care
085 8705193
- Aaron McQuaid, Person in Charge, The Avenue, Praxis Care, Ardee, Co. Louth.
085 8820944

Referrals should meet- certain criteria below

- * An application form must be fully completed and include information on risk history and finance
- * An applicant must be aged 18 years or older at time of admission
- * The applicant and carer (if so desired) will be invited to visit the service and discuss his/her needs with Praxis Care staff.
- * A joint risk assessment conducted by the relevant parties must indicate compatibility with current residents.
- * Praxis Care must ensure that the risk assessment protects all residents from abuse.
- * Praxis Care must be satisfied that the appropriate staffing and resources are available to meet the needs of the individual.
- * Praxis Care must be satisfied that there is adequate multi-disciplinary input to support the individual's needs.
- * The Person in Charge must be satisfied with the training and educational plan for the individual.
- * The Person in charge must be satisfied that the designated centre can meet all the needs of the individual, such as behavioural or communication for example.
- * An Admission Panel will meet to consider all applications. The referral agent or any other relevant party will be invited to discuss the application and provide further information/clarification as appropriate.

- * The Registered Provider, Praxis Care will require a full health assessment and immunisation records for the individual.
- * Praxis Care will complete a comprehensive risk assessment involving the relevant multidisciplinary personnel. Praxis Care has to be satisfied that all residents will be protected from abuse and compatible to reside together within the designated centre.

- * The Admission Panel's decision will be communicated to the referral agent as soon as possible and will always be followed up with a written explanation of the decision.
- * An Appeals Procedure is in place if a prospective applicant is not satisfied with the outcome from the admissions panel.
- * Prospective residents will be provided with as much information as possible about the service to help him/her make a decision about whether or not he/she wants to receive care and/or support. Praxis Care offers the opportunity for a prospective resident to visit the accommodation/service and meet and talk with residents and staff. The organisation is happy for a prospective resident to involve his/her friends/family before making the final decision about placement or commencement of service.
- * If it is felt that the accommodation or service is not suitable for a particular person, advice will be given on how to look for help elsewhere. This will only happen after full and inclusive discussions with all relevant parties.
- * The person in charge must be satisfied that all relevant documentation is provided to fully ensure that the designated centre can meet the needs of the individual, for example psychological assessment, psychiatric assessments and financial agreements.
- * Requests for emergency placements cannot be facilitated as a thorough risk assessment and support plan needs to be put in place prior to admission to the service

Management and Staffing

Total staffing complement (in full time equivalent)

Person in charge	1 WTE
Team Leader	1 WTE
Support Staff	5 WTE's

Staff are available 24 hours per day, 7 days a week. Staff team consists of support workers and a team leader.

The Person in Charge is available during administration hours 9am-5pm. The person in charge works across two designated centres. Both centres are based in Ardee, within close proximity of each other. There are three team leaders allocated in the other designated centre that the PIC is assigned to, to ensure oversight of same. There is a team leader also assigned to The Avenue to ensure oversight of same.

There is an on-call system in place. The on-call rota will be found in the Rota Folder. Management on-call systems are in place for annual leave, sick leave or days off. There is also an Head of Operations and Director on-call system at all times. Details are again found in the Rota Folder.

Further information on the service can be found in the Residents Handbook.

Organisational structure of the designated centre:

Management Team

CEO:	Carol Breen
Director of Care (Operations):	Amanda Gray
Regional Director of Care:	Rosarie Tynan
PPIM Avenue :	Noeleen Ryan
Person in Charge of The Avenue:	Aaron McQuaid
Complaints Officer:	Linda Lyons
Data Protection Officer:	Vincent Lavery
Designated Safeguarding Officer:	Noeleen Ryan
Champion Safeguarding Officer:	Brian McCready

Resident Wellbeing and Safety

Review and development of residents' personal plans (refer to the requirements of Regulation 5)

Praxis Care works with residents, and his/her friends, relatives or representatives (if appropriate) to draw up a written plan of the support the organisation will aim to provide. The plan sets out the resident's needs, risks that need management; support/care provided and desired outcomes. This is reviewed as required to ensure all needs are assessed and revised as necessary.

Every resident is provided with a copy of his/her assessment and plan and is encouraged to participate as fully as possible in the support planning process. It is a priority that all residents are supported and are able to access this information in a user friendly format and in a language that is age appropriate to aid them in their understanding.

Prior to the commencement of a service at Praxis Care, The Avenue, a risk assessment is carried out with all residents and agreed upon by social workers. This risk assessment is reviewed on an individual level on a regular basis but particularly when there have been significant changes to the individual's life.

There is a formal review held annually or more frequently following admission as required. An emergency review can be convened at any time. From time to time further assessments of the service user's needs are required to ensure that the support provided by the organisation is relevant to helping the service user achieve his/her full potential.

Specific therapeutic techniques used in the designated centre

Service Users are offered a range of therapeutic supports via the HSE and other recognised therapies such as:-

- Physiotherapy
- Occupational Therapy
- Speech and Language
- Dietician
- Chiropodist
- G.P
- Specialist Behavioural Support/Behaviour Consultancy
- Community Psychiatric Care

Service users are supported by Praxis Care staff to attend therapies as required. Praxis Care ensures that service users are supported to attend registered professionals when accessing therapies.

If costs are incurred by residents for any therapeutic supports, these costs are detailed within the residents bills agreements.

Use of Restrictive Practices and Positive Behaviour Supports

Praxis Care aims to provide extra supports as deemed necessary to any resident residing in our centre. Praxis Care staff are trained in approaching behaviours in a positive manner. A positive behaviour support plan will be put in place as deemed necessary with an emphasis on the proactive strategies. Should a resident become physically aggressive or pose a serious risk of injury towards them or others, Praxis Care staff are trained in techniques to manage violent and aggressive behaviour. Any restrictive practice will be recorded in conjoined approval by Multi-Disciplinary teams, the resident and Next of Kin. All restrictive practices are recorded in the resident's restrictive practice register and implementation of same is recorded in the restrictive practice log record. Any restriction will be reviewed at least 6 monthly by the person in charge of the centre with the aim toward reducing and removing the restriction as positive behaviour supports are focused upon.

In order to maintain a safe environment for residents it may sometimes be necessary to take actions that may restrict or affect their rights to liberty and security of person, or their right to a private and family life. In all instances where such an infringement is required the centre will risk assess this, record the incident and report it to the proper authorities. Such restrictions will only be employed to protect residents from serious harm, and only following the unsuccessful use of less restrictive options. The least amount of restriction will be used for the least amount of time.

When this restrictive practice is used it is essential that this information is passed onto HIQA and the statutory key worker for all service users involved.

Respecting residents' privacy and dignity

- All residents have their own bedrooms. Each bedroom is private and no other resident is allowed access to another service user's bedroom.
- Personal care is attended to, in each service users own bedroom/en-suite or in a bathroom.
- Access to the telephone/mail/visitors is permissible to all service users at all times.
- Personal records are maintained for each service user on their daily routines, personal information and reports from external professionals.
- Independence and autonomy is promoted and maintained for all service users at all times.
- Personal belongings are stored as service users wish within their homes in an informed consented manner.
- At the service user monthly meeting, service users are given the opportunity to speak openly about all matters and raise any concerns they may have. Staff will also use these meetings to update the service users on any previous actions or other relevant information. Details of daily activities, menu options etc. are presented to the service user through pictorial menu, activity and welcome boards.
- All information is in a format that is appropriate to the information and communication abilities of each person living in the residential service.

Social activities, hobbies and leisure interests

The Avenue will try to make it possible for service users to live their life as fully as possible. In particular, it will do the following:-

- As part of the moving-in/commencement of service process, potential service users will be encouraged to share as much information as possible about her social, cultural and leisure interests.
- Service users will be helped to continue to enjoy a range of individual and group activities and interests, both inside and outside the accommodation, to carry on with existing hobbies, pursuits and relationships, and to explore new avenues and experiences. In group living settings, all service users are entitled to use the dining room, the communal lounge, and the grounds of the scheme but those who wish, may remain in her own rooms. Service users are encouraged to personalise their rooms with small items of furniture and other possessions, and individual preferences in matters of decoration and furnishings are encouraged.
- In partnership with service users, social and leisure activities will be designed to form the basis of the communal content of the life of the scheme/service. Friendships among service users will be facilitated and it is hoped that service users will enjoy being part of a community, but there is no compulsion on a service user to join in any of the communal social activities.
- With the full and inclusive involvement of service users, local councillors, TD's, representatives of voluntary organisations, students, school children and others will be encouraged to visit schemes/services.
- Recognise that risk-taking is a vital and often enjoyable part of life and of social activity. Some service users will wish to take certain risks despite or even because of his/her disability. The Avenue does not aim to provide a totally risk-free environment, though care will be taken to ensure that service users are not subjected to unnecessary hazards. When a service user wishes to take part in any activity which could involve risk, a thorough risk assessment will be carried out with that individual, involving relatives, friend or representative, if desired and The Avenue will agree and record all agreed outcomes which will appropriately balance the factors involved. Risk assessments will be regularly reviewed, with the participation of all parties.
- For the benefit of all service users and staff, the communal areas of the accommodation are designated as non-smoking. Service users may smoke in designated smoking areas only.
- There may be a charge associated with some social activities and services; where this applies, the details will be made clear to the service user in advance.

Accessing education, training and employment

- All service users in The Avenue will have the opportunity to attend attend day care/ college/ educational programmes as assessed to meet their current needs and apated to suit where necessary.
- All service users are encouraged to take part in activities which promote independence and develop social skills. These are developed in accordance with the service user abilities and interests.
- All Service users will be afforded the opportunity to avail of educational and training opportunities as they so wish.
- All Service users will be afforded the opportunity to avail of supports from Praxis Care staff to source suitable employment as they so wish.

Consultation with, and participation of, residents in the operation of the designated centre

Praxis Care aims to give service users opportunities to participate in all aspects of life in the accommodation/service. In particular, service users are regularly consulted both individually and corporately about the way the accommodation/service is run. The organisations objective is always to make the process of managing and running the accommodation/service as transparent as possible, and to ensure that the accommodation/service has an open, positive and inclusive atmosphere. Regular service users meetings are held and input is sought on matters relating to the everyday running of the scheme. Regular satisfaction surveys are carried out by Praxis Care's Research Department in relation to user involvement issues. Service Users will have the care/support he/she receives reviewed annually. Praxis Care staff are always keen to hear from Service Users and representatives. Heads of Operations will endeavour to make contact with service users on a monthly basis as part of the organisations monitoring processes.

Access to religious services of residents' choice

Arrangements for Religious Observances

Service users who wish to practise his/her religion/faith will be given every possible help and facility. In particular, Praxis Care will do the following:-

- If asked, Praxis Care will make contact with any local place of worship on a service user's behalf. The organisation can usually arrange for a minister or a member of the relevant organisation to visit a service user.
- Particular care will be taken to try to meet the needs of service users from minority faiths. These should be discussed with the manager before placement.

Contact between residents and their relatives, friends, representatives and the local community

Relatives, Friends and Representatives

- Service users are given every possible help to maintain and retain the links with families and friends.
- If a service user wishes, his/her friends and relatives are welcome to visit at a time convenient to the service user and to become involved in daily routines and activities.
- If a service user wishes to be represented in any dealings with the accommodation/service by a nominated friend, relative, professional person or advocate, Praxis Care will respect his/her wishes and offer all

Dealing with complaints

The person in charge is Aaron McQuaid and the person participating in management is Noeleen Ryan, they are the designated complaints officers. Within The Avenue, individuals with complaints may directly approach Aaron or Noeleen with their complaint. Aaron can be contacted in writing at The Avenue, Tierney St., Ardee or via email at aaronmcquaid@praxiscare.ie Noeleen can be contacted in writing at The Avenue, Tierney St., Ardee, or via email at Noeleenryan@praxiscare.ie.

If Noeleen or Aaron, are not in the designated centre, complaints can be discussed with a staff member, who can contact Noeleen or Aaron.

Praxis Care endeavours to locally resolve any issue raised, in the first instance but recognises that in some cases, complaints require further investigation. The complaints procedure therefore comprises of 3 internal stages and 2 external stages which can be additionally applied to permit the effective management of a complaint where required: -

Stage 1: Management of a verbal complaint, at the Point of Contact (Service/Manager Level).

Stage 2(a): Informal Resolution (Manager/Head of Operations Level).

Stage 2(b): Formal Investigation (Head of Operations/Director Level).

Stage 3(a): HSE Review (Director of Advocacy, Quality, Risk & Clinical Care Directorate, HSE)

Or

Stage 3(b): Praxis Care Internal Review (Board of Director Level).

Stage 4: Independent Review (The Ombudsman/The Ombudsman for children)

If the complainant is not happy with the response to the complaint from The Avenue complaints office, Praxis Care's named Complaints Officer Eileen Dealey can be contacted on 004428 90234555 or via email on eileendealey@praxiscare.ie The complaints officer will inform the complainant when they have received the complaint and he/she will say what they will do. You have the right to receive a response within 4 weeks. Details of the actions, responsibilities and timescales at every stage are outlined in full within the Organisations' Complaints policy and procedure.

Dealing with complaints continued

Recommendations and redress

Praxis Care will aim to ensure that redress will be consistent and fair for both the complainant and Additional Advice/Support

Advice can be sought from the designated organisational Complaints Officer at any stage or any other Praxis Care staff member with delegated authority, which shall be determined by the nature and seriousness of the complaint. Advice can also be sought from the Ombudsman's Offices at any stage. Ultimately, the nature and seriousness of the complaint will determine the personnel, timescales and stages most relevant in the process.

Notification of all complaints, regardless of what stage the complaints were resolved will be sent to the organisation's Complaints Officer and the appropriate Health Service Executive social worker. The person in charge of the service will ensure that each service user is kept fully informed of the complaint process and understands this procedure.

the individual service against which the complaint was made. The forms of redress or responses will be appropriate and reasonable where it has been established that a measurable loss, detriment or disadvantage was suffered or sustained by the complainant personally.

During key working sessions, staff will read out the complaints procedure to the service users and the process involved in making the complaint.

Staff are also there to advise the service user's, if they are unhappy with a service. This may be in respect of when the staff or the service does something in the wrong way; staff or service doesn't do something that should have been done; staff or service does something that should not have been done. Staff then advise the service user that a staff member can help them with this or if they want they can make a written complaint to the person in charge. If the service user is still unhappy about how the complaint has been dealt with at this stage, or if the service user has a serious complaint that he or she feels unable to raise with the manager of the service, the service user should contact: **The Complaints Officer, Linda Lyons Praxis Care, 25-31 Lisburn Road, Belfast, BT9 7AA.**

Fire precautions and emergency procedures

Fire Precautions, Emergency Procedures and Safe Working Practices

All service users are made aware of the action to be taken in the event of a fire or other emergency, and copies of the accommodation's/services fire safety policy and procedures are available on request. Regular fire drills are conducted and information is displayed through the building to guide all persons in the event of a fire. All staff have training in First Aid in the event of an emergency. The accommodation/service conforms to all relevant government guidance on promoting and protecting the health, safety and welfare of service users and staff. Each service user has a personal Evacuation plan in preparation for a fire.

Position/Measures in Place:

Praxis Care will ensure the property has been maintained to a high 'fire safety' compliant standard with for example:

1. Fire detection & alarm system (ie system category L1) - tested and commissioned in accordance with the requirements of I.S.3218:2013, with zoned fire panel located within front entrance corridor.
2. Minimum 30 minute self closing 'fire resistant door sets' fitted throughout.
3. Emergency lighting installed throughout - tested and commissioned in accordance with the requirements of I.S.3217:2013.
4. Compliant fire fighting equipment installed within the property (includes a fire blanket within the kitchen area).

In addition the mains wiring installations are tested and Praxis Care will ensure that this are deemed as 'satisfactory' by a 'Safe Electric - Registered Electrical Contractor' and that periodic inspection/testing within properties such as this (ie classified as Category 1d Community Dwelling Houses) is recommended on a 5 yearly basis.

Praxis Care Fire Emergency Evacuation Policy/Procedure:

In the event of a fire alarm activation Praxis Care's basic fire emergency evacuation policy/procedure is to **'get out, stay out & call the Fire Service'**. However, all staff receive initial (and 12 monthly refresher) fire safety training and their initial role on activation of a fire alarm would be to (**only** if considered safe to do so) identify the location/source of the fire alarm activation (e.g. by reading the fire panel etc.) and then to quickly make a decision as to either to fight the fire or effect a swift evacuation. In essence our staff are trained **only** to fight fires which are no bigger than small office bin size (i.e. with the correct grade of fire extinguisher or fire blanket) and **only** if they have received fire safety training and are fully confident that they can extinguish the fire - in **all** other scenarios the clear advice/guidance is to **'get out, stay out & call the Fire Service'**.

Appendix 1:

Conditions of Registration:

Condition 1

The designated centre shall be operated at all times in compliance with the Health Act 2007 as amended from time to time.

Condition 2

The designated centre shall be operated at all times in compliance with The Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities Regulations 2013-2015 (as amended, consolidated, restated or replaced from time to time) and in compliance with all other regulations made under the Health Act 2007 as amended from time to time.

Condition 3

The designated centre shall be operated at all times in compliance with the National Standards for Residential services for Children and Adults with Disabilities (January 2013) (as amended, consolidated, restated or replaced from time to time) and in compliance with all other standards made under the Health Act 2007 and as the chief inspector may notify to the registered provided from time to time.

Condition 4

The designated centre shall be operated at all times in compliance with all other legislation, regulations and standards which are applicable to it.

Condition 5

Subject to any prohibitions or restrictions contained in any other condition(s), the designated centre shall be operated at all times in accordance with and shall provide only the services set out in, its Statement of Purpose dated January 2018, as delivered and amended from time to time in accordance with Regulation 3 of the Health Care Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities Regulations 2013 (S.I No. 367/2013) (as amended, consolidated, restated or replaced from time to time)

Condition 6

No person under the age of 18 years of age shall be accommodated at the designated centre at any time

Condition 7

The maximum number of persons that may be accommodated at the designated centre is :2.

Appendix 2:

Layout of the Designated Centre:		
<u>AREA</u>	<u>Dimensions(Feet.Inches)</u>	<u>Sq. Ft. Approx</u>
Sitting Room	19 x 14.1	267.9 sq ft approx.
Kitchen	15.10 x 11.10	167.61 sq. ft. approx.
Utility	6.1 x 5.10	31.11 sq. ft. approx
Hallway	17.10 x 11.10	189.81 sq. ft. approx.
Staff room	13.4 x 7.4	99.16 sq. ft. approx.
Guest WC	5.10 x 4.10	20.91 sq. ft. approx.
Bedroom 1	19 x 13.4	254.6 sq. ft. approx.
EnSuite 1	7.10 x 3.5	24.85 sq. ft. approx.
Bedroom 2	7.10 x 3.5	189.98 sq. ft. approx.
Bedroom 3	13.5 x 11.7	157.95 sq. ft.
Bathroom:	9.10 x 6.7	60.97 sq. ft. approx.
Landing	11.9 x 11.1	132.09 sq. ft. approx.

Appendix 3:

List of additional items and applicable charges:

Contracts of care are in place for residents which outlines associated charges.

Document Version History

Version Number	Version update comment	Effective date
V1.	Placement offered to male/female only residents amended, Age category amended to over 18, sent to HIQA prior to visit.	09.11.20
V2.0	Updated details of Head of Operations Rosarie Tynan, Assistant director amended to head of operations.	30.09.21
V3.0	Update in layout.	13/04/2022
V4.0	Update to Head of Operations details to Rosarie Tynan.	01/09/22
V5.0	Update to Head of Operations /PIC	19/09/23

