Statement of Purpose

Brewery Road
Stillorgan
Dublin
Tel: (01) 289 8339
Email: Info@annesullivan.ie
www.annesullivan.ie
Rev: 7
Date: December 2017
Updated October 2018
Updated January 2019
Updated August 2019
Contents

1.0 Background ....................................................................................................................... 3
2.0 Introduction ....................................................................................................................... 4
3.0 Vision ............................................................................................................................... 4
4.0 Aim .................................................................................................................................. 5
5.0 Goals .................................................................................................................................. 5
6.0 Values ............................................................................................................................... 5
7.0 Facilities ........................................................................................................................... 6
8.0 Services ............................................................................................................................ 8
9.0 Specific Therapies: ........................................................................................................... 9
10.0 Registered Provider Details ......................................................................................... 11
11.0 Conditions attached by the chief inspector to the designated centre’s registration .............................................................................................................. 12
12.0 Staffing ......................................................................................................................... 14
13.0 Organisational structure ............................................................................................... 15
14.0 Specific care and support needs .................................................................................... 15
15.0 Admissions criteria ........................................................................................................ 16
16.0 Arrangements ................................................................................................................ 19
17.0 Fire procedures ............................................................................................................. 22
18.0 Complaints procedure ................................................................................................... 22
19.0 Day services .................................................................................................................. 23
20.0 Key policies ................................................................................................................... 23
APPENDIX 1: FLOOR PLANS .............................................................................................. 25
1.0 Background
In 1989 a group of concerned parents whose children had been diagnosed with Congenital Rubella Syndrome, came together and formed the Anne Sullivan Foundation for people who are Deafblind in Ireland. The Foundations’ name was chosen to pay tribute to an Irish immigrant who came to prominence as a Deafblind teacher in the United States.

Anne Sullivan’s parents left Limerick during the famine and settled in Massachusetts, where Anne was born in 1866. At only five years old, Anne contracted an eye infection and began losing her sight. Three years later, Anne’s mother passed away and she and her younger brother were abandoned by their father and sent to an Alms house in Tewksbury.

It was there that Anne was afforded the opportunity to undergo surgery which helped to restore her sight. She attended Perkins School for the Blind in Boston where having begun as a difficult student, she graduated as Valedictorian of her class, aged 20.

During her time at Perkins, Anne learned to communicate with friends who were deafblind, including Laura Bridgeman the first deafblind person to be educated. It was a skill that would come in handy when, in 1886, she was hired by the Keller’s to care for their daughter Helen in Alabama. Helen was a profoundly challenging student but Anne was determined, to the point of obsession, and finally managed to help Helen communicate.

Anne Sullivan served as Helen Keller’s educator for over a decade and accompanied her to Radcliffe College where she became the first person who was deafblind to graduate with a Bachelor of Arts Degree. The pair remained lifelong companions and when Anne died in 1936, Helen was holding her hand.
2.0 Introduction
The Anne Sullivan Centre provides residential, respite, day and assessment services to people who are deafblind and who have additional complex needs. We are a small organisation that provides intensive professional support to adults who are experiencing significant multi-sensory and/or physical/intellectual challenges. The level of need necessitates a high level of specialised staff engagement with our residents/service users who often have extremely complex support needs and experiences that are unique.

The condition of deafblindness is much more than a combination of deafness and blindness

“Deafblindness is a unique disability. Deafblindness is a combined hearing and vision disability. It limits activities of the person and restricts full participation in society to a degree which requires that society compensates by means of specific services, environmental alterations and or technology”. (Nordic definition 2006 [www.nordicwelfare.org](http://www.nordicwelfare.org))

A person who is deafblind can be affected in one of the following ways:

- Totally deaf and blind from birth
- Totally deaf and blind after losing residual vision/hearing
- Totally blind with residual hearing
- Totally deaf with residual vision
- Some residual hearing and vision

The Anne Sullivan Centre is an independently governed, not for profit care and support service for people who are deafblind. The Anne Sullivan Centre receives funding from the HSE and currently engages in the following activities

- Residential support for adults who are deafblind
- Day services for adults who are deafblind
- Respite for adults who are deafblind
- Assessment for adults who are deafblind

3.0 Vision
We want to see a society where all people are given an equal opportunity to participate fully and equally in society in line with the commitments set down in the United Nations Convention on the Rights of People with disabilities.
4.0 Aim
We continue Anne Sullivan’s legacy by empowering people who are deafblind to pursue meaningful, active and fulfilling lives. We do this by providing care, advocacy and support services in partnership with people who are deafblind, their families, statutory and non-statutory organisations and local communities.

We aim to provide services to each service user which encourages growth and independence based on each individuals’ strengths, wishes and needs. The Anne Sullivan Centre strives to create a community where each service user has opportunities for self-expression and self-development within a setting that is caring and supported.

5.0 Goals
- Our services are compliant with national regulations and standards and benchmarked against international best practice
- People who are deafblind are supported through innovation in augmentative and alternative communication systems and tools
- People who are deafblind receive more effective early intervention at each stage of the life cycle of a person who is deafblind
- Staff are nurtured to achieve excellence, empowered to develop and excel and recognised for their skills and knowledge
- A national service provider growing our network of supports and services and recognized as a centre of excellence
- The rights and needs of people who are deafblind are enshrined in Irish policy, legislation, planning and service development
- The condition of deafblindness is recognised and better understood by society
- Research is published and collated on the impact and prevalence of deafblindness

6.0 Values
- We are a person-centred organisation that strives for equality, fairness and respect
- We provide quality services that are inclusive; focussed on empowerment, communication and advocacy
- We are accountable to each other, our service users and our funders; we use our resources in a way that is effective and efficient
- We work as part of a team; always challenging ourselves to do better and measure our performance
- We are guided by the principles and commitments inherent in the UNCRPD
## 7.0 Facilities

<table>
<thead>
<tr>
<th>House</th>
<th>Room</th>
<th>Size (Centimetres)</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>No 7</td>
<td>Bedroom 1</td>
<td>260 x 323</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Upstairs Bedroom 2</td>
<td>360 x 305</td>
<td>1 resident</td>
</tr>
<tr>
<td></td>
<td>Upstairs Bedroom 3</td>
<td>345 x 222</td>
<td>1 resident</td>
</tr>
<tr>
<td></td>
<td>Upstairs Living Room</td>
<td>290 x 220</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Downstairs Living Room</td>
<td>360 x 500</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sitting Room</td>
<td>480 x 300</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kitchen</td>
<td>570 x 400</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Office (upstairs)</td>
<td>220 x 350</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Main Bathroom</td>
<td>200 x 260</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Toilet</td>
<td>85 x 75</td>
<td></td>
</tr>
<tr>
<td>No 19</td>
<td>Bedroom 1</td>
<td>284 x 410</td>
<td>1 resident</td>
</tr>
<tr>
<td></td>
<td>Ensuite</td>
<td>160 x 120</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bedroom 2</td>
<td>260 x 395</td>
<td>1 resident</td>
</tr>
<tr>
<td></td>
<td>Bedroom 3</td>
<td>214 x 290</td>
<td>1 resident</td>
</tr>
<tr>
<td></td>
<td>Sitting Room</td>
<td>410 x 480</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kitchen</td>
<td>290 x 560</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bathroom (upstairs)</td>
<td>200 x 260</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Toilet (downstairs)</td>
<td>140 x 75</td>
<td></td>
</tr>
<tr>
<td>No 20</td>
<td>Bedroom 1</td>
<td>284 x 410</td>
<td>1 resident</td>
</tr>
<tr>
<td></td>
<td>Bedroom 2</td>
<td>245 x 405</td>
<td>1 resident</td>
</tr>
<tr>
<td></td>
<td>Bedroom 3</td>
<td>214 x 290</td>
<td>Staff sleepover</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>room</td>
</tr>
<tr>
<td></td>
<td>Kitchen</td>
<td>290 x 560</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Living Room</td>
<td>410 x 480</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bathroom (upstairs)</td>
<td>200 x 260</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Toilet (downstairs)</td>
<td>140 x 75</td>
<td></td>
</tr>
<tr>
<td>No 21</td>
<td>Upstairs Apartment (3 rooms)</td>
<td>410 X 280</td>
<td>Bedroom</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>204 X 280</td>
<td>Kitchenette</td>
</tr>
<tr>
<td></td>
<td></td>
<td>220 X 288</td>
<td>Living Space</td>
</tr>
<tr>
<td></td>
<td></td>
<td>284 X 410</td>
<td>Living space</td>
</tr>
<tr>
<td>No 21 Downstairs</td>
<td>Bedroom 1</td>
<td>257 X 480</td>
<td>1 resident</td>
</tr>
<tr>
<td></td>
<td>Office and ensuite</td>
<td>277 X 348</td>
<td>Office</td>
</tr>
<tr>
<td></td>
<td></td>
<td>160 X 120</td>
<td></td>
</tr>
<tr>
<td>No 21 Downstairs</td>
<td>Bathroom</td>
<td>285 X 200</td>
<td></td>
</tr>
</tbody>
</table>

1 Please see floor plans in Appendix 1
### ASC Centre

**Apartment 1**
- Bedroom: 9m²
- Kitchen: 9m²
- Office: 3m²
- Living Room: 9m²
- Bathroom: 3m²
- Communal area: 11m²

**Self-contained apartment for 1 resident**

**Apartment 2**
- Bedroom 1: 9m²
- Ensuite: 3m²
- Bedroom 2: 9m²
- Ensuite: 4m²
- Office: 3m²
- Kitchen: 10m²
- Living room: 10m²
- Communal area: 11m²

**Self-contained Apartment for 2 resident**

**Day & Auxiliary services**
- 172 sqm

**Day service, multi sensory facilities, music room, Jacuzzi, kitchen and office space**

---

**Outdoor recreational areas**

The Anne Sullivan Centre is located in a quiet cul de sac on Brewery road in Stillorgan, Dublin. The centre is a short walk from Sandyford Luas station and is well serviced by public transport and other recreation and leisure facilities. Recreational areas surrounding the Anne Sullivan Centre are accessible and well maintained. There are walkways throughout the garden areas and benches for resting at frequent intervals. There is a recreation area which contains adapted swings.

There is a sensory garden and a herb garden that seeks to stimulate our residents sense of smell and touch. The recreational area has trailing bars to enable residents to walk around it independently and safely.
8.0 Services

- Residential Care – 365*24
- Day Services
- Respite – weekends and midweek
- Assessment

Services Provided

**Residential Services:** The Anne Sullivan Centre has capacity to offer residential services to 13 adults who are deafblind, 24-hour 7 days a week, 52 weeks of the year. Our residents are deafblind and some may also have physical or intellectual disabilities. The Anne Sullivan Centre seeks to employ suitably qualified people who have qualifications in Social Care, Psychology or in other related health / social care/vocational disciplines.

Each resident has an allocated key worker who advocates for and on behalf of the resident. Their focus is to ensure that the resident’s strengths, wishes and needs are heard and that the very best support is provided to each resident as outlined in their care plan.

Our therapeutic model can be described as a positive behavioural support model of care and support. Our service implements, where appropriate, assessed and deemed necessary, a Crisis Prevention Intervention (CPI) approach using Management of Actual or Potential Aggression (MAPA). The ultimate focus is to prevent, decelerate and de-escalate crisis situations so that restrictive practices can be avoided and risks can be minimized.

The staff team work within a care planning framework which incorporates the recommendations of a multi-disciplinary clinical team. Staff are supported through regular line management, supervision and both formal and informal support.

**Day Service:** The Anne Sullivan Centre provides a day service to adults who are deafblind and are living in their community. Day service users’ avail of all therapeutic/ancillary services provided by the Anne Sullivan Centre based on their assessed needs and wishes.

**Respive:** The Anne Sullivan Centre provides respite services to adults who are deafblind and need support with everyday living.

**Assessment:** The Anne Sullivan Centre recognises that the aim of an assessment is to provide a standardized and systematic method of gathering, recording, analysing and making sense of information which will inform effective and appropriate support plans for an individual. The Anne
Sullivan Centre uses 'Authentic Assessment' which is a recognised tool used to carry out assessments. The assessment process involves:
1. Clarity regarding the purpose of the assessment
2. Identifying the assessment team
3. Consultation with the client, family members and other relevant people
4. Observations in the home/day services/ASC
5. Use of standardized tests e.g. ABAS, Communication Matrix
6. Input from the Multidisciplinary team
7. Analysing the information and developing recommendations

9.0 Specific Therapies

**Physiotherapy services.** The physiotherapist is a consultant who provides a needs based service to each individual service user which is provided in accordance with the guidelines of their registered body. The focus of the physiotherapist’s work is to offer the best possible physio care whilst endeavouring to contribute to the quality of life of each resident/service user.

**Occupational Therapy service** is provided by an independent sensory occupational therapist. Occupational therapy is a client-centred approach which promotes health and well-being through occupation. It involves enabling residents and service users to do the things that they need and want to do in everyday life and assist them to develop and maintain a meaningful lifestyle. Our O.T. focuses on the following areas

1) The individual person - improving or maintaining their level of physical, cognitive (thinking), affective (emotional) and social ability.

2) The environment - manipulating or adapting the physical, social, cultural and institutional environment and institutional environment.

**Positive Behaviour Support** is a psychological approach that focuses on a positive model of intervention with residents/service users. A consultant psychologist attends the Anne Sullivan Centre on a consultancy basis providing PBS guidance and support to the staff team. The focus of these consultations is on the development and review of person centred behaviour plans as well as an oversight function ensuring that the implementation of behaviour support plans are based on the best quality, evidence based practice. The Anne Sullivan Centre also employs in house positive behavioural support specialist staff members who work across all of our houses developing, reviewing and overseeing behavioural support strategies and plans.

**Dietician:** The Anne Sullivan Centre employs a consultant dietician to ensure that all residents'/service users nutritional requirements and preferences are met. The dietician works alongside our chef and our visiting
G.P. ensuring that the dietary and health requirements of residents/service users are continuously assessed and reviewed.

**Music Therapy:** Music Therapy combines psychology and the art of music to improve the quality of life of a person of any age and level of ability. Music therapists use music based methods to address a person’s physical, emotional, cognitive, social and spiritual needs. Music Therapy is provided by an external consultant to those residents who wish to avail of it. It aims to provide a creative space for our residents to express themselves, enhance communication and experience sensory stimulation through vibrations and motion.

**Movement for Wellbeing & Dance – Ability:** This therapy is provided by an external consultant who combines her skills as a professional dancer, healing yoga and movement facilitator to create customised sessions for our residents/service users. The sessions provide a safe space for residents with the support of staff to explore movement potential within their body and experience it’s associated positive benefits. It is an opportunity for our residents/service users and staff to engage in a joint activity where movement is experienced in partnership with each other, spacial awareness is explored and balance and posture is enhanced.

**Psychiatry:** The Anne Sullivan Centre avails of the services of a visiting HSE psychiatrist who specialises in working with people who have intellectual disabilities. The psychiatrist works as part of the multidisciplinary team to ensure that the quality of life and wellbeing of our residents are assessed, reviewed and addressed in a holistic and ongoing way.

**General Practitioner:** The Anne Sullivan Centre engages the services of a local G.P. who visits residents at least monthly. The GP is very familiar with the health, welfare and social care needs of our residents/service users. The ASC also uses the out-of-hours services of D-Doc as well as VHI Swifcare.

**Speech and Language Therapist:** The Anne Sullivan Centre engages the services of a consultant speech and language therapist who is available to all residents/service users on an individual needs basis. Working with the other professionals on our multidisciplinary team, the therapist works closely with our residents/service users and staff team to establish an individualised programme to assist each person communicate as effectively as possible. Our SALT is also involved in recommending augmentative and assistive forms of communication and in assessing if residents have any eating, drinking and swallowing difficulties.
**Communications Specialist:** The Anne Sullivan Centre employs communications specialists who have completed masters in congenital deafblindness/Multi-sensory Impairments. The development and planning of all communication, assistive and adaptive technologies are central to this speciality. Daily Schedule Boards, PECS, Picture based communications, tactile strategies are all critical care planning components that are central to the lives of residents/service users who are deafblind.

**Intellectual Disability Nurse:** The role of the Intellectual Disability nurse is to provide holistic, person-centred care, promoting optimum independence, enhancing the quality of life of residents and service users with intellectual, physical and sensory disabilities in all aspects of their daily living. The intellectual disability nurse works in collaboration with the visiting GP and visits the residents’ fortnightly advising on any medical care needs. She is also a member of the Anne Sullivan Centre’s wound management committee.

**Other services:** Other services that are available to our residents/service users include Optician, Dentistry, Chiropody, reflexology, dog therapy, massage therapy, hairdressing, volunteer advocates, volunteer activity supporters and volunteer drivers.

### 10.0 Registered Provider Details

**Name:** The Anne Sullivan Centre C.L.G  
**Principal Address:** Silver Pines, Brewery Road, Stillorgan, Co Dublin A94Y763  
**Principal Telephone number:** 01 289 8339  
**Alternative Telephone Number:** 087 6690459  
**Fax number:** 01 289 8408  
**E-mail address:** info@annesullivan.ie  
**Website:** www.annesullivan.ie

**Person in Charge (PIC)**  
**Name:** Grace Kelly Hartnett  
**Address for correspondence:** as above  
**Principal Telephone number:** 01 289 8339

**Alternative Telephone Number:** (087) 6690459  
**Fax number:** (01) 289 8408
E-mail address: gracekellyh@annesullivancentre.ie

Arrangements when the person in charge is off site:

1. Trevor Beatty: Quality Assurance and Service Development Manager
2. Mark Harding: Social care Leader

The above staff members are designated as Persons in Charge and are delegated responsibility as appropriate when the Person in Charge is off site.

**Management Team.**

<table>
<thead>
<tr>
<th></th>
<th>Person in Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grace Kelly Hartnett</td>
<td>Person in Charge</td>
</tr>
<tr>
<td>Mark Harding</td>
<td>Social Care Leader</td>
</tr>
<tr>
<td>Trevor Beatty</td>
<td>Quality Improvement and Service Development Manager</td>
</tr>
<tr>
<td>Team Leaders</td>
<td>Team Leaders have management responsibility for houses/areas of responsibility.</td>
</tr>
</tbody>
</table>

**Registration Details**

Registration number: 0030695  
Date of registration: 17 December 2016  
Expiry date of registration: 16 December 2019

**11.0 Conditions attached by the chief inspector to the designated centre’s 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 and the Health Act 2007 (Registration of 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 provider 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 prohibition 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, as annexed hereto, as delivered and amended from time to time in accordance with Regulation 3 of the Health 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 13.

Capacity of the centre: the capacity of the centre is 13.
12.0 Staffing
The total staffing complement, in whole time equivalents, for the designated centre with the management and staffing complements given by grade, as required in the regulations.

<table>
<thead>
<tr>
<th>Position</th>
<th>Number Employed</th>
<th>Whole time equivalent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person in Charge</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Service Managers</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>HR/Finance</td>
<td>3</td>
<td>2.5</td>
</tr>
<tr>
<td>Supervisors/Social Care Workers</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>Support Workers</td>
<td>35</td>
<td>34.14</td>
</tr>
<tr>
<td>Relief Staff</td>
<td>15</td>
<td>9.58</td>
</tr>
<tr>
<td>Catering/Maintenance</td>
<td>2</td>
<td>0.99</td>
</tr>
</tbody>
</table>

The Anne Sullivan Centre employs care staff who are on duty 24 hours a day, seven days a week. All residents/service users have staff assigned to them during the day (8am – 8pm) on a needs basis as residents/service users have a high level of support needs. In addition the Anne Sullivan Centre employs waking night staff to ensure that residents/service users’ needs are appropriately met on a 24/7 basis.

Each resident/service user has an allocated key worker whose aim is to develop a professional relationship with each resident and take responsibility for ensuring that all care needs inclusive of the supporting paperwork e.g. care plans, behavioural support plans etc. are up to date and completed to a very high standard. The keyworker is a key member of the resident’s support team and acts as an advocate for the residents/service users ensuring that all quality of life issues are raised and supported by the Anne Sullivan Centre. They act as a liaison person with the extended family and ensure that communication between the service and the family is regular, open and transparent.

Care staff attend relevant specialist training which includes but is not limited to the following:

- First aid
- Manual handling
- Fire and safety training – fire drills (evacuation)
- Safeguarding Training
- Deafblind awareness training
- Communication strategies and adaptive technologies
13.0 Organisational structure
The organisational structure of the designated centre.

14.0 Specific care and support needs
The number, age-range and sex of the residents for whom it is intended that accommodation should be provided

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Sex</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 +</td>
<td>Male</td>
<td>6</td>
</tr>
<tr>
<td>18+</td>
<td>Female</td>
<td>6</td>
</tr>
</tbody>
</table>
The specific care and support needs that the designated centre is intended to meet
Residents in the Anne Sullivan Centre have many complex needs and abilities in addition to being deafblind. Residents in the main are nonverbal and utilise alternative and augmentative communication systems, based on their sensory needs, abilities and preferences. This includes tactile symbols, drawings, photographs, swell symbols and sign language. In general, the care and support needs of our residents/service users are in the high to maximum dependency category.

The type of nursing care to be provided
We do not employ nursing professionals as care givers however we constantly review the need for same in line with our resident’s current needs.

The Anne Sullivan Centre employs a multi-disciplinary team of professionals on a consultancy basis which is inclusive of Speech and Language therapy, Occupational therapy, psychology, Physiotherapy, Psychiatry, General Practitioner, Dietician, Music Therapy, Dog Therapy, Movement and Wellbeing and a consultant nurse with a specialism in intellectual disability.

15.0 Admissions criteria
Criteria used for admission to the designated centre, including the designated centre’s policy and procedures (if any) for emergency admissions.

In line with the Anne Sullivan Centre’s admissions policy, criteria for admission to the centre includes a diagnosis of multi-sensory loss, specifically in vision and hearing. Admissions are considered on the assessed needs of the individual referred, the needs of our current residents and whether the Anne Sullivan Centre is in a position to offer an appropriate placement to that individual.

Admissions are initially assessed by one of our specialist team members.

The ASC has a five-step process for admissions:

- Referral
- Application
- Assessment
- Admissions team meeting
- Follow up with representatives
Referral

A referral can be made orally, by phone or by email to a member of the ASC Team.

Assessment

Prior to an admission to the Anne Sullivan Centre an assessment is carried out by team member(s) to assess if the Anne Sullivan Centre can meet the needs of the person referred. The assessment determines the degree of deafblindness, the particular supports needed and whether the Anne Sullivan Centre can meet the needs of the individual.

Assessment Process

(A) Information Gathering
   a. Background/medical
   b. Hearing/vision
   c. Communications
   d. Cognitive
   e. Social/Emotional
   f. Physical

(B) Observation
   a. Natural Environment
   b. Home
   c. Other services attended

(C) Consultation
   a. Referred person
   b. Parents/carers
   c. Tutors
   d. SNA where applicable
   e. Social Worker
   f. GP
   g. Community resource worker
   h. Specialists (e.g. OT, SALP, Physio, Chime, NCBI etc)

Following the assessment, the assessor will compile a report which will outline the following:

A. Recommendations
B. Concerns
C. Strengths
D. Needs

17
E. Admission? Yes/No
F. Reasons for the decision

**Admission meeting**

The Person in Charge arranges an admissions meeting with the team to review the findings of the assessment. This team will most likely consist of the PIC, Social Care Leader/Quality Improvement and Service Development Manager, Communications Specialist and anyone else deemed necessary to assist in assessing the impact of an admission on both a new referral and the current residents. The Anne Sullivan Centre Board will be kept informed throughout the process.

**Consultation with representative** (Family, Social workers etc.)

A member of the admissions team will ensure that representatives and the prospective resident is consulted on an ongoing basis prior to any admission to the Anne Sullivan Centre.

**Right to refuse**

The Board of Directors in consultation with the PIC of The Anne Sullivan Centre reserves the right to refuse an application for admission to the service. The Board will advise the person and their parents/carers that, in the event of the person being refused entry to The Anne Sullivan Centre, an appeal may be made in writing to the Board within 14 days of the decision being conveyed to the person and/or their parents/carers. The person will be informed (and/or their parents/carers) in writing of the Board’s decision and the reasons why the person was not accepted. The right to appeal will be restated. Any appeal must be made within 30 calendar days from the date on which the decision of the Board was notified to the person and/or their parents/guardians.

The board will hear any appeal from representatives and/or the person who is being referred in the event of a refusal of admission.
16.0 Arrangements
The arrangements for residents to engage in social activities, hobbies and leisure interests.

Based on the residents Integrated Care Plan, residents/service users are facilitated to participate in a variety of social activities such as swimming, athletics, social outings and other specific activities with the support of staff members.

The residents are given the opportunity to take part in at least one summer holiday every year, as well as regular day trips to community events and places. This is facilitated by the use of the Centre’s buses and public transport.

Optional group activities in e.g. art, cooking, movement/ yoga are also provided on a choice basis. Residents have access to the art room, multisensory room, kitchen, gym, music room and Jacuzzi in the centre. Residents can also avail of weekly 1:1 music sessions with a music therapist. There is also a visiting movement therapist, massage therapist and dog therapist.

The arrangements for residents to access education, training and employment.

Residents are facilitated to engage in a life skills and education programme using the ASDAN Programme. ASDAN is a UK based organisation which provides certified educational and vocational programmes for children and adults with special needs. The programme focuses on independence, vocational skills, literacy, numeracy, communication and hobbies. This ASDAN Programme is supported by the keyworkers and the communications specialist.

Through the person-centred planning process, residents are supported to develop independence, daily living skills and communication skills. Residents are encouraged to participate in community employment placements where possible.

The arrangements made for consultation with, review and participation of residents in the operation of the designated centre.

Every effort is made to consult residents and offer choice & inclusion where possible. Families/guardians have input at Board level, through Person Centred Planning meetings, and through a “customer service” feedback mechanism “Viewpoint”. Person centred planning meetings are inclusive of residents where possible/representative.
Consultation and participation is an important principle of how the Anne Sullivan Centre delivers its services. The Centre and staff endeavour to ensure that residents/service users’ voices are heard. The Anne Sullivan Centre has a Human Rights Committee where issues can be openly discussed and addressed. We also engage the services of volunteer advocates who are invited to attend care planning meetings where possible, ensuring that the rights and wishes of residents are articulated and heard as part of this process. Residents are supported through a keyworker system- this role also includes articulating resident’s views and preferences.

**The arrangements made for residents to attend religious services of their choice.**

Where indicated by the residents and recorded in their Integrated Care Plan, arrangements are made, where applicable, for each person to attend services and observe religious customs and practices. There is a Church in a neighbouring residential care service which residents/service users can avail of should they wish to attend a church service. If residents wish to avail of religious services every effort is made by the staff team to facilitate same.

**The arrangements made for contact between residents and their relatives, friends, carers, representatives and the local community.**

The Anne Sullivan Centre operates a visiting policy which recognises the right of all residents/service users to maintain personal relationships and links with their families, friends and community. The Service does not place restrictions on visits unless requested by the resident/advocate, or reasons of privacy and safety. Visits and telephone contact with relatives and friends are actively encouraged. All visitors are expected to treat the residents, staff and all those associated with the Anne Sullivan Centre with dignity and respect at all times.

Family contact is supported and encouraged. Open days, annual gatherings at the centre and the annual Christmas party celebrations encourages participation from the community, family, staff, volunteers and the Anne Sullivan Centre and Foundation Boards. Families are encouraged to visit their relatives as often as they like in consultation with the individual and the PIC endeavours to meet family members throughout the year. There is also two parent representatives on the Anne Sullivan Centre Board.

Home visits are supported and encouraged. The role of the person’s keyworker includes family liaison and involvement. A core group of selected
trained and vetted volunteer drivers facilitate home visits where appropriate. These volunteers are supported and supervised by the Anne Sullivan Volunteer Coordinator. In addition, the Anne Sullivan Centre strives to ensure that there is a volunteer advocacy programme in place as well as a volunteer activity support programme.

The arrangements made for dealing with reviews and development of the resident’s individualised personal plan referred to in regulations.

The Anne Sullivan Centre has a policy on Care Planning and Person-Centred Planning including reviews. Each resident has a Multidisciplinary (MDT) meeting as well as an annual Person-Centred Planning (PCP) meeting which provide opportunities for a formal annual review of the care and support given bearing in mind the wishes of the resident/service user. The MDT meetings are attended by the resident if they wish, appropriate members of the multi-disciplinary team, the HSE Social Worker (where relevant/possible) any other person with a bone fide interest in the resident/service user and staff. This review may comprise a number of meetings made up of different members as outlined above e.g. resident’s family members are invited to attend an annual Person Centred Planning meeting which is an in-depth review of the person’s preferences, wishes and goals. In addition, staff carry out quarterly Person Centred Planning reviews of each resident’s goals.

Details of any specific therapeutic techniques used in the designated centre and arrangements made for their supervision.

The main therapeutic approach, in line with the Regulations S.I. 367, is Positive Behavioural Support. The Anne Sullivan Centre has trained staff member(s) who lead on this approach within the service and ensure that all plans are relevant, reviewed and updated. Our service implements where appropriate, assessed and deemed necessary, a Crisis Prevention Intervention (CPI) approach using Management of Actual or Potential Aggression (MAPA). The focus of which is to prevent, decelerate and de-escalate crisis situations so that restrictive practices can be avoided and risks can be minimized.

The staff team work within a care planning framework which incorporates the recommendations of a multi-disciplinary clinical team which is supported through regular line management, supervision and support. As all of our resident’s experience multi-sensory issues, we also incorporate specific deafblind communication techniques and strategies.
The arrangements made for respecting the privacy and dignity of residents.

The Anne Sullivan Centre has a detailed policy and commitment to the rights of residents to privacy and dignity which is in line with Human Rights Instruments. We have a Human Rights Policy and a Human Rights Committee, which is made up of internal and external members, who review restrictive /rights issues and seek to ensure that resident’s rights are upheld at all times within the Anne Sullivan Centre.

17.0 Fire procedures
The fire precautions and associated emergency procedures in the Designated centre.
The Fire Safety and Health & Safety Statement incorporates arrangements for:
- the prevention of an outbreak of fire through the establishment of fire prevention practices
- the instruction and training of staff
- the holding of fire and evacuation drills
- the maintenance of escape routes
- the provision of adequate fire protection equipment and systems
- the inspection and maintenance of the fire protection equipment and systems at least annually
- maintenance of a fire safety register
- sign in sheet/board is in operation for staff entering and leaving the building on a given day. Staff must sign in and out at the beginning and end of their shift.

There are emergency evacuation procedures in each living area and Personal Emergency Evacuation Plans for each resident. In addition, there is an externally monitored alarm system.

Fire safety training is provided for staff and fire safety equipment is present in each location and regularly monitored by an external company.

18.0 Complaints procedure
The arrangements made for dealing with complaints.

It is the policy of the Anne Sullivan Centre to ensure that there is an effective and comprehensive system in place for the recording and investigation of complaints. The centre welcomes feedback from all stakeholders to ensure the delivery of high quality supports and services at all times. All complaints, verbal or written are acknowledged, reviewed,
investigated thoroughly, treated with confidence and responded to fully in a timely manner. Where necessary quality improvement plans are developed to prevent reoccurrence.

Complaints statistics are reported to the HSE each quarter and complaints are logged on EPIC. Families and guardians are sent the Complaints Procedure and reminded who the Complaints officers are and how to contact them directly. Posters and information pertaining to the HSE Confidential Recipient- Leigh Gath, are displayed throughout the Centre.

In the event of a public incident involving residents or staff, staff are provided with a card with the Complaints Officers contact details. Staff are encouraged to give these cards to members of the public should they witness an incident that they are concerned about.

19.0 Day services
Any separate facilities for day services.

Day services are currently offered on a limited basis within the Anne Sullivan Centre. This is provided in the Centre’s main building. There is 1 service user currently availing of the day service. Day services are delivered in line with the HSE New Directions Policy (2012).

20.0 Key policies
A list of key policies that inform practice in the residential centre.

<table>
<thead>
<tr>
<th>Policy</th>
<th>Existing</th>
</tr>
</thead>
<tbody>
<tr>
<td>The prevention, detection and response to abuse, including reporting of concerns and/or allegations of abuse to statutory agencies.</td>
<td>Yes</td>
</tr>
<tr>
<td>Admissions, including transfers, discharge and the temporary absence of Residents.</td>
<td>Yes</td>
</tr>
<tr>
<td>Incidents where a resident goes missing</td>
<td>Yes</td>
</tr>
<tr>
<td>Provision of personal intimate care (in designated centres for people with disabilities)</td>
<td>Yes</td>
</tr>
<tr>
<td>Provision of behavioural support/behaviour management</td>
<td>Yes</td>
</tr>
<tr>
<td>The use of restrictive procedures and physical, chemical and environmental restraint (in designated centres for people with disabilities)</td>
<td>Yes</td>
</tr>
<tr>
<td>Topic</td>
<td>Requirement</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Residents’ personal property, personal finances and possessions</td>
<td>Yes</td>
</tr>
<tr>
<td>Communication with residents</td>
<td>Yes</td>
</tr>
<tr>
<td>Visitors (in designated centres for people with disabilities)</td>
<td>Yes</td>
</tr>
<tr>
<td>Recruitment, selection and Garda vetting of staff</td>
<td>Yes</td>
</tr>
<tr>
<td>Staff training and development (in designated centres for people with disabilities)</td>
<td>Yes</td>
</tr>
<tr>
<td>Monitoring and documentation of nutritional intake</td>
<td>Yes</td>
</tr>
<tr>
<td>Provision of information to residents</td>
<td>Yes</td>
</tr>
<tr>
<td>The creation of, access to, retention of, maintenance of and destruction of Records</td>
<td>Yes</td>
</tr>
<tr>
<td>Temporary absence and discharge of residents</td>
<td>Yes</td>
</tr>
<tr>
<td>Health and safety, including food safety, of residents, staff and visitors</td>
<td>Yes</td>
</tr>
<tr>
<td>Risk management and emergency planning</td>
<td>Yes</td>
</tr>
<tr>
<td>Medication management, to include: the ordering, prescribing, storing and administration of medicines to residents; the handling and disposal of unused or out of date medicines.</td>
<td>Yes</td>
</tr>
<tr>
<td>The handling and investigation of complaints from any person about any aspects of service, care and treatment provided in, or on behalf of a designated centre</td>
<td>Yes</td>
</tr>
<tr>
<td>Education policy which complies with relevant legislation in respect of the education needs of children with disabilities (in centres where children reside)</td>
<td>N/A</td>
</tr>
<tr>
<td>Access to education, training and development (in designated centres for people with disabilities)</td>
<td>Yes</td>
</tr>
<tr>
<td>CCTV (in centres where CCTV systems are in use)</td>
<td>Yes</td>
</tr>
<tr>
<td>End of Life considerations</td>
<td>Yes</td>
</tr>
<tr>
<td>Emergency Planning</td>
<td>Yes</td>
</tr>
<tr>
<td>Volunteer Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Debriefing Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Staff Supervision and Appraisal Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Advocacy Programme</td>
<td>Yes</td>
</tr>
<tr>
<td>Staff training and development</td>
<td>Yes</td>
</tr>
<tr>
<td>Induction Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Lone Working Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Manual Handling Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Policy</td>
<td>Available</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>Staff and Volunteer Driving Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Adverse Events and Incident Management Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>On Call and Escalation Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Residents Funds Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Privacy and Dignity Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Charter of Rights</td>
<td>Yes</td>
</tr>
<tr>
<td>Policy on Human Rights and the Human Rights Committee</td>
<td>Yes</td>
</tr>
<tr>
<td>Compliments, Comments and Complaints</td>
<td>Yes</td>
</tr>
<tr>
<td>Advocacy Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Child Protection Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Speak Up Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Wound Management Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Restrictive Practices and Interventions Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Relationships and Sexuality Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Person Centred Care Planning Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Standard Operating Procedures (Medication)</td>
<td>Yes</td>
</tr>
<tr>
<td>Social Media Policy</td>
<td>Yes</td>
</tr>
<tr>
<td>Employee Communications Policy</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**APPENDIX 1: FLOOR PLANS**
Ground level

1:50