



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

**Social Services
Inspectorate**

A

CHILDREN'S RESIDENTIAL CENTRE

IN THE

HSE Dublin Mid-Leinster Area

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1. Introduction

The Health Information and Quality Authority (HIQA) Social Services Inspectorate (SSI) carried out an unannounced inspection of a children's residential centre in the Health Services 21st – 22nd May 2009. The lead inspector was Michael McNamara, and the co-inspector was Sharron Austin. The centre had been inspected last in May 2006.

The centre had been established specifically for a sibling group in 2001. In 2003 it transferred to its current premises. It was situated in a four-bedroomed detached house in a large rural town. At the time of inspection there were two young people (male siblings) aged 17 and 18 in the centre, the older of whom was at the point of leaving care. The purpose and function of the centre was that it remained a centre specifically for the same sibling group.

At the time of the inspection, inspectors found that the centre had an experienced and committed staff team that provided an excellent service to the young people. Most of the standards were well met, and the young people were provided with a high quality of care characterised by strong positive relationships between staff and young people and an environment in which all their needs were addressed. Key factors that contributed to the quality of service were: consistency of staffing, clear court direction and the associated imperative to maintain high levels of family contact, a good standard of partnership between the professionals involved with the young people in the centre, and successful integration of the young people into the community in which the centre was situated. The standard on monitoring was not met as the area did not have a monitoring officer in post for over two years. Other standards that were mostly or partly met included those on: staffing, supervision,

1.1 Methodology

Inspectors' judgements are based on evidence verified from several sources gathered through direct observation, examination of relevant records and documentation, an inspection of accommodation, and interviews with two young people, a parent, a relative of the young people, the centre manager, three centre staff, two social workers, the residential services co-ordinator, the child care manager, and the local health manager. The lead inspector also interviewed by telephone a therapist and an aftercare worker.

Inspectors had access to the following documents:

- the centre's statement of purpose and function,
- the centre's policies and procedures,
- a health and safety statement,
- a health and safety assessment dated November 2005,
- confirmation of fire safety arrangements,
- confirmation of insurance,
- the centre's register,
- the young people's care plans,
- the young people's care files,
- administrative records,
- personnel records, including supervision records,
- questionnaires completed by social workers,
- questionnaires completed by two young people.

1.2 Acknowledgements

The inspectors wish to acknowledge the co-operation of the young people, their relatives and HSE managers and staff who participated in this inspection.

1.3 Management structure

The centre manager reported to the regional children's residential services co-ordinator who in turn reported to the general manager of the local health area. Within the centre there were two child care leaders in one and a half posts.

1.4 Data on children

At the time of the inspection the following young people were resident in the centre:

Listed in order of length of placement

Child	Age	Legal Status	Length of Placement	Number of previous placements
# 1 (boy)	18 years 8 months	Voluntary Care	8 years 2 months	None
# 2 (boy)	17 years 7 months	Care Order	8 years 2 months	None

2. Summary of Findings

Practices that met the required standard

Purpose and function

The standard on purpose and function was met. The centre had a statement of purpose and function supported by a range of comprehensive written policies which have a structure modelled on the *National Standards for Children's Residential Centres*. The centre was described as providing long-term care exclusively for a sibling group, delivered in a manner that continues to promote family bonds while working with each young person as an individual. The statement outlined the values of the centre which were strongly based on children's rights and their need for family and social contacts as a key part of their development. Inspectors found that the functions and values described in the statement were realised in practice. They advise that the statement will need to be revised to reflect the fact that the centre will become a special arrangement for the one remaining member of the family it was originally intended for, and further revised if other young people are placed in the centre in the future.

Management

The standard on management was well met. The centre was managed by a suitably qualified person. Inspectors found that there was a committed, positive approach in the staff team, and that the young people had faith that they could bring any matter to the attention of the manager and it would be dealt with. The centre manager provided an informal on-call out of hours service to staff. The family members interviewed by inspectors found the manager and staff approachable, and said that they were always made welcome in the centre and treated with respect. Inspectors found that the manager's role was significantly affected by having to work a considerable number of shifts to enable staff to take leave and provide cover when there were other shortages. This is referred to in greater detail in the section on staffing below.

Notifications of significant events, and administrative files

The standards on notification of significant events and the maintenance of administrative files were both well met. The fact that there were no significant events to notify in the year prior to the inspection was a good indication of the quality of care provided in the centre.

Register

The centre's register met the requirements of the regulations.

Vetting

The standard on vetting was met. All staff had Garda clearances that were obtained during a renewal of checks in July 2006.

Children's rights - consultation

The standard on consultation was met. Young people were consulted individually about the day-to-day running of the centre, and were consulted about plans in preparation for reviews. Inspectors found that there was a good rapport between the young people and the staff, and that discussions about issues took place during daily meetings between the manager and the young people.

Children's rights – complaints

The standard on complaints was well met. There had been no formal complaints in the year prior to inspection; but the young people could confirm that they had the procedure explained to them, and they knew what to do if they wished to make a complaint. One of the young people said that he would talk to staff or his social worker, and the other said that he would talk to his family if he was worried about any aspect of his care.

Discharges

The standard on discharges was met. There had been only one discharge from the centre since the last inspection. A younger sibling was transferred to foster care near to the centre. The discharge was planned with a programme of transition. Daily contact between the young people in the centre and the discharged sibling as well as weekly visits from another sibling, also in foster care, took place in the centre.

Contact with families

The standard on contact with families was well met. The young people had weekly contact with a parent, a relative, and siblings. Inspectors were told by the parent and relative that they were always made welcome in the centre, and inspectors observed a close and relaxed relationship with between the staff and the family members. There was some confusion about whether contact for the eldest of the two young people might diminish once he left the centre, but inspectors were told by senior managers that it would continue as before. It remains important not only for the young person who is leaving the centre, but also for the younger siblings.

Emotional and specialist support

The standard on emotional and specialist support was well met. Both young people accessed specialist help as required. There were multi-disciplinary core group meetings approximately regularly at which there was psychological input. Staff were supported in understanding and meeting the emotional needs of the young people; and private counselling and therapy was sourced for the one young person due to leave the centre.

Management of behaviour

The standard on the management of behaviour was well met. The centre had a sanctions system, and earlier in the twelve months prior to the inspection it was used, particularly for the

imposition of fines in reparation for damaged property. Both of the young people were aware that there were rules and that there could be consequences if they were ignored. They said that the rules were fair and they had a say in how they operated. Generally, staff described some of the behaviour they had to manage as tricky rather than challenging, and within the normal range for adolescent boys. When there was unacceptable behaviour staff found that it was sufficient that it was dealt with through discussion and negotiation with the young person. Staff attributed that fact that this approach worked to the quality of the relationships between themselves and the young people. The young people respected the boundaries set by the staff, and in return enjoyed an age-appropriate level of trust. It is a credit to the young people and the staff that during the year prior to the inspection there were no significant events that needed to be notified to parents or the supervising social workers.

Physical restraint

The standard on physical restraint was met. All staff were trained in the HSE approved method of restraint, a component of Therapeutic Crisis Intervention (TCI). There were no restraints during the year prior to the inspection.

Safeguarding and child protection

The standard on safeguarding and child protection was well met. The staff had a good awareness of the principles of safeguarding, and there were clear procedures in place for notifying child protection concerns. There had been no concerns to notify in the year prior to the inspection.

Education

The standard on education was well met. The young people both attended school. They were supported by the staff in sustaining interest and application in their studies. Both had achieved junior certificate grades. The young person about to leave care was set to continue secondary education with a view to a third level education placement in 2010. The other was going to attend a school that could support him in continuing his post-primary education.

Health

The standard on health was well met. The young people were all registered with a local GP and accessed other services as required. Inspectors were told that there had been a delay in accessing a specialist medical service for one of the young people, and urge the managers of the service to ensure that in future young people in care have prompt access to health services once a decision is made to refer.

Practices that partly met the required standard

Staffing.

The centre was staffed with eight and a half posts, having seven full-time posts, and three part-time – all of them permanent. The team comprised the centre manager, one and a half child care leader posts, and seven child care workers in six posts. There had been one extended absence from work for maternity leave – from March 2008 to January 2009. The staff team was made up of eight women and two men. The average age was 40, and the average length of service was just over five and a half years. Eight staff had qualifications in social care, and two others had relevant qualifications.

Inspectors found that in the year prior to the inspection a restriction on the use of relief staff was imposed. As a consequence, both the manager and staff were required to work extra hours in order to sustain the previous level of cover and facilitate staff leave. Staff told inspectors that this put extra pressure on the centre manager, and that part of each weekly staff meeting was

set aside to juggle hours so that the duty roster could be adequately covered. Inspectors recommend that external managers carry out a review of the deployment of staff in the centre to ensure that it is adequate to provide safe care, and that it is compliant with legislation on working hours.

Supervision and Support

The standard on supervision was partly met. Inspectors were told that the centre's policy was for staff to have supervision every eight weeks. However, on examination of personnel files inspectors noted that, during the year prior to inspection, while the manager received supervision every month, supervision for most other staff averaged between 10 and 12 weekly, and one member of staff received supervision every 16 weeks, and another had none. Inspectors recommend that the centre manager reviews the supervision system, determines the frequency at which it will be delivered, and ensures that it is implemented in accordance with policy.

Children's rights - access to records

The standard on access to information was only partly met. Young people confirmed that they could read their records. Inspectors found that they could read their care plan and log books, and some of their care files. One young person had read some documents, but the other had not elected to exercise this right. There was a significant amount of confidential information held on the file of one young person, and none on the other. Both of the young people were at a point in their lives where they would be moving out of the centre having reached adulthood. The right is a children's right, so they should not have to wait until adulthood to access their records, when the arguments about restricting access on the grounds of age and understanding no longer apply to them. While they cannot see confidential information without appropriate permissions from third parties, young people should see the rest of their files in an environment in which they can receive appropriate support if it is needed. There was confusion about what constituted confidential information. This is referred to later in the section on care files. Inspectors recommend that the practice of access to records be changed to fulfil HSE policy in the spirit of the standards.

Training

The staff had received training in core subjects, such as Therapeutic Crisis Intervention (TCI) and fire safety. The manager identified training in Children First as a training need for the team and arrangements had been made for all staff to receive it in July 2009. Only one member of staff had training in first aid, and there were plans for another two staff to be first aid trained. Inspectors recommend that more staff receive first aid training, and that health and safety training be provided for the centre's health and safety officer.

Statutory care plans and care plan reviews

The standard on care planning was partly met. Both young people had statutory care plans. Owing to the length of time the young people had been in the centre reviews of the plans were held annually. However, there had been a delay in the production of one of the plans and a fifteen month gap between the reviews of another. Inspectors were told that the reason for the delay of the review was a period when the case was unallocated after a social worker had left the department. Inspectors recommend that the HSE ensures that care plan reviews take place within statutory timescales.

Preparation for leaving care and aftercare

The standard on preparation for leaving an aftercare was well met. One young person was on the point of leaving the centre. His discharge had been carefully planned. The area had an aftercare service run by a voluntary agency that assigned an aftercare worker to him and

ensured that he had appropriate accommodation. He was aware of the options in terms of further education and training, and was prepared for leaving by the centre through programmes that included budgeting and personal care. The preparation for leaving and aftercare of the other young person was underway, even though there had been a delay in preparing the aftercare plan. The standard requires aftercare plans to be in place soon after the 16th birthday or two years prior to leaving residential care. The principal concerns of the social worker for the young person who was leaving the centre was about the continued facilitation of access to his family and continued access to a psychological service that he was engaging with well. Inspectors were assured by senior managers that neither of these would be negatively affected by his moving on from the centre.

Placement supervision and visiting of young people by social workers

The standard on placement supervision and visiting of young people by social workers was met. Social work visits were mostly three-monthly from April 2008. The statutory interval for visits once a young person has been in a residential centre for more than two years is six monthly. Social workers told inspectors that there was good communication between the centre and themselves, and that in their view the young people were safe and well looked after. One social worker described the care provided as: 'Very impressive' adding, 'The children are supported well in the sense that every aspect of their lives is looked after well.'

Individual care and group living

The standard on primary care was well met. The centre operated as nearly to a normal home as possible for a staffed unit. The young people exercised choice over food, clothing, how they decorated their rooms, and other decisions about the house. There was a warm, positive relationship between staff and the young people, and the young people confirmed that they trusted staff and could identify individual members of the team that they could approach if they were concerned about anything. They described the staff as 'nice' and 'kind', and one described himself as being happy in the centre. Staff spoke warmly and respectfully about the young people, and from interviewing them and the young people inspectors formed the view that they put themselves out to ensure that the lives of the young people were as secure and happy as possible.

The young people were encouraged as individuals to engage in a wide range of activities including soccer, horse riding, sailing, membership of venturers' and sea scout troops, bowling, basketball, cinema, walks, and regular contact with friends in the community. They had been to Gaelic matches, attended pop concerts, and were able to stay over in friends' houses. They were taken on holiday in the west of Ireland last summer, and one of them had travelled to the UK with his scout troop. They were facilitated in visiting the grave of a parent, and were able to make a choice about going to church with staff. They had access to a computer in the house, but not to the internet. Inspectors suggest that consideration be given to allowing appropriate access to the internet for young people in care equivalent to the access enjoyed by their peers. Their routines during term time were dictated by school attendance, and there was more flexibility at weekends and during the week. Access with their family took place on a weekday afternoon, and one of them visited a relative at weekends. They were allowed privacy and personal space when in the house, and free time outside the centre to associate age-appropriately with friends. They were supported in their education, and accessed grinds near the time of exams.

Inspectors were concerned to find that considerations of budgetary constraints had filtered down to the young people. These had particularly impacted on the intended holiday that they thought they might have, and one of the young people was concerned about the impact on other aspects of daily life, including access. Inspectors are of the view that although it is

essential that care is provided within the context of the best use of limited available resources, it is incumbent on adults providing the service to manage them in a way that causes the least anxiety to the young people. Inspectors discussed this with senior managers, and recommended that consideration be given to handing more control of the day-to-day budget to the centre manager. This would enable the manager and staff to know the budgetary limit, plan accordingly, and include the young people in discussions about how best to make use of the resources available.

Care files

The care records in the centre were clear and accessible. They contained information required by regulations, but statutory care planning and reviews were not easy to track. Inspectors were concerned that the structure of the files was not sufficiently secure. Each consisted of a full drawer of a filing cabinet with a combination of hardback notebooks, ring binders and drop down envelopes. Inspectors also found that there was confusion about what should be in the confidential section of a file. They were told that there were documents that one young person could not access. It was not clear from reading them why this was so given his age. Also some of the same documents were in the open section of the other young person's file, which did not have any restricted information. Inspectors recommend that the structure and contents of the files be reviewed and that a more secure format is found for maintaining the centre's care records, and that appropriate arrangements are made for archiving the files of the young people as they leave care.

Premises and safety

The centre was situated in a four-bedroomed detached house on a new estate on the edge of town but near to schools. Generally, the accommodation was in reasonable structural condition, but in need of decoration. The house was homely, and resembled a family residence. Inspectors examined the maintenance log and found that while some requests were responded to the following day, two in particular, one of which concerned a health and safety risk, were dealt with only after several weeks. There were several areas where long standing maintenance needs had not been attended to adequately, including a bathroom and utility room in which there were chronic problems with damp, a large repair in the plasterwork that had not been painted, and several other minor repairs. Inspectors found that there were other safety concerns, such as a faulty boiler, and 'bunching' of the carpet in the hall. Inspectors recommend that these are attended to as a matter of priority. Inspectors also recommend that the décor of the centre be brought up to standard, and that the external managers of the centre develop a rolling programme of maintenance in accordance with standard 10.12.

Inspectors found that overall health and safety was well attended to, and that staff took their responsibilities for safety seriously. The centre had a health and safety statement that named the centre manager as the person responsible for the safety of the young people and staff. It was comprehensive, but needed to be signed and dated. It was complemented by a health and safety policy based on the criteria of the standards. The policy referred to the requirement for a health and safety assessment to be carried out regularly. The last assessment was carried out in November 2005. Inspectors found that some of the recommendations from that assessment had not been carried out, for example, that replacement blinds be installed in bedroom windows, and covers be put over radiators to reduce the risk of burns. Inspectors recommend that the centre manager arranges for an up-to-date health and safety assessment.

Inspectors were provided with evidence of valid, current insurance covering employer's and public liability.

Fire Safety

The standard on fire safety was partly met. Inspectors examined that centre's fire safety register and found that the fire safety system was regularly serviced and had been checked last in January 2009. They also found that there had been three fire drills in 2009, but none in 2008. The register also indicated that there was a problem with internal fire doors which did not close when the alarm went off. Inspectors were told that this problem had been reported twice, and the explanation the centre was given for the problem was that they closed only if a breakglass alarm was activated. The majority of staff had received fire training; others were due to receive it. The centre did not have written confirmation of compliance with fire safety and building control regulations as required by standard 10.19. Inspectors recommend that the centre determine and adhere to an agreed frequency of fire drills, and that the issue of the fire doors not closing be referred to the HSE fire safety officer with a view to resolving the problem. They also recommend that the centre acquire written confirmation of compliance with fire safety and building control regulations, as required by the standard.

Practices that did not meet the required standard

Monitoring

The standard on monitoring was not met. The monitoring officer for the area had moved on from his post over two years prior to the inspection and the position had not been filled. While there was evidence that managers visited the centre and evaluated care practice from time to time, this is a serious concern in terms of safeguarding young people in this and other centres in the local health area. Inspectors recommend that the managers of the service give priority to ensuring that the monitoring function is carried out and that this standard is fully met.

3. Findings:

1. Purpose and function

Standard The centre has a written statement of purpose and function that accurately describes what the centre sets out to do for young people and the manner in which care is provided. The statement is available, accessible and understood.			
	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Purpose and function	√		

2. Management and staffing

Standard The centre is effectively managed, and staff are organised to deliver the best possible care and protection for young people. There are appropriate external management and monitoring arrangements in place.			
	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Management	√		
Register	√		
Notification of significant events	√		
Staffing (including vetting)		√	
Supervision and support		√	
Training and development		√	
Administrative files	√		

Recommendations:

1. Inspectors recommend that external managers carry out a review of the deployment of staff in the centre to ensure that it is adequate to provide consistent safe care and is compliant with legislation on working hours.
2. The HSE should arrange for the centre manager to review the supervision system, determine the frequency at which it will be delivered, and ensure that it is implemented in accordance with HSE policy.
3. The HSE should ensure that more staff receive first aid training, and that appropriate training be provided for the centre's health and safety officer.

3. Monitoring

Standard The Health Service Executive, for the purposes of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements are in place to enable an authorised person, on behalf of the Health Service Executive to monitor statutory and non-statutory children's residential centres.			
	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Monitoring			√

Recommendation:

4. The HSE should ensure that the monitoring function in the local health area is carried out fully in accordance with the standard.

4. Children's rights

Standard

The rights of young people are reflected in all centre policies and care practices. Young people and their parents are informed of their rights by supervising social workers and centre staff.

	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Consultation	√		
Complaints	√		
Access to information		√	

Recommendation:

- The HSE should review practice in the centre of young people's access to information.

5. Planning for children and young people

Standard

There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. The plan states the aims and objectives of the placement, promotes the welfare, education, interests and health needs of young people and addresses their emotional and psychological needs. It stresses and outlines practical contact with families and, where appropriate, preparation for leaving care.

	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Suitable placements and admissions	√		
Statutory care planning and review		√	
Contact with families	√		
Supervision and visiting of young people	√		
Social work role	√		
Emotional and specialist support	√		
Preparation for leaving care	√		
Discharge	√		
Aftercare	√		
Children's care records		√	

Recommendations:

- The HSE should ensure that care plan reviews take place within statutory timescales.
- The HSE should arrange for the maintenance of care records in the centre to be reviewed in order to make statutory care planning easier to track and to make the system more secure, and ensure that there are appropriate arrangements in place for archiving the files of the young people as they leave care.

6. Care of young people

Standard

Staff relate to young people in an open, positive and respectful manner. Care practices take account of the young people's individual needs and respect their social, cultural, religious and ethnic identity. Young people have similar opportunities to develop talents and pursue interests. Staff interventions show an awareness of the impact on young people of separation and loss and, where applicable, of neglect and abuse.

	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Individual care in group living		√	
Provision of food and cooking facilities	√		
Race, culture, religion, gender and disability	√		
Managing behaviour	√		
Restraint	√		
Absence without authority	√		

Recommendation:

8. The HSE should arrange for the centre manager to have more control over the centre budget.

7. Safeguarding and Child Protection

Standard

Attention is paid to keeping young people in the centre safe, through conscious steps designed to ensure a regime and ethos that promotes a culture of openness and accountability.

	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Safeguarding and child protection	√		

8. Education

Standard

All young people have a right to education. Supervising social workers and centre management ensure each young person in the centre has access to appropriate educational facilities.

	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Education	√		

9. Health

Standard

The health needs of the young person are assessed and met. They are given information and support to make age appropriate choices in relation to their health.

	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Health		√	

Recommendation:

- The HSE nationally should develop a policy whereby all young people in care have prompt access to health services.

10. Premises and Safety

Standard

The premises are suitable for the residential care of the young people and their use is in keeping with their stated purpose. The centre has adequate arrangements to guard against the risk of fire and other hazards in accordance with Articles 12 & 13 of the Child Care (Placement of Children in Residential Care) Regulations, 1995.

	<i>Practice met the required standard</i>	<i>Practice partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Accommodation		√	
Maintenance and repairs		√	
Safety		√	
Fire safety		√	

Recommendations:

- As a matter of priority, the HSE should ensure that all outstanding repairs are attended to, arrange for the décor of the centre to be brought up to standard, and develop a rolling programme of maintenance for the centre in accordance with standard 10.12.
- The HSE should arrange for the centre's health and safety statement to be signed and dated, and for a proper health and safety risk assessment in accordance with standard 10.13.
- The HSE should ensure that the HSE fire officer assesses the non-closure of internal fire doors, and that the centre manager determines and adheres to an agreed frequency of fire drills.
- The HSE should ensure that the centre has written confirmation of compliance with fire safety and building control regulations in accordance with standard 10.19.

4. Summary of recommendations

1. Inspectors recommend that external managers carry out a review of the deployment of staff in the centre to ensure that it is adequate to provide consistent safe care and is compliant with legislation on working hours.
2. The HSE should arrange for the centre manager to review the supervision system, determine the frequency at which it will be delivered, and ensure that it is implemented in accordance with HSE policy.
3. The HSE should ensure that more staff receive first aid training, and that appropriate training be provided for the centre's health and safety officer.
4. The HSE should ensure that the monitoring function in the local health area is carried out fully in accordance with the standard.
5. The HSE should review practice in the centre of young people's access to information.
6. The HSE should ensure that care plan reviews take place within statutory timescales.
7. The HSE should arrange for the maintenance of care records in the centre to be reviewed in order to make statutory care planning easier to track and to make the system more secure, and ensure that there are appropriate arrangements in place for archiving the files of the young people as they leave care.
8. The HSE should arrange for the centre manager to have more control over the centre budget.
9. The HSE nationally should develop a policy whereby all young people in care have prompt access to health services.
10. As a matter of priority, the HSE should ensure that all outstanding repairs are attended to, arrange for the décor of the centre to be brought up to standard, and develop a rolling programme of maintenance for the centre in accordance with standard 10.12.
11. The HSE should arrange for the centre's health and safety statement to be signed and dated, and for a proper health and safety risk assessment in accordance with standard 10.13.
12. The HSE should ensure that the HSE fire officer assesses the non-closure of internal fire doors, and that the centre manager determines and adheres to an agreed frequency of fire drills.
13. The HSE should ensure that the centre has written confirmation of compliance with fire safety and building control regulations in accordance with standard 10.19.