



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

**Social Services  
Inspectorate**

**A**

**CHILDREN'S RESIDENTIAL CENTRE**

**IN THE**

**HSE Dublin North East**

***INSPECTION REPORT ID NUMBER: 323***

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**Centre ID Number: 14**

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## **1. Introduction**

The Health Information and Quality Authority Social Services Inspectorate carried out an unannounced inspection of a children's residential centre in the Health Service Executive Local Health Office Dublin North East (HSE DNE). Kieran O'Connor (lead inspector) and Orla Murphy (co-inspector) conducted the inspection under *Section 69 (2) of the Child Care Act 1991* over a two day period from the 28<sup>th</sup> to the 29<sup>th</sup> of May 2009.

The centre was located in a housing estate close to a large town. The centre is one of four that provided a regional service for the three Local Health Offices (LHO) areas of Louth, Meath and Cavan/Monaghan. Its purpose and function stated that the centre provided medium and long term placements for girls and boys from 12 to 18 years. All referrals are submitted to a central admissions committee. The centre had capacity for five children and young people.

At the time of inspection there were four children and young people living in the centre, three boys and one girl aged between 11 and 18 years. They had been living there between three years and four weeks. The centre was subject to a previous inspection by the Social Service Inspectorate in 2006 and all recommendations were met. A monitoring audit had been completed by the HSE monitoring officer in January 2009 and the majority of her recommendations had been met. Recommendations in relation aspects of child safety and protection notifications of significant events had yet to be implemented.

Overall inspectors found the centre provided a high standard of care to the children and young people. The management and staff were committed to a culture of care and this was the experience the children and young people clearly articulated when interviewed by inspectors. In this inspection key recommendations are made in relation to aspects of child safety and protection, the management of behaviour, placement of a child 12 years and under in the centre, staff supervision and notification of significant events.

### **1.1 Methodology**

Inspector's judgements were based on evidence of findings verified from several sources including: direct observation of interactions between staff and young people, a review of records, an inspection of accommodation, interviews with four of the young people, two parents of two of the young people, The acting centre manager, four centre staff, the monitoring officer, three social workers, a senior psychologist and the regional manager for residential child care service.

The inspectors had access to the following documents:

- The centre statement of purpose and function
- The centre policies and procedures
- The young people's care plans
- The monitoring officer's reports
- The young people's care files
- Administrative records
- Details of physical restraints
- Details of unauthorised absences.
- Questionnaires completed by social workers
- Young peoples questionnaires

## 1.2 Acknowledgements

Inspectors wish to acknowledge the co-operation of the young people, management, staff and all other professionals involved in this inspection.

## 1.3 Management structure

The centre manager reported to the HSE DNE regional residential care manager for residential services who in turn reported to the general manager.

## 1.4 Data on young people

At the time of inspection, the following young people were residing in the centre.

*Listed in order of length of placement*

<b><i>Young person</i></b>	<b><i>Age</i></b>	<b><i>Legal status of care</i></b>	<b><i>Length of placement</i></b>	<b><i>Number of previous placements</i></b>
#1 Girl	14	Care order	3 years	4 foster care 1 special care
#2 Boy	14	Care order	3 years	2 foster placement 1 residential care
#3 Boy	15	Care order	14 months	3 foster care 3 residential care
#4 Boy	11	Care order	6 weeks	1 foster placement 1 residential care

## **2. Summary of findings**

### ***Practices that met the required standard***

#### *Primary Care*

Primary care was of a high standard. There was a strong emphasis on daily routines which the children and young people appreciated. Meal times were occasions where staff and young people sat down together to discuss the events of the day.

Children and young people were involved in; hurling, rugby, horse riding, football and local dancing clubs. They helped draw up the daily menu, received a clothing allowance and could choose their own clothes. The staff team were aware of the children's spiritual needs and all young people were encouraged to attend a religious service of their choice. There were good key working sessions planned in consultation with the residential psychologist and based on young peoples clearly identified individual needs. The staff team were creative in the way they addressed the young people's individual needs. An example of good practice was when one young person went to the Gaeltacht last summer as part of his placement, personal development plan i. This was his first time away alone. This create approach was effective and he returned to the centre having made new friends and was more sociable, self confident and independent. The centre manager told inspectors that he had been really looking forward to returning this year but because of currant HSE financial restraints this may not be possible. The young person told inspectors that the time spent in the Gaeltacht had been very happy and he had looked forward to returning there again this year after he completed his junior certificate. The centre manager confirmed this. Inspectors are mindful of current budgetary restrictions, however given the relatively minor cost and clear benefits in terms of personal development and positive care experience inspectors recommend that the HSE consider his application favourably.

The food was of a high standard and the children and young people really liked it. The centre had the services of a cook three days a week who provided home cooking and the children and young people assisted in the shopping and the preparation of meals and they could prepare snacks as required. The kitchen dining area had two large family tables and the children and young people, staff, and visiting parents shared meals.

Generally the young people were positive about the care they received. One young person when asked about living in the centre said, "I feel really safe here, the staff are nice they worry about you, it's my home you see". Inspectors observed the staff relating to the young people in a sensitive, patient and cheerful manner. Another young person when asked what she would like to see changed replied "well I wouldn't my change my key worker I can tell her anything, she's decent". There was very good communication within the centre. Professionals external to the centre told inspectors that all the staff members were well informed about the progress of each young person.

#### *Management*

At the time of inspection the manager and deputy manager were on long term sick leave as a consequence of a work related car accident and a team leader was acting centre manager for the past month. She had been working in the centre for the past four years as a team leader and was well known to the young people and the staff team and had rapidly adjusted to the acting manager role.

Inspectors formed the view that the manager was respected by both the young people and the staff team. The manager provided purposeful leadership, focus and direction, and was accessible to the children and young people and staff. The staff team interviewed spoke of a developing culture of consultation, and staff confidence and morale were high. The manager was a constant presence in the centre and was well informed on all aspects of day-to-day care practices and on the needs of the individual young people. The young people told inspectors that if they were worried about something it would be sorted out.

The HSE had a designated aftercare worker and young people were referred to her once they had reached 16 years. At the time of inspection the eldest young person was 14 years of age and therefore not availing of the service.

Care files and administrative records were of a good standard.

#### *Contact with families*

Inspectors found that the centre were committed to family involvement with the young people and practice in this area was good. All staff interviewed were aware of the central role that family played in the young persons identify and potential support and where feasible made sure that contact was regular and meaningful. This occurred in consultation with supervising social workers. One parent told inspectors that he found staff very kind and respectful towards her and kept her well informed. Another parents interviewed said they found centre staff kind and approachable. Inspectors reviewed a comprehensive family access plan devised by the supervising social worker following a statutory review that charted a year in advance. This is good practice.

#### *Vetting*

The standard on vetting was met. All the staff team had the required garda clearance. All staff employed in the past two years had the required three references' obtained prior to the commencement of employment in the centre.

#### *Register*

The centre had a register specifying all the information required by regulation.

#### *Premises and accommodation*

The centre consisted of two semi- detached houses with a combined living area and a large back garden. The young people liked the fact that by and large it looked like an ordinary family home except for the fact that the front room facing the road was a staff room and was clearly visible from outside the centre. Inspectors could see some of the staff team from outside the centre and a large fire extinguisher and notice board was visible. Inspectors advise that blinds are put in place to maximise the centres appearance as a homely place. The interior of the centre was homely.

### ***Practices that met the required standard in part***

Inspectors found that some of the standards that were partially met. These were aspects of management and staffing, purpose and function of the centre and admissions, and aspects of safeguarding, aspects of social work availability,

The centre had a very clear purpose and function which was to provide a high standard of medium to long term residential care to young people aged between 12 and 18 years of age. However inspectors were concerned to find that there was one child aged 11 years at the time of inspection. In the year prior to inspection another child aged eight years had been placed in the centre for five days. There was no provision for emergency referrals. Inspectors recommend that admissions are in line with the centres stated purpose and function.

#### *Staffing*

There were 13 staff posts full time posts including the manager. There was also a part time cook. However there was a number of unfilled vacancies. At the time of inspection a combination of maternity leave and sick leave had diminished the staff team to eight staff posts; an acting manager, two social care leaders, four social care workers and one relief social care worker. Because of the current staff moratorium vacancies had not been replaced. There was a reliance on agency staff. Senior managers told inspectors that an application had been made to seeking derogation in this case.

There was a coherence and consistency in the staff approach to the young people. Inspectors found an experienced dedicated staff team each with an average of nine years work experience, providing a high standard service to the children and young people. All but one of the staff members had the required qualifications. The managers and staff summed up the centre philosophy as one where they were committed to the long term welfare of the young people. Inspectors found that this commitment was shared by all the staff team members interviewed. Professionals external to the centre spoke highly of the dedication and resilience of the staff team and their partnership approach to working with young people.

The HSE had a policy of supporting staff to obtain relevant qualifications. The HSE DNE training department also provided further courses, and inspectors were told that the availability and quality of training was of a good standard. All were trained in Professional management of aggression and violence (PMAV) and First aid.

#### *Supervision and other supports*

The acting manager was available to the staff team on a daily basis and the quality of supervision was of a high standard. Informal supervision was frequent for all staff and was seen by them as an opportunity to be accountable, and was supportive, educational and empowering. However because of a sick leave and the recent change in the management of the centre formal supervision had fallen into abeyance in some cases. Given the complex nature of some of the young people's issues formal supervision needs to recommence.

The acting manager had supervision with her line manager monthly. The acting manager attended weekly meetings with other local centre managers, deputy managers and the director of the regional residential services. There was an on call service for out of hours and weekends which was provided by the local centre managers on a rota basis. Staff also had support through the employee assistance service in the event of a stressful incident. Team meetings occurred on a weekly basis and had a high level of attendance.

### *Monitoring*

The standard on monitoring was met in part. The monitoring officer had been on maternity leave for a number of months but had been replaced by an acting monitoring officer. A comprehensive monitoring audit had been completed in January 2009 and the draft report had been issued at the time of inspection. Most recommendations had been implemented.

Recommendations in relation aspects of child safety and protection, inter-professional training and aspects of complaints policy have yet to be implemented.

The monitoring officer generally received notification of all significant events. However, there was a recent breakdown in communications and she was not notified of the placement of an 11 year old boy some four weeks earlier. Inspectors recommend a review of the notification of significant events mechanism to ensure this does not occur again. Inspectors recommend that the remaining recommendations are completed.

### *The social work role and care planning*

The children and young people had social workers who visited them frequently and regularly and knew them very well. The average length of involvement with the children and young people was two years. They received weekly reports on the progress of the young people. All social workers interviewed read care records in the centre from time to time. There was good level of inter-professional work and inter cooperation between the centre and the social workers. Some aspects of the young people's behaviour were causing concern and this led to an increase in professional's core meetings. The young people valued contact with their social worker and told inspectors that they listen to them. All the children and young people had care plans and the statutory review meetings took place in accordance with the regulations in three cases.

However, inspectors were concerned about the placement of one child in the centre one month prior to this inspection. His supervising social worker who placed him in the centre was on extended leave at the time of inspection. The child had been in a foster placement for eight years. Following a breakdown in the placement he was placed in this centre. The acting manager and staff were unsure about access arrangements and learnt from the foster parent that two other children had subsequently been placed in the foster home. During the inspection inspectors found a record of the child being asked prior to his access in the foster home if he minded two other children being placed in the foster family.

- Inspectors were concerned to find the following;
- This child is only 11 years of age and is placed in a residential unit contrary to national policy in relation to the placement of children aged 12 years and under and the centres own purpose and function.
- He was in long term foster care with a family for eight years
- He is said by all professions involved with him to be vulnerable because he is functioning below his chronological age.
- He is now living in a centre alongside adolescents who at times are involved in high risk behaviour in the community.
- When asked if he felt safe in the centre he told inspectors that he was being bullied at times in the centre and was told by another young person he would be called a rat bag if he told anyone in the centre.
- The person he would tell if he felt unsafe was his teddy bear and in fact a considerable part of the inspectors' interview with him was conducted by addressing questions towards his teddy bear.

- The access arrangements with the former foster family were unclear to the staff team both in their purpose and structure.

Inspectors brought these concerns to the attention of senior managers and the staff team at the time of inspection. Given the age of this child and the sensitive nature of this placement inspectors recommend that the child is allocated a social worker immediately. A safety risk assessment needs to take place to ensure his immediate safety in relation to any bullying behaviour. Inspectors recommend that the suitability of this placement is reviewed as a matter of priority.

#### *Safeguarding and child protection*

The staff members interviewed by inspectors had a good knowledge of unit policies and national guidelines and were vigilant and clear about how they would act in the event of concerns about the safety of children. However some young people were engaging in risky behaviour when they left the unit which is discussed under behaviour management below. Inspectors found records some aspects of young people's behaviour where the social worker was not notified as required by Children First. This had been subject to a recommendation in the monitoring report. Senior managers told inspectors that this was being addressed at the time of inspection and further training in *Children First: National Guidelines for the Protection and Welfare of children* had been planned for all staff. Inspectors recommend that this takes place as soon as possible.

#### *The management of behaviour*

Inspectors found that the children and young people were well cared for, that staff related well to them, and that there was a good level of co-operation and an air of affection, banter and fun between them. The behavioural expectations were explicit but they were negotiated with the children and young people. The young people were challenged and supported in managing their own behaviour. There was a strong emphasis and attention to relationship building between the staff team and the children and young people. The staff team told inspectors that consistency in the team approach, a good relationship with the young people, and an understanding of them and their families was the key factor in managing behaviour. For example inspectors noticed that one young person was getting a dinner different from the main meal. When asked about this he told inspectors, "that's what I like about the staff they guess right what I like" There was a strong emphasis on the therapeutic aspects of the TCI model and it was implemented thoughtfully. There was a sanctions policy and inspectors found that they were proportionate and fair. However that were somewhat repetitive and some staff did not consider them effective at times. The managers told inspectors that sanctions policy was being revised with more and more emphasis on negotiation in the management of behaviour.

While inspectors noted that the children and young people were happy and in general behaved well in the centre, inspectors had concerns about the two of the young people's safety external to the centre. Three of the older young people were leaving the centre without permission. In the year prior to this inspection there were 46 unauthorised absences averaging 10 hours duration. All relevant people had been informed including the garda in line with HSE policy, but while the absences diminished they continued. Two of the young people were missing overnight on 13 occasions between them. They were engaging in risky behaviour to themselves and others. One young person was occasionally getting involved in drug taking and at times associating with other young people known to the gardai. Another young person aged 14years was found in a public house at 10pm associating with unsuitable adults. When interviewed by inspectors about this behaviour the young people had no awareness of and were utterly naive about the serious risk in which they were placing themselves. For example, one young person thought they could

tell which illegal drugs were tampered with and therefore unsafe to use. Staff successfully negotiated with the third young person and his absences rapidly diminished. Despite the best efforts of the staff the absences by two young people continued albeit to a lesser extent. Professionals meeting and Child Protection Conferences had been convened and strategies have been put in place. In summary, in spite of an array of actions by staff such as maintaining positive relationships, providing a good level of primary care, risk assessments, clear planning, and perseverance, contact with Garda, the outcome was that two of the young people were still unsafe. The HSE DNE should ensure that there is an external management review of all absences without authority and strengthen staffs management of the behaviour of the young people.

#### *Physical restraints*

There were no physical restraints in the year prior to the inspection.

#### *Health and specialist services*

The standard on health was mostly met. All the young had a general practitioner and a choice of a male or female doctor. The staff team were aware of the health needs of the young people. All had medical examination on admission if required and records on health were of very good quality. However there was no medical history on file. Inspectors recommend that medical histories be included on care files in accordance with standard 9.2. The food in the centre was varied and nutritious. The centre was ever vigilant and regularly assessed medical specialist, psychiatric and specialist services as required. The centre had the services of a senior psychologist for residential care who provided comprehensive psychological assessments, worked directly with the young people and provided advice on a specific modal of intervention to the key workers and the staff on the needs of individual young people. An independent review of this intervention was about to commence at the time of inspection. The centre also had access to a behavioural therapist in relation to another young person. This was highly valued by the supervising social worker and the staff team. Three of the young people were regular smokers. Inspectors recommend that the centre develop a smoking cessation programme for children and young people.

#### *Education*

The standard on education was mostly met. There is a comprehensive policy on education within the HSE Dublin North East area. The staff team placed a high value on education and were very clear that the young people deserved every opportunity to maximise their personal development and life chances by getting the best possible education. All children and young people files had a discrete education section containing individual educational plans, qualifications and school contact. Inspectors found evidence of good advocacy when one of the children was treated in a potentially discriminatory way at school. There had been major school attendance difficulties with practically all of the young people prior to coming to the centre. Two of the young people were attending school and of those one young person was about to commence his junior cert. He told inspectors that he was confident of passing with honours and had ambitions to go to university at a later stage. Two other young people were not attending school on a regular basis. The Education Welfare Service had been appropriately informed and involved. The staff team had been in regular contact with the school in relation to this. Home tuition was provided for one of the young people pending a further school placement. Both of these young people had educational plans for the coming school years commencing in September. Inspectors recommend that the staff team and social workers' are unrelenting in their efforts to ensure that these young people return to school.

### *Children's Rights*

Practice in relation to children's rights by and large was good. All the young people were informed of their rights on admission and received a children's booklet outlining these rights on admission. There were concerns about a lack of consultation with young people in the last inspection. Inspectors found that this had now been addressed. The young people told inspectors that they were consulted about all aspects of their lives. There was children and young peoples meeting weekly. They were encouraged and facilitated to express their views in their care reviews. Inspectors found records indicating a good standard of consultation in key working covering areas such as diet, personal hygiene relationships and sexuality. There was a clear complaints policy and young people were aware of how to make a complaint. Inspectors found that the centre responded to any complaints made in the past year. However there was no indication whether or not the young person was satisfied with the outcome of complaints. Inspectors recommend that the young person views of the outcome of complaints is recorded on the complaints file.

The staff team were generally aware of the young people's right to information. Some young people were not clear about their right to information held about them on their care files and inspectors recommend further sharing of information with young people about their rights in this area.

### ***Practices that did not meet the required standard***

#### *Fire safety*

The centre needed to provide written confirmation from a certified engineer or a qualified architect that all statutory requirements relating to fire safety and building control have been complied with.

## **3. Findings**

### **3.1 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 met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Purpose and function		√	

#### **Recommendation:**

- 1. Inspectors recommend that admissions are in line with the centres stated purpose and function and review the admission of an 11 year old child.**

### 3.2 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 met the required standard in some respects only</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:

2. The HSE DNE should review the system of notification of significant events to ensure it is implemented at all times.
3. The HSE DNE should ensure that all care staff receive regular formal supervision.

### 3.3 Monitoring

#### Standard

The health board, 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 board to monitor statutory and non-statutory children's residential centres.

	<i>Practice met the required standard</i>	<i>Practice met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Monitoring		√	

#### Recommendation:

4. The HSE DNE should ensure that all of the monitoring officer's remaining recommendations are expeditiously completed.

### 3.4 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 met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Consultation	√		
Complaints		√	
Access to information		√	

**Recommendations:**

- 5. The HSE DNE should ensure that that the young person views of the outcome of complaints are recorded on the complaints file.**
- 6. The HSE DNE should ensure that all young people are made aware of their right to information about themselves on their care files.**

### 3.5 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 met the required standard in some respects only</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	√		
Aftercare	√		

#### Recommendations:

7. The HSE DNE should ensure that the placement of one child is reviewed.
8. The HSE DNE should ensure that a supervising social worker is appointed for one child without delay.

### 3.6 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 met the required standard in some respects only</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:

- The HSE DNE should ensure that external management review all absences without authority and strengthen the staff's management of the behaviour of children and young people.

### 3.7 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 met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Safeguarding and child protection		√	

#### Recommendations:

- The HSE DNE should ensure that the staff team receive refresher training in Children First.
- The HSE DNE should ensure that children and young people are safe inside and outside the centre.

### 3.8 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 met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Education		√	

#### Recommendation:

- The HSE DNE should ensure that the children and young people attend school.

### 3.9 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 met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Health		√	

#### Recommendations:

- The HSE DNE should ensure that in future medical histories are kept on file.
- The HSE DNE should develop a smoking cessation programme for children and young people

### 3.10 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 Regulations, 1995.

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

**Recommendation:**

- 15. The HSE DNE should ensure that the centre has written confirmation from a certified engineer or a qualified architect that all statutory requirements relating to fire safety and building control have been complied with.**

## **4. Summary of recommendations**

- 1.** Inspectors recommend that admissions are in line with the centres stated purpose and function and review the admission of an 11 year old child.
- 2.** The HSE DNE should review the system of notification of significant events to ensure it is implemented at all times.
- 3.** The HSE DNE should ensure that all care staff receives regular formal supervision.
- 4.** The HSE DNE should ensure that all of the monitoring officer's remaining recommendations are expeditiously completed.
- 5.** The HSE DNE should ensure that that the young person views of the outcome of complaints are recorded on the complaints file.
- 6.** The HSE DNE should ensure that all young people are made aware of their right to information about themselves on their care files.
- 7.** The HSE DNE should ensure that the placement of one child is reviewed.
- 8.** The HSE DNE should ensure that a supervising social worker is appointed for one child without delay.
- 9.** The HSE DNE should ensure that external management review all absences without authority and strengthen the staff's management of the behaviour of children and young people.
- 10.** The HSE DNE should ensure that the staff team receive refresher training in Children First.
- 11.** The HSE DNE should ensure that children and young people are safe inside and outside the centre.
- 12.** The HSE DNE should ensure that the children and young people attend school.
- 13.** The HSE DNE should ensure that in future medical histories are kept on file.
- 14.** The HSE DNE should develop a smoking cessation programme for children and young people
- 15.** The HSE DNE should ensure that the centre has written confirmation from a certified engineer or a qualified architect that all statutory requirements relating to fire safety and building control have been complied with.