

Statement of Purpose and Function

Peacehaven Trust

Accessible Version

Locations:

Revision No. 13: 19th June 2024

Lydia House

Blake House

Applewood Heights



Registration details

Other information set out on the Certificate of Registration.

The information is set out by HIQA in the Certificate of Registration is included at the back of this document.

Registered provider

Name:	Peacehaven Trust CLG
Provider Representative:	Stuart Ferguson (Chair of the Board)
Main address:	1 & 2 Hillside, Greystones, Co. Wicklow
Telephone number:	01-9101338
Email address:	admin@peacehaventrust.com



Person Participating in Management

Name:	Caroline Yeomans
Main address:	Presbyterian Church in Ireland, Assembly Buildings, Belfast, BT1 6DW
Telephone number:	048 90417234
Email address:	cyeomans@pcisocialwitness.org



Person in Charge


Name:	Michael Williams
Main address:	1 & 2 Hillside, Greystones, Co. Wicklow
Telephone numbers:	087 9573227 or 01 9101338
Email address:	michaelwilliams@peacehaventrust.com




Other people involved in management

Salome Murphy		01-2871450 salome@peacehaventrust.com
Sean Kelly		01-2017933 sean@peacehaventrust.com
Graham Egan		01-2875977 graham@peacehaventrust.com


Aim of the centre

	The aim is to support each individual resident physically, socially, emotionally and spiritually, while respecting their dignity and unique individuality.
-----------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------

Objectives of the centre

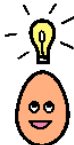
	<ol style="list-style-type: none"> 1. To provide best practice standard of excellence in care and support. 2. To provide a living environment that ensures that residents live in a comfortable, clean and safe setting. 3. To encourage and support each person to reach their full potential
-------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Ethos of the centre

	<p>To provide supports that are:</p> <ul style="list-style-type: none"> • Person centered. • Operates from a Christian ethos. • Respects the beliefs of all those supported. • Encourages choice.
-------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Services and Facilities Provided in the Designated Centre

A) What are the specific care needs that the designated centre is intended to meet?

	All people living in this designated centre are entered on the National Ability Supports System (NASS) as having an intellectual disability, and this is considered their primary disability, we support people also with a physical disability,
-------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------







mental health concerns and combinations of each category.

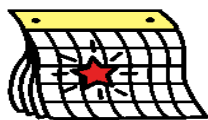
People living in our houses are supported to lead as self-determined lives as possible.

The needs of each person are individual and are recorded in detail in their care plans.

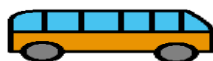
B) What facilities are provided by Peacehaven Trust to meet these care needs?

<p>cook</p>  <p>bus timetable</p>   	<p>The facilities here are in keeping with typical domestic living accommodation which includes:</p> <table border="1"> <tr><td>Individual bedrooms</td></tr> <tr><td>En-suite bathroom(s)</td></tr> <tr><td>Shared bathroom(s)</td></tr> <tr><td>Kitchen and dining room</td></tr> <tr><td>Sitting room</td></tr> <tr><td>Separate utility area</td></tr> <tr><td>Access to laundry facilities</td></tr> <tr><td>Private space</td></tr> <tr><td>There is a front garden</td></tr> <tr><td>Back garden</td></tr> <tr><td>Accessible Paths</td></tr> <tr><td>Adequate storage</td></tr> <tr><td>Rooms of a suitable size and layout</td></tr> <tr><td>Appropriate ventilation/heating and lighting</td></tr> <tr><td>Safe disposal of general waste</td></tr> <tr><td>Private transport</td></tr> </table> <p>People also avail of community facilities for their interests and leisure needs (pubs, cafes, fitness centre, churches, shops, etc). These may be detailed in their individual care plans, where supports are required.</p>	Individual bedrooms	En-suite bathroom(s)	Shared bathroom(s)	Kitchen and dining room	Sitting room	Separate utility area	Access to laundry facilities	Private space	There is a front garden	Back garden	Accessible Paths	Adequate storage	Rooms of a suitable size and layout	Appropriate ventilation/heating and lighting	Safe disposal of general waste	Private transport
Individual bedrooms																	
En-suite bathroom(s)																	
Shared bathroom(s)																	
Kitchen and dining room																	
Sitting room																	
Separate utility area																	
Access to laundry facilities																	
Private space																	
There is a front garden																	
Back garden																	
Accessible Paths																	
Adequate storage																	
Rooms of a suitable size and layout																	
Appropriate ventilation/heating and lighting																	
Safe disposal of general waste																	
Private transport																	

C) What are the services which are to be provided by the registered provider to meet those care needs?



bus



There are staff supports provided to empower people to make informed choices in relation to their lives.

The Staff role is to support the self determination of each person living in the house and ensure their written goals in the care plan are being worked on.

Staff in this house are trained in:

- Staff mandatory training
 - First aid
 - Safeguarding Vulnerable Persons
 - Children First
 - Medication Management
 - Fire Safety
 - Person centred Planning
 - Key Working
 - Behaviour Support
 - Manual handling
 - Epilepsy & Recovery Medication
 - Food Hygiene
 - Infection Control
 - Open Disclosure
 - Data Regulations
 - Report writing
 - Diet & Nutrition
 - Communication with people with ID
 - Dementia
 - Risk Assessments
 - Staff Induction

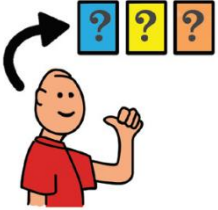
- Other training staff may be trained in:
 - Computing
 - Health & Safety Rep

The other services provided by Peacehaven Trust are:

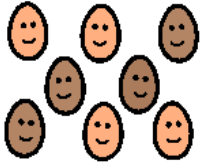
- Speech and Language
- Occupational Therapy
- Access to medical support

	<ul style="list-style-type: none"> • Gardening services • Maintenance services • Medication training for residents • Access to Employment support services • Access to Day services • Access to Rehabilitation services • Access to local churches. • Recreation services • Transport <p>The main aim of Peacehaven is to use generic community facilities and services where possible.</p> <p>Residents can purchase themselves:</p> <ul style="list-style-type: none"> • Physio Therapy • Chiropody
--	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

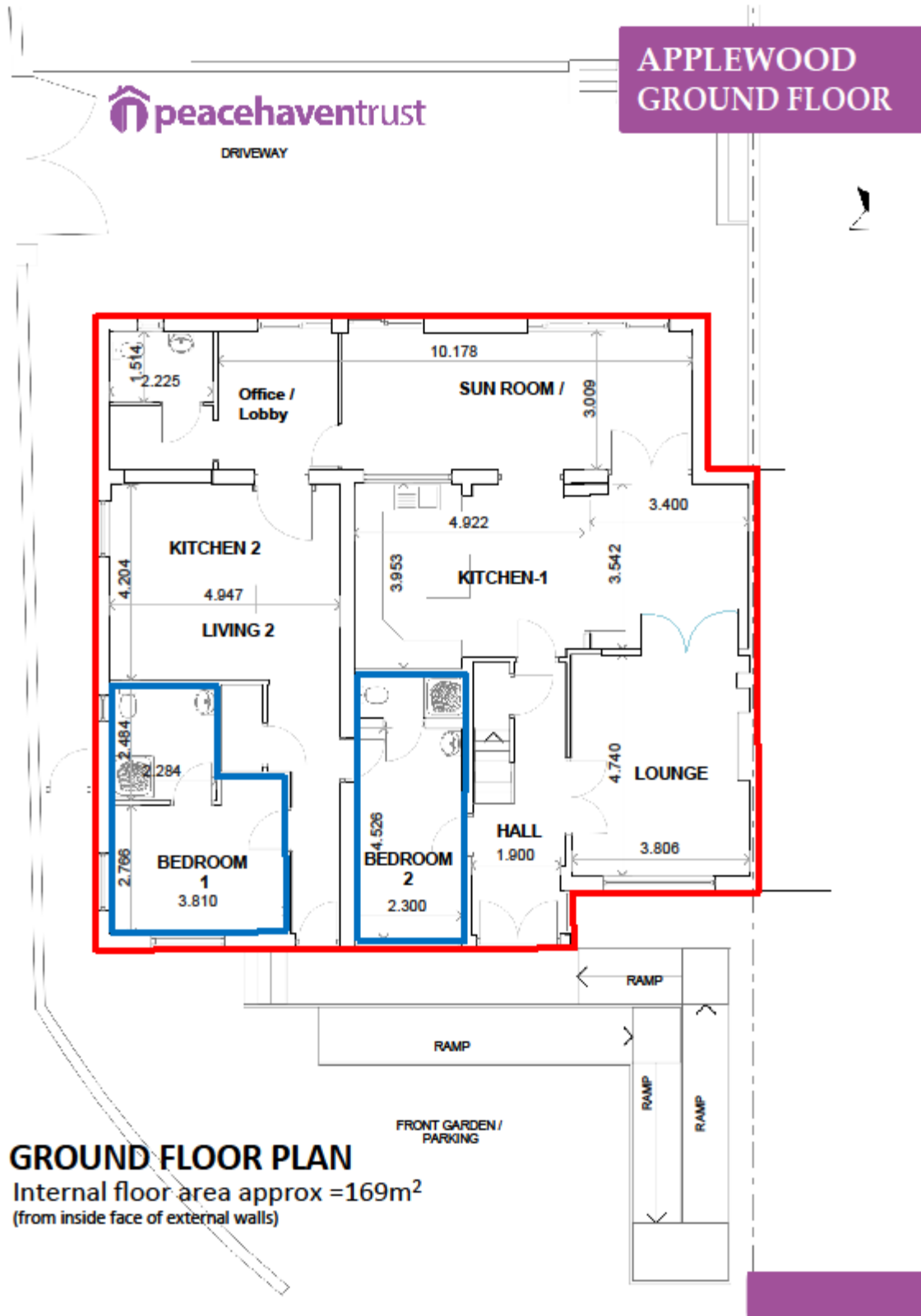
D) What criteria are used for admission to the designated centre, including the designated centre’s policy and procedures (if any) for emergency admissions?

	<p>Peacehaven has a detailed referrals, admissions, transfer and discharge policy which goes into detail the procedure for each of these situations, our referrals come through the HSE Community Health Care Office in Bray. The policy is available on our website and from our office.</p> <p>Admissions, transfers and discharge are made on a planned basis. In emergency situations people involved will be provided with as much information as possible and supported to make informed decisions.</p> <p>Respite is provided in this location :</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 25%;">Yes</td> <td style="width: 25%;"></td> <td style="width: 25%;">No</td> <td style="width: 25%;">X</td> </tr> </table>	Yes		No	X
Yes		No	X		

What are the number, age-range and gender of the residents for whom it is intended that accommodation should be provided? (Circle the relevant details)

	Lydia House	6 adults
	Blake House	6 adults
	Applewood Heights	5 adults
	Age Range: 18 - 101	
Gender: Male ✓ Female ✓		

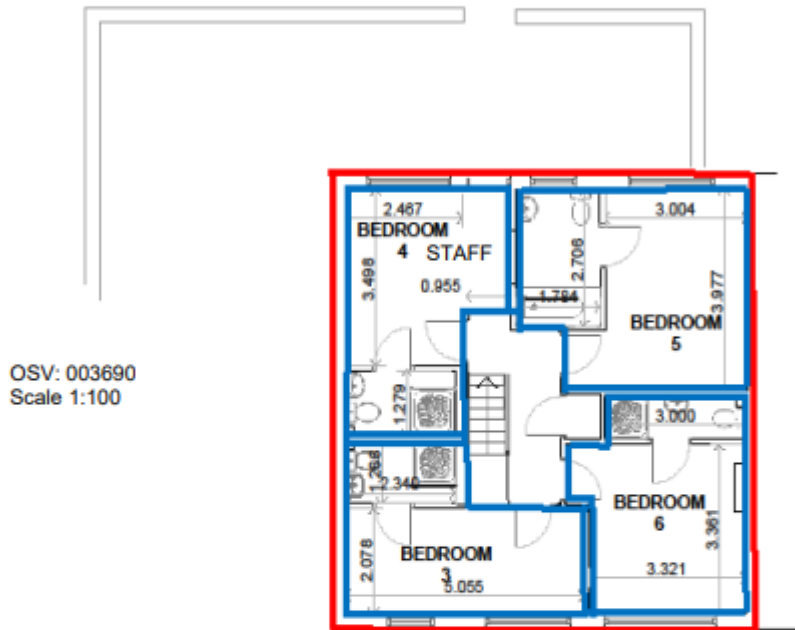
A description (either in narrative form or a floor plan) of the rooms in the designated centre including their size and primary function?



52 Applewood Heights, Greystones, Co. Wicklow. A63 AV65



**APPLEWOOD
FIRST FLOOR**

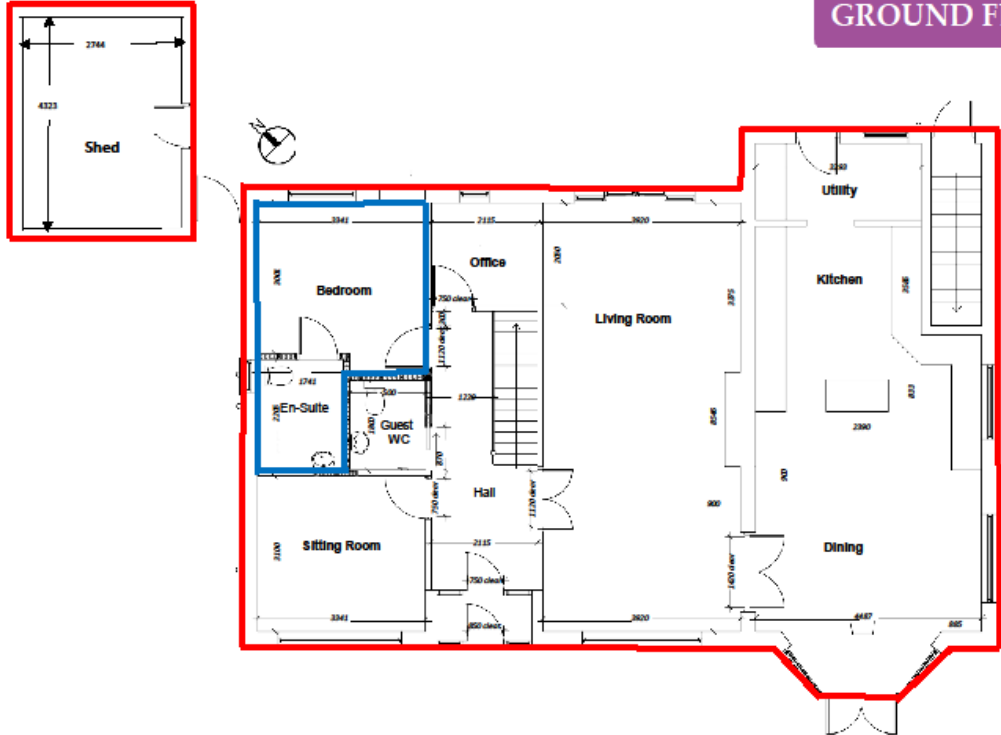


FIRST FLOOR PLAN

Internal floor area approx =71m²
(from inside face of external walls)

Feb 2021

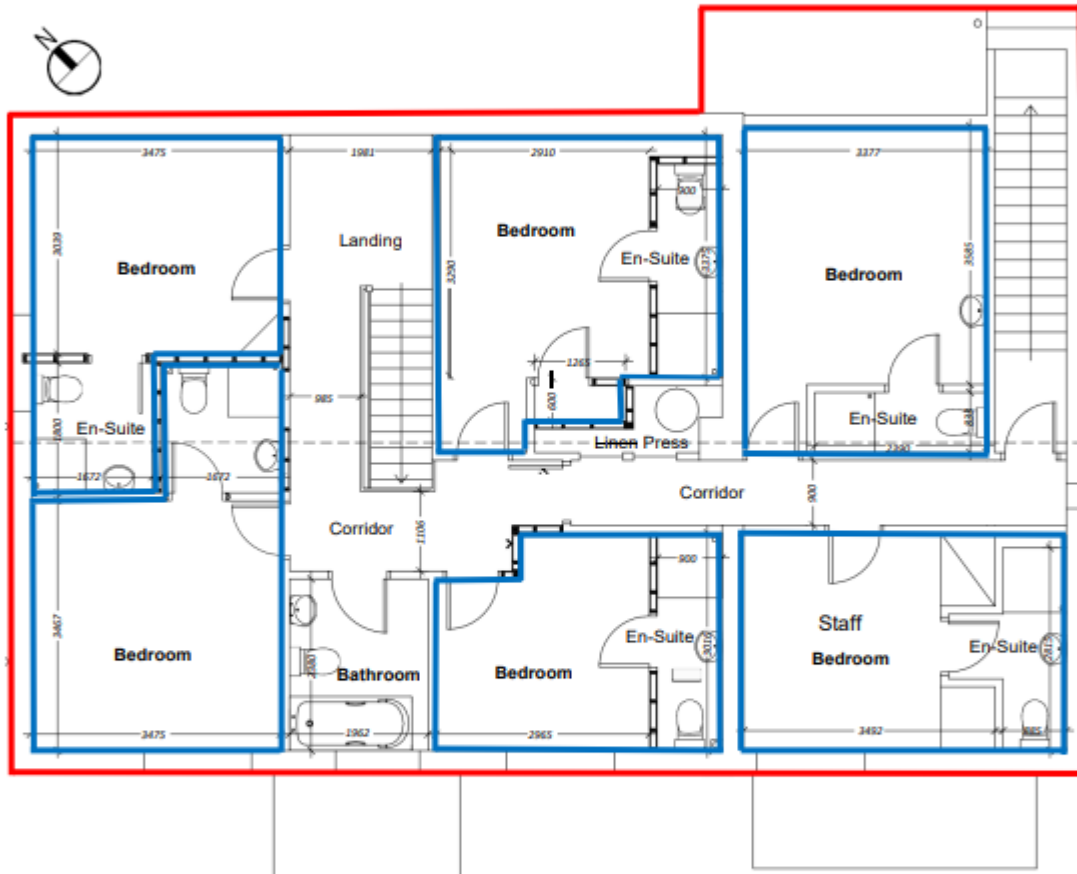
**BLAKE HOUSE
GROUND FLOOR**



**BLAKEHOUSE
FIRST FLOOR**

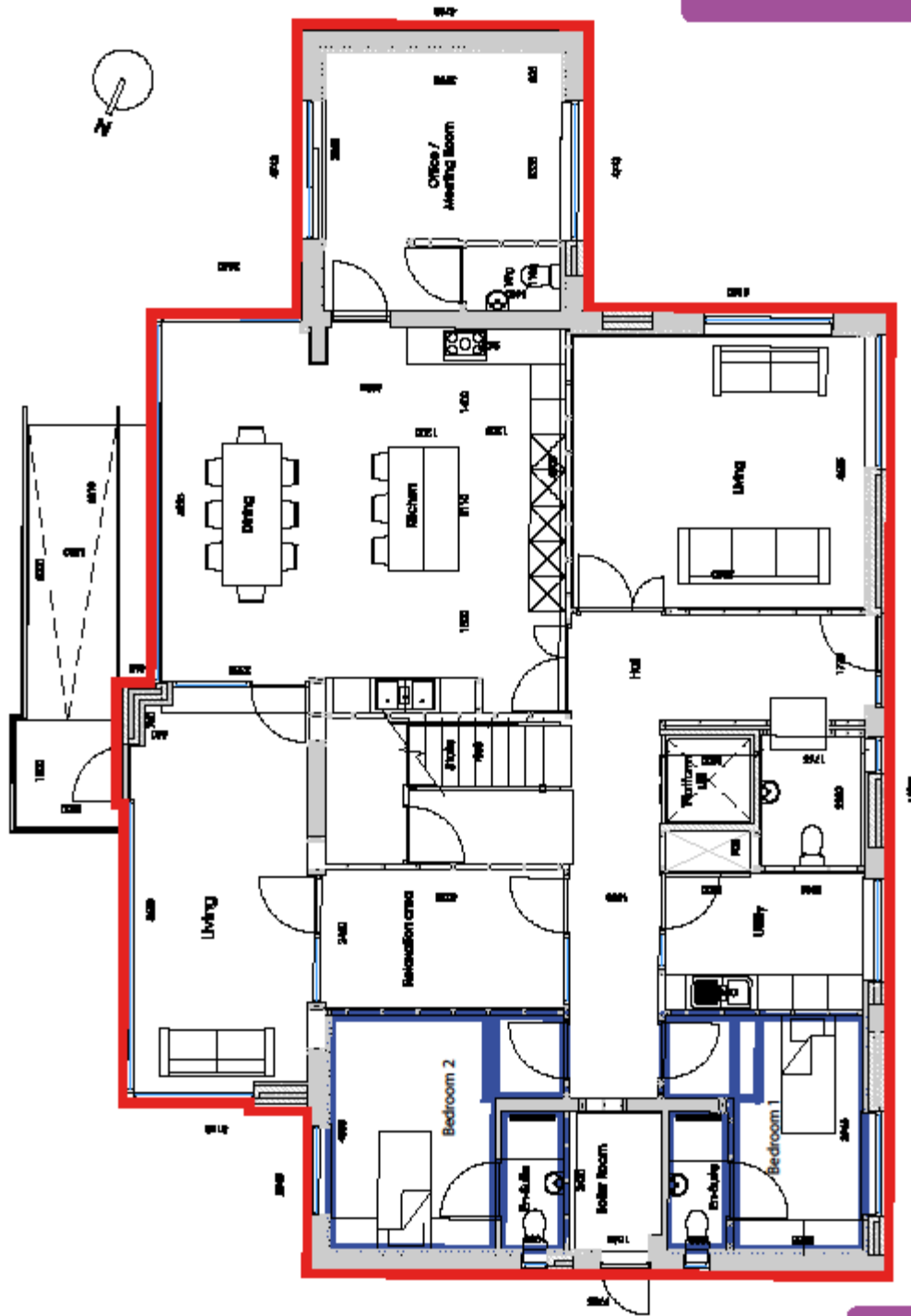
OSV: 003690
Scale 1:100

Blake House, Blacklion, Greystones, Co. Wicklow. A63 P276



**Feb
2021**

LYDIA HOUSE
GROUND FLOOR



Ground Floor Plan

FIG 3 A

LYDIA HOUSE
FIRST FLOOR

OSV: 003690
Scale 1:100

Lydia House, 1&2 Hillside, Greystones,
Co. Wicklow. A63 FN36

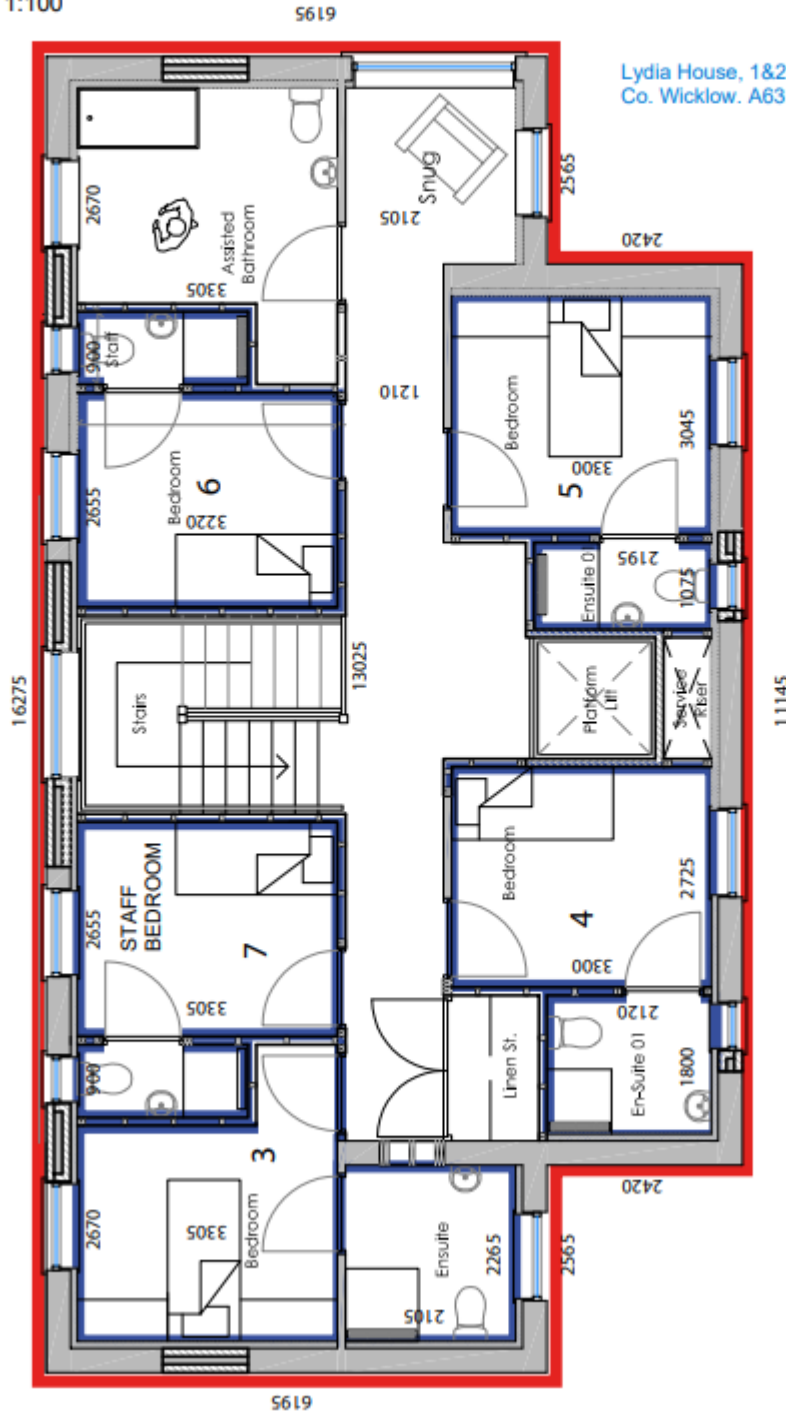



FIG 3 B

Are there any separate facilities for day care?

⊘	There are no separate facilities for day care.
---	------------------------------------------------

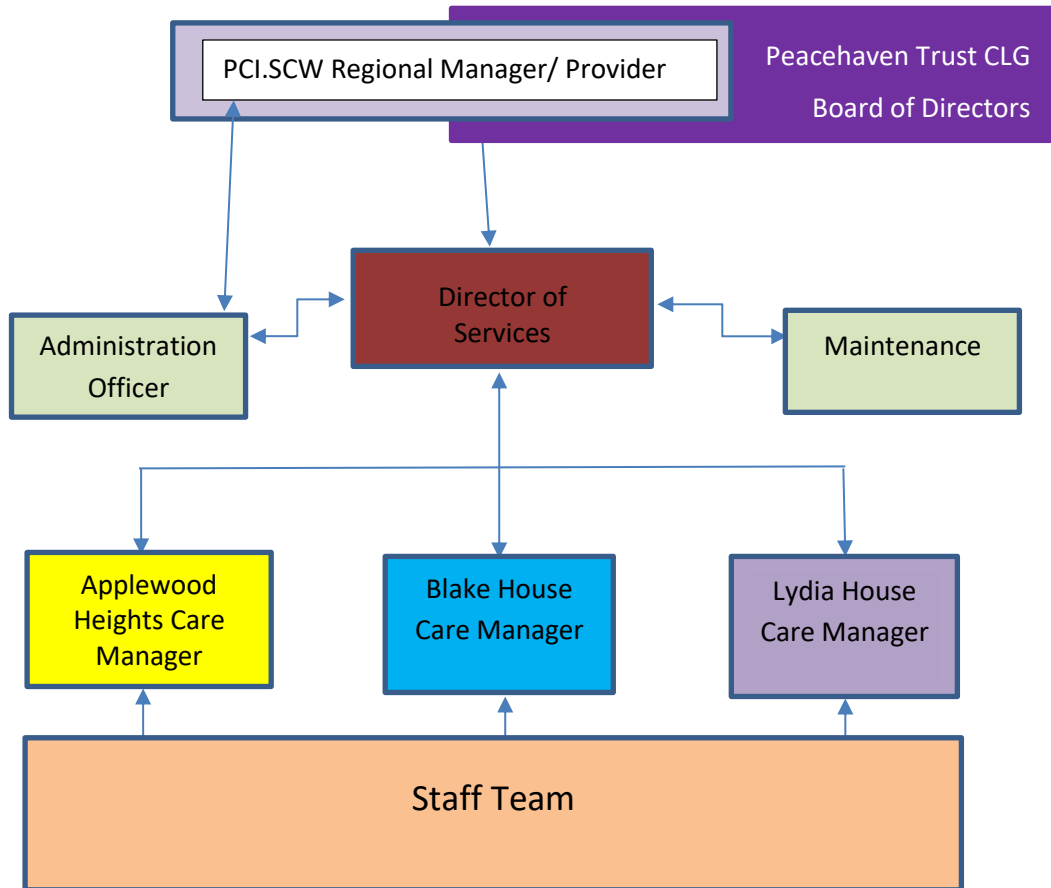
Management and Staffing

What are the total staffing complement, in whole time equivalents, for the designated centre with the management and staffing complements as required in Regulations 14 and 15?

	<u>Management team</u>		
	Director of Services:	Michael Williams	
	Care Manager:	Salome Murphy	
	Care Manager:	Sean Kelly	
	Care Manager:	Graham Egan	
	Position	Number employed	Whole time equivalent
	Director of services	1	1
	Admin Manager	1	0.6
Care Manager	3	1.5	
Social care worker	21	13.5	
Relief posts	5	1.3	
Maintenance	1	0.3	
Staff could be required to work in any house; there are a number of staff who work across two houses.			

What is the organisational structure of the designated centre?

Presbyterian Church
In Ireland
Council for Social Witness




Residents' wellbeing and safety



What are the arrangements made for dealing with reviews of the resident's individualised personal plan referred to in Regulation 8?

	<p>Residents are supported each year to create Care Plans, and Risk Assessments which support their wellbeing and safety.</p> <p>This information is recorded in the persons file on our computerised system VCare.</p> <p>The keyworker supports the resident to create the plans. There is also a Person Centred Plan which identifies the goals that the resident has for themselves in the year ahead.</p> <p>The care manager oversees the development and implementation of these plans.</p>
--	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

List details of any specific therapeutic techniques used in the designated centre and arrangements made for their supervision?


	<p>All support staff are trained in the safe Medication Management.</p> <p>Where a person has a diagnosis of epilepsy, staff working with the person are trained in Epilepsy and in the administration of Recovery medication.</p> <p>Access to other therapies are provided as required:</p> <table border="1" data-bbox="454 548 1085 705"> <tr> <td>Occupational therapy</td> <td>✓</td> </tr> <tr> <td>Speech and language therapy</td> <td>✓</td> </tr> <tr> <td>Memory Support (Dementia)</td> <td>✓</td> </tr> </table> <p>Each resident is supported in understanding and doing actions recommended by a relevant practitioner. This information is recorded in their care plan.</p>	Occupational therapy	✓	Speech and language therapy	✓	Memory Support (Dementia)	✓
Occupational therapy	✓						
Speech and language therapy	✓						
Memory Support (Dementia)	✓						

What arrangements are made for respecting the privacy and dignity of residents?


<p>home</p>    	<p>Each person's bedroom is private to them, and staff knock and are invited in. They have lockable bedroom doors. Each house is a person's home.</p> <p>Privacy is a human right highlighted in our planning process. People are assisted with their intimate care needs only to the extent necessary and then in a respectful manner. Intimate care plans are drawn up as required.</p> <p>When family or friends visit, they are welcomed and afforded privacy for their conversations.</p> <p>Everyone who wishes has a personal mobile phone and can also make private phone calls on the house telephone.</p> <p>There are opportunities for resident led discussion around many different things. These include Rights and Respect.</p> <p>Peacehaven Trust has a Confidentiality policy and staff have a confidentiality clause in their contracts.</p> <p>Any disregard for a person's dignity or privacy may form the</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	<p>basis of a Complaint under our Complaints Policy.</p> <p>Every effort is made to ensure the appropriate media for communication is used for each individual.</p>
--	---------------------------------------------------------------------------------------------------------------------------------------------------------------------

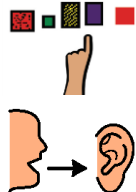
What are the arrangements for residents to engage in social activities, hobbies and leisure interests?

	<p>People we support are encouraged to join in community activities of their choice in their chosen community.</p> <p>The specific goals in relation to this are identified in their care plan.</p> <p>Family and friends come to visit.</p> <p>Staff roster arrangements are made to maximise staff presence during identified times of preferred social and recreational opportunities.</p>
-----------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------


What are the arrangements for residents to access education, training and employment?

	<p>People we support are encouraged and facilitated to access education, training and employment of their choice.</p> <p>The specific goals in relation to this are identified in their care plan.</p>
-------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

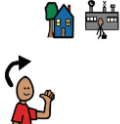




What are the arrangements made for consultation with, and participation of, residents in the operation of the designated centre?

	<p>Every person is encouraged and consulted on taking an active part in the running of the house, including looking after their own bedrooms, preparation of meals, planning of trips and events etc.</p> <p>There are informal monthly meetings in each house with the people who live there once a month minimum to ensure that their on-going participation in the operation of the house is present.</p>
-------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

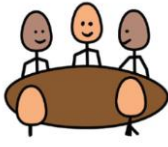
What are the arrangements made for residents to attend religious services of their choice?


	<p>People choose the services they wish to attend and this information is recorded in the resident’s care plan, along with the supports that they would need (if any).</p>
-----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------

What are the arrangements made for contact between residents and their relatives, friends, representatives and the local community?






    	<p>A private lounge area is available for the residents to meet with visitors in private as they wish. There are no restrictions on visiting times, in normal times – However during a pandemic, we follow the Health Guidance and may have to stop visits for a while.</p> <p>The information in relation to this is recorded in detail for each resident in their care plan. Families are invited to be involved in each person’s individual plan on going at the person’s request.</p> <p>Families are encouraged to give feedback on the service informally through contact with staff. Families have all been informed of the complaints policy and have all received a copy of the policy, and will have a copy of the Statement of Purpose.</p> <p>Community participation is encouraged and the information in relation to this for each resident is recorded in more detail on their individual care plan.</p> <p>Friendships are nurtured and created where possible and more detail is included individually for each person in their care plan.</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

What are the arrangements made for dealing with complaints?

	<p>Peacehaven has a complaints policy and procedure and annually reports complaints and their outcomes internally to PCI’s head of Disability every month. Every 6 months data is provided to the HSE in relation to this.</p> <p>The Director of Services is the Complaints Officer, who</p>
-------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	<p>handles all complaints within set timeframes and keeps records on all complaints and actions undertaken to resolve the issue.</p> <p>An accessible document which shows how to make a complaint is available in each location.</p>
-----------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

What are the fire precautions and associated emergency procedures in the designated centre?

    	<p>A range of fire safety equipment is installed in the house and these include: (tick as appropriate)</p> <table border="1" style="width: 100%;"> <tr> <td>Fire alarms</td> <td style="text-align: center;">✓</td> </tr> <tr> <td>Smoke alarms</td> <td style="text-align: center;">✓</td> </tr> <tr> <td>Fire extinguishers</td> <td style="text-align: center;">✓</td> </tr> <tr> <td>Fire blanket</td> <td style="text-align: center;">✓</td> </tr> <tr> <td>30 minute fire-retardant doors & walls</td> <td style="text-align: center;">✓</td> </tr> <tr> <td>Emergency fire exit signs</td> <td style="text-align: center;">✓</td> </tr> <tr> <td>External fire assembly point</td> <td style="text-align: center;">✓</td> </tr> <tr> <td>A log is maintained of maintenance of fire alarms and fire extinguishers.</td> <td style="text-align: center;">✓</td> </tr> </table> <p>Unannounced fire drills carried out at six monthly intervals, at various times: one day-time/ waking fire drill (summer) and one simulated sleep fire drill in hours of darkness (winter).</p> <p>There is an evacuation plan in each location.</p> <p>There is a safety statement in each location.</p> <p>All staff have undergone training in fire safety.</p>	Fire alarms	✓	Smoke alarms	✓	Fire extinguishers	✓	Fire blanket	✓	30 minute fire-retardant doors & walls	✓	Emergency fire exit signs	✓	External fire assembly point	✓	A log is maintained of maintenance of fire alarms and fire extinguishers.	✓
Fire alarms	✓																
Smoke alarms	✓																
Fire extinguishers	✓																
Fire blanket	✓																
30 minute fire-retardant doors & walls	✓																
Emergency fire exit signs	✓																
External fire assembly point	✓																
A log is maintained of maintenance of fire alarms and fire extinguishers.	✓																

A list of key policies that inform practice in the service:

Accident Incident Reporting System
Admission Policy
Advance Health Care Directive Policy
Alcohol and Illegal Drugs Policy
Bereavement Support Policy
Board Conflict of Interest Policy
Child Protection Policy


Code of Conduct for Charity Trustees
Communication with Residents, Relatives, Staff, Council for Social Witness and Others.
Complaints Procedure
Computer Usage Policy
Confidentiality and Privacy Policy
Dementia Guide
Dealing with Covid-19 in the Workplace
Dress Code Policy
Emergency Plans AW, BH & LH
Employee Handbook
Employee Payments Policy
Equality and Diversity Policy
Finance Policy
Fire Procedure for Safe Evacuation
Food Nutrition and Food Safety Policy
General Data Protection Policy
Harassment, Sexual Harassment, Bullying, Victimisation Policy
Infection Control Policy
Intimate Care Policy & Procedures
Key Working General Guidelines
Lone Worker Policy
Maintenance Policy
Manual and Person Handling
Medication Management
Missing Persons Policy and Procedures
Motoring Policy
Open Disclosure
PCI/Peacehaven Ethos
PCI/Peacehaven Mission Statement
PCI/Peacehaven Rules for Contractors
PCI/Peacehaven Philosophy of Service
Positive Behavioural Support Policy
Provision of Information to Residents
Record Keeping - creation, access, retention, maintenance and destruction of records.
Recruitment, Selection and Garda Vetting
Residents Access to Education
Residents Contracts and Agreements Policy
Residents Holiday Policy
Residents Personal Property, Finances and Possessions Policy
Residents Support for Church Attendance Policy
Restraint and Restrictive Practices Policy
Risk Management and Emergency Planning Policy
Safeguarding Vulnerable Adults Policy
Safety Statements AW, BH & LH
Smoking Policy
Social Media Usage Policy
Staff Educational Assistance Policy

Staff Immunisation Policy
Staff Leave Policy
Staff Training Policy
Student Work Experience Policy
Suicide Intention Safety Plan - Guidelines for disclosure of suicidal intent.
Supervision Policy
Supportive & Assistive Aids & Technology Policy Including CCTV
Temporary Absence and Discharge of Residents
Trust in Care Policy
Visitors Policy
Volunteers Policy

APPENDICES

Appendix 1: Certificate of Registration

Certificate of Registration
Section 50 of the Health Act 2007

 **Health Information and Quality Authority**
An tÚdarás Um Fhaisnéis agus Cáilocht Sláinte

Name of designated centre: Peacehaven Trust
Telephone number: 01 910 1338
Address: Peacehaven Trust CLG, 1 & 2 Hillside, Greystones, Wicklow
Registered provider: Peacehaven Trust CLG
Telephone number: 01 910 1338
Address: 1 & 2 Hillside, Greystones, Wicklow

Centre ID: OSV-0003690 **Registration Number:** REG-0034915
Date of Registration: 01 October 2021 **Expiry Date:** 30 September 2024

This to certify that **Peacehaven Trust** is registered with the Office of the Chief Inspector of Social Services as a designated centre for the period noted above, with **Peacehaven Trust CLG** as its registered provider and subject to the conditions of registration, specified below.

Management of the centres
Person(s) in charge name and telephone number:
(Adrian) Michael Williams - 01 910 1338

Name and position of each person participating in management:
Caroline Yeomans - Head of Disability Services

The maximum number of residents that can be accommodated at the centre is 17.

Conditions of registration:

Condition 1
Subject to any prohibitions or restrictions contained in any other condition(s), the designated centre shall be operated at all times in accordance with the Statement of Purpose within the footprint of the designated centre on the floor plan dated 31/03/2021. The registered provider shall only provide for the specific care and support needs, and services, within the facilities as set out the Statement of Purpose, as agreed with the Chief Inspector at the time of registration. Any changes to the specific care and support needs and services provided must be agreed in advance with the Chief Inspector.

Condition 2
Only persons aged 18 years or older shall be accommodated at the designated centre at any time.

Condition 3
The maximum number of persons that may be accommodated at the designated centre is: 17.

Pursuant to Section 56 of the Health Act 2007, the Registered Provider must ensure that this Certificate is affixed in a conspicuous place at the centre.

Issued by the:
Office of the Chief Inspector
Health Information and Quality Authority
Unit 1301, City Gate, Mahon, Cork, T12 Y2XT.
Telephone: 021 240 9300
www.higa.ie

Maximum number of residents that will be accommodated at the centre is 17 (this refers to number of registered beds applied for by applicant)

Date completed: 19th June 2024
Completed by: Michael Williams
Date for review: 1st February 2025