

## **Inspection visit to Sõmera Home of AS Hoolekandeteenused**

### **Summary**

From 24 to 25 April 2017, the advisers of the Chancellor of Justice made an unannounced inspection visit to Sõmera Home run by public limited company AS Hoolekandeteenused. During the visit, the advisers of the Chancellor of Justice and an expert took a tour on the premises of Sõmera Home, examined the documentation of the institution, and talked to the staff members and clients.

Sõmera Home has 310 places for people who need special care 24 hours a day and 42 places for people who have a profound multiple disability and need special care 24 hours a day (during the visit, all the places were filled). The clients are accommodated in 10 adjacent buildings that have mainly single and double rooms. Each building has 17 to 39 residents. The clients can visit the activity house (day centre) and dine in a separate canteen building. They can do woodwork in a workshop. Medical nurses are on duty.

During the inspection visit it could be noticed that the staff of the special care home were devoted to and well-meaning towards the clients. The clients complemented on the nice, calm and beautiful natural environment and on the considerate staff. They are also pleased with the diverse activities offered by the activity house and the concerts organised in Sõmera Home. Conversations with the staff members and clients left the impression that Sõmera Home has made efforts to find various activities for the clients, including work or work-like activities.

In connection with the plan to reorganise special care institutions, the clients of Sõmera Home are being prepared for relocation to other care institutions. Some of the residents of the care home will be transferred to a lighter special care service. The Chancellor of Justice requests that the clients be involved in making decisions concerning the reorganisation as much as possible, that they be provided with sufficient information so they can adequately formulate their opinion and that their opinions can be heard in the decision-making process.

During the inspection visit it also became evident that the number of activity instructors and their modest presence in the houses, their employment duties and qualifications do not ensure a sufficiently safe living environment for the clients.

It is important to always ensure the client's privacy upon performing more intimate procedures. The client must be able to use clean hygiene rooms in private.

Cleaning chemicals must not be available to the clients.

The freedom of movement of the residents of the second level of the house of the clients with profound multiple disabilities is restricted without legal grounds. Bedrooms should not be locked during the day in the house of the clients with profound multiple disabilities. The clients must be involved in an activity in a suitable manner. Latches must be removed from the interior doors of the buildings in order to prevent the uncontrollable locking of the doors (among other things, by other clients).

Only those prescription medicines that have been prescribed by a doctor they be administered to the clients. Account must be kept of medicines administered, so to say, where necessary, so it is clear which client treatment scheme was relied on upon administering the medicine and who and for what reasons decided it. The need for the administration of a prescription medicine

must also be decided by a health care professional who has completed the required training and it must be documented in a manner that it would be possible to actually, efficiently and retroactively check the activities of a health care professional who does not have the qualifications of a doctor. Medicines must be handled in accordance with the requirements and third parties must not have access to medicines. The medical nurse service must be available to the required extent.

The practice of using video surveillance needs further adjustment and its purposefulness must be analysed.