



Health Information and Quality Authority

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Inspection of a Children's Residential Centre in the HSE Dublin North East Area

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1. Introduction

The Health Information and Quality Authority (HIQA) Social Services Inspectorate (SSI) carried out an announced inspection of a children's residential centre in the Health Services Executive (HSE), North East Area (NEA) under Section 69 (2) of the Child Care Act 1991. Bronagh Gibson (Lead Inspector) and Kieran O'Connor (Co-Inspector) carried out the inspection over a two-day period from the 24th to the 25th of January 2012.

The centre was a terraced house in north inner city Dublin. It had access to local community supports and schools, and was within walking distance of the city centre. It was well established in the local area and community. It was in operation since 1981 when it was set up as a sibling group home and maintained its core ethos of working closely with the families of the children placed there. Although some of the siblings placed in this centre nine years ago were still living there, the centre had begun its transition into a mainstream residential care centre. It continued to provide a service for children from the local area, but as it was now part of the recent re-structuring of the HSE and its regions, it was not guaranteed that this would remain the case.

At the time of the inspection there were four children living in the centre. Two of these were brothers who had lived in the centre for nine years and another child was the last of a sibling group who had been living in the centre for seven years. The fourth child living there was admitted to the centre eight months prior to the inspection.

There were two discharges from the centre in the year prior to the inspection and although these were not in keeping with the children's original care plan, the discharges were found to have been managed well.

The newest admission to the centre had presented challenges to the staff team and the children living there, that had not been present when the centre was caring for siblings on long-term placements. However, inspectors found that although this child's placement had and continued to have an impact on some of the children living there, the centre had adapted to the placement in an effort to meet the needs of this child.

Overall, inspectors found this to be a well managed centre that provided a good standard of care to the children living there. The staff team were found to be committed, flexible and motivated with a strong emphasis placed on working closely with the children and their families. Since the last inspection, essential maintenance and redecoration had been attended to and the children were happy with this. The main areas of practice requiring improvement were mostly related to the placing social work departments and their level of care planning for the children, and the length of time taken to assess and resolve complaints and allegations.

The centre was last inspected in February 2009 and a follow-up inspection was carried out in November 2010. One recommendation made in the original full inspection remained outstanding and this was in relation to fire safety. The reports can be accessed on the Authority's website www.hiqa.ie as inspection reports ID number's 290 and 428.

1.1 Methodology

The judgements of the Inspector in relation to this inspection were based on an analysis of findings verified from a number of sources of evidence gathered through:

- observation of practice
- examination of records and documentation, including:
 - The centre's statement of purpose and function
 - Policies and procedures
 - Young People's case files
 - HSE Monitoring Officer's reports on the centre
 - Census forms on young people, management and staff
 - Administrative records
 - Previous inspection report and follow-up report
 - Health and safety documents
 - Questionnaires completed by the young people and their parents and social workers
- interviews with the following:
 - Three young people in residence
 - One parent
 - The Centre Manager
 - The Acting Deputy Centre Manager
 - One social worker
 - Two Social Care Workers (one agency staff member)
 - One HSE Monitoring Officer, and
- an inspection of accommodation.

1.2 Acknowledgements

The inspectors wish to acknowledge the hospitality and co-operation of the young people, staff members and other professionals who assisted during this inspection.

1.2 Management structure

The centre was managed by a Centre Manager who was assisted by an Acting Deputy Centre Manager. The Centre Manager reported to the Acting Alternative Care Manager.

1.3 Data on young people

During the fieldwork the following young people were residing in the centre:

<i>Young person</i>	<i>Age</i>	<i>Legal Status</i>	<i>Length of Placement</i>	<i>Number of previous placements</i>
#1	16 years	Voluntary Care Order	9 years	N/A
#2	15 years	Voluntary Care Order	9 years	N/A
#3	12 years	Voluntary Care Order	7 years	N/A
#4	11 years	Interim Care Order	8 months	Two Relative Foster Care

Listed in order of length of placement

2. Summary of Findings

This was a well managed centre and there was evidence of mostly good practices. All of the young people who were interviewed by the inspectors spoke well of the staff team. They described the centre as a mostly safe and emotionally stable place for them. The children told inspectors that they felt listened to most of the time and that this was of value to them. They were found to have a good awareness of their rights, but were unsure of the medium and long-term plans for them. They said that they found this frustrating. Inspectors found the staff team to be stable and committed. They were also found to be motivated to continue learning and progressing the work of the centre, and had adapted to the recent changes the centre had experienced.

Overall, the inspectors found that this centre provided a good standard of care to the children living there, and a good standard of support to their families. Key recommendations made in this report are in relation to child protection, care planning and aftercare, and fire safety. Recommendations in relation to other areas of practice are outlined further in the report.

3. Findings

Practices that met the required standard

Purpose and function

This standard was met. The centre had a statement of purpose and function that was revised since the last inspection to reflect national policy on the placement of children under 12 in residential care. This was in a format that was accessible to children and their families. The most recent admission to the centre was under 12 when placed there and although it is not ideal to have a child of 10 years of age placed in a

residential centre, this placement was found to be in accordance with the exceptional circumstances outlined in departmental policy.

Management

This standard was met. The centre was managed by a qualified and experienced manager who had managed the centre since it opened. The Centre Manager was supported by an Acting Deputy Centre Manager whose substantive post was child care worker. The Centre Manager reported to the Acting Alternative Care Manager. Inspectors found that the Centre Manager and Acting Deputy Centre Manager had clear lines of responsibility and provided a good standard of guidance, support and leadership for the staff team. There was evidence of the manager's quality assuring practice and reports and or records produced by the centre.

Notification of significant events

This standard was met. The centre held a record of all significant events on children's individual files and also held a central register of these events that were cross referenced. In the year prior to inspection, the centre had notified 160 events to social work departments, external managers, the HSE monitoring officer and any other person deemed appropriate for receipt of such reports. The types on incidents reported included absences by children from the centre, assaults, substance misuse, and property damage and child protection concerns.

Staffing and vetting

This standard was met. The centre had an allocation of 10.5 whole time equivalent posts that included the centre manager. At the time of the inspection the centre had one full-time permanent manager, one acting deputy manager, two full-time permanent social care leaders, two part-time permanent social care leaders, four full-time permanent social carer workers, one part-time permanent social care worker, one part-time temporary social care worker and one project leader. A new system had been put in place by external managers to ensure the centre was fully and safely staffed at all times. This included the use of agency workers once authorised by the Acting Alternative Care Manager. This was a newly established system, and inspectors strongly advise that this is monitored to ensure the children are cared for in a stable and consistent manner. Some of the children interviewed by inspectors said that the complex needs of one child had regularly impacted negatively on the availability of staff to them. This was known to the centre manager and every effort was found to have been made to address this by providing additional staff and also by ensuring activities were planned for the children. However, this is an area that inspectors advise is closely monitored by the centre manager and alternative care manager.

Inspectors found that staff were appropriately vetted and this included agency staff.

Overall, inspectors found this to be a stable, committed and child centred staff team. They had proved resilient to the challenges they faced and flexible and positive in their approach to their transition from being a sibling group home to a mainstream residential centre.

Administrative files

This standard was met. The centre had good recording mechanisms in place and information was accessible. These included systems that ensured good communication across the staff team and provided a good reflection of practices. There was some

replication across records and the Centre Manager told inspectors that although time spent recording information had increased, this was system that currently being reviewed regionally.

Monitoring

This standard was met. The HSE Monitoring Officer had reported on the centre in the year prior to inspection. She had regular contact with the Centre Manager and staff and had met the children living there.

Consultation

This standard was met. The children interviewed told inspectors that they felt respected and consulted by the staff team. They said they had an input into the daily workings of the centre, the centre rules, and also felt part of solving problems that arose. The staff team meetings reflected how the staff team considered the wishes of the children. The centre also held children's meetings but these were irregular and had not been held for some time. Records showed that there was a poor recording system in place that inspectors were of the view, did not adequately reflect the good level of individual and group consultation with the children. Inspectors advise the centre to consider how they could achieve this.

Access to information

This standard was met. The children interviewed by inspectors said they had access to their daily records and their care files, although they did not always ask to read them. The staff interviewed had a good knowledge of the children's rights to access information and the centre files were structured in a way that was accessible to the children.

Contact with families

This standard was well met. The centre placed a strong emphasis and high value on working directly with the children and their families. The centre had good relationships with the children's parents and other family members. One parent interviewed said that he/she felt that the centre only contacted him/her when there was a difficulty with his/her child and would like to be contacted for positive reasons also. This is an issue that the inspectors advise the Centre Manager to assess and address if appropriate.

The children interviewed said that they had good contact and access with their families and that they also understood there were sometimes rules about when they could see them or not. The children were also confident that if they did not want to see particular family members that this would be respected by the social workers and the staff team.

Emotional and specialist support

This standard was met. Inspectors found that the staff team provided emotional support to the children. The children interviewed by inspectors said that this was of high value to them and that without this level of support they would find coping with certain situations in their lives very difficult. The children in the centre were found to have access to external specialist supports from areas such as psychology and education. The Centre Manager told inspectors that there was no child waiting for access to any required or recommended specialist intervention. See also *Management of Behaviour*.

Children's case and care records

This standard was met. Each child had an individual care file and daily log book. They also had individual medication, risk assessment, sanctions and significant incidents books. These ensured a good standard of recording in relation to the children, but were found by the centre staff to be burdensome and repetitive. Inspectors were of the understanding that this method of recording adopted by the region was under review and that although the centre may not always have a staff available to represent the centre for the purpose of the review, another mechanism should be found by the centre to ensure their views are represented to the review group. Inspectors were of the view that whilst reviewing recording mechanisms and systems, the review group should ensure that there is an emphasis on quality not quantity of information recorded, and that defensive record keeping is not routine practice.

Restraint

This standard was met. The centre held a record of every restraint and physical intervention carried out. These were found to have been appropriately reported as significant events by the centre. The use of physical interventions was a new experience for the staff team, as the children who were living there prior the most recent admission did not require such interventions. As such, the Centre Manager had ensured that all staff were trained in the carrying out of restraints and reports on such incidents were sent to the HSE training department for review. Since the admission of one child in May 2011, the centre had carried out 15 restraints on him/her. The child in question was interviewed by inspectors and he/she had a good understanding of why staff had to hold him/her safely on occasion. The child did state however that he/she suffered from asthma and experienced panic attacks (this was verified at interviews). Inspectors advise the Centre Manager to seek medical advice on the restraint of this child from time to time, or if their medical condition deteriorates.

Accommodation

This standard was met. This was a three storey house with bedrooms on two floors. Each of the children had their own bedroom and they were found to be nicely decorated and furnished. The children said that they liked their rooms and the privacy it gave them. The centre had been refurbished to a good standard and the children were pleased about this.

Practices that met the required standard in some respect only

Training and development

This standard was mostly met. The centre had carried out a training audit and it showed that staff were trained in areas such as first aid, stress management, food safety, suicide awareness, and risk assessment. Due to the behaviours presented by one child, the Centre Manager had ensured that the team was refreshed in Therapeutic Crisis Intervention (TCI) training. The staff team had yet to be provided with training on the recently revised *Children First Guidelines* and inspectors recommend that this is provided to them.

Complaints

This standard was partly met. The centre held records of all complaints made. They also had a central register that was cross referenced with the actual complaints records. There were 16 complaints recorded in this register. Where it was appropriate for the centre to address the complaints this was found to have happened. However, inspectors found that social work responses to some of the complaints made to them

were slow and there was evidence of the centre writing to them to request a response when one was not forthcoming. One child had made a series of complaints in relation to his/her and another child's placement and the effects it was having on him/her. This was found to have been responded to by social workers and centre managers (internal and external), although the child was not satisfied with the outcome. The children interviewed said that they knew how to complain but had little confidence in the complaints system and the chance of them being satisfied with the outcomes. One parent interviewed by inspectors said that although the complaints procedure had been explained to him/her, he/she would not make one as he/she had literacy difficulties and found the process to be paper based. Inspectors recommend that the HSE ensures that:

- all complaints are dealt with in a timely manner
- children and parents have confidence in the complaints process
- the complaints systems and procedures are accessible to everyone.

See also *Child Protection*

Suitable placements and admissions

This standard was partly met. One child had been placed in the centre in the year prior to the inspection. He/she was 10 years of age on admission. Due to the serious nature of the concerns about this child and their high level of need, this was found to have been an appropriate placement at the time of admission. However, this was intended to be a short-term placement and the child remained in the centre at the time of the inspection, eight months on. Following his/her admission, the extent of the complex needs and behaviours of this child and the impact of the placement on the other children and centre practices became apparent (*see also Individual living in group care and Management of Behaviour*). The centre was unsure if it could meet all of his/her needs but were making every effort to do so in conjunction with other professionals involved with the case. Inspectors recommend, in addition to any other recommendations made about this child, that his/her current placement is reviewed to ensure it is for the shortest time possible, and that it continues to be a suitable placement for him/her.

Statutory care plans and reviews

This standard was partly met. All of the children interviewed said they knew what a care plan was and that they could read it if they wanted to. All of the children had a care plan on file. One of the children's care plan was dated 2010 and required updating immediately. Another child's care plan did not reflect his/her current placement and although minutes of a child in care review were on file, the care plan had not been amended to reflect the outcomes.

Three of the four children had a child in care review in the year prior to the inspection and minutes of these were on their files. One child who was 12 years of age had not had a child in care review since April 2010 despite his/her imminent move into a relative foster care placement. Another child who was under 12 had his/her case judicially reviewed every three months but did not have a monthly statutory child in care review in accordance with national policy. This child's most recent child in care review was July 2011 and considering his/her young age, this was found to be unsatisfactory. Two parents told inspectors that they did not feel they were a valued contributor to the planning of their child's current and future care, and those decisions were either made without them or that their wishes were not valued. This is an area

that requires immediate attention from the social work departments involved. Care planning process inspectors recommend that the HSE ensures that:

- two children have an up-to-date care plan
- one child's care plan reflects his/her current placement and clearly outlines the placement objectives
- one child has his/her case reviewed in accordance with the National Standards
- two children's cases are reviewed immediately and following on from that, on a monthly basis in accordance with national policy on the placing of children 12 years and under in residential care
- care planning is an inclusive process that where appropriate, the wishes of parents are considered and met.

Social work role and Supervision and visiting of children

This standard was partly met. The centre staff and the children told inspectors that some social workers visited the children more than others, took them out of the centre and/or met them in private, and also met them at times other than for the purpose of scheduled placement meetings. All of the children said that they had access to their social workers telephone numbers and could contact them if they wanted to. One child said that his/her social worker was not always accessible to him/her. Inspectors found no evidence of social workers reading children's care files from time to time. Inspectors recommend that the HSE ensures that:

- social workers visit children in accordance with the national standards and talk with them in private from time to time
- social workers are always accessible to the children should they need to talk to them
- social workers read children's care files from time to time.

Preparation for leaving care and Aftercare

This standard was partly met. One child was in the process of leaving the centre and moving to a foster care placement. Despite not having a statutory child in care review in 2011, preparations for this move and how it would happen were in place and the transition had begun and was going well. Another child was 17 at the time of the inspection and had not been referred to the local aftercare worker and had no after care plan or needs assessment carried out. This was of concern to this young person, who was not sure what his/her future held or where he/she would be living in the coming year. This was an area that required immediate attention by his/her assigned social worker. Inspectors recommend that one young person is referred to the local aftercare service, has an after care plan developed and an aftercare needs assessment carried out.

Individual living in group care

This standard was partly met. Every effort was made by the centre to ensure that the children had their own individual lives, social networks and interests. The children confirmed this with the inspectors. However, inspectors found that one child's behaviour and the responses by the staff team to manage these had a direct impact on the daily living of other children in the centre. Several examples of this were found by inspectors through interviews and centre records. Examples were:

- the centre hall door was locked regularly to manage risk to and by one child. This restricted the movement of the other children. On one occasion a child exited the centre through the staff office window in order to attend rugby practice

- children in the centre had been exposed to violent and threatening behaviour by other children
- access to the kitchen was regularly restricted for all of the children due to one child's behaviour
- staff were not always available to other children, for example, to assist them with their homework, as they were attending to one child.

These issues amongst others had been brought to the attention of the Centre Manager, the Alternative Care Manager and social workers for the children involved, by one child. EPIC (children's rights organisation) have also been involved in this incidence. Despite this, this situation continued. Although inspectors acknowledge that every effort was being made to ensure all of the children are being kept safe and that their needs are being met, they recommend that in addition to recommendations made under *Suitable placement and Admissions*, the HSE ensures that no child in this centre is adversely affected by the behaviour of one child and/or staff responses to these behaviours, and that appropriate measures are taken to resolve these difficulties as a matter of importance. See also *Safety*.

Managing behaviour

This standard was mostly met. The centre had had to manage different behaviours that placed children at risk both inside and outside of the centre, for example, alcohol misuse, verbal abuse, aggression and assaultive behaviour. Inspectors found that the centre worked closely with parents and other professionals involved with the children, including the Gardaí to manage these behaviours. In addition to this, all staff were fully trained in TCI and each child in the centre had an Individual Crisis Management Plan (ICMP). These provided guidance for staff on how to manage individual children's behaviours. The staff team also utilised natural consequences and applied proportionate sanctions where necessary. These were monitored by the Centre Manager. The centre also made good use of risk assessments both for individual children and for the centre itself. (*See also Absences without permission*)

One child had been particularly challenging to the staff team due to their behaviour. The team had experienced numerous staff assaults and increased incidents of restraint. Although this behaviour had improved, attempts by the staff team to adequately manage it were ineffective. This was a child with specific diagnoses, and inspectors formed the view that best use was not being made of external professionals knowledge of this diagnoses and how best to respond to their behaviour. Inspectors recommend that external professional guidance is provided to the centre on the management of one child's behaviour.

Absence without authority

This standard was mostly met. The centre held a record of all absences from the centre. Inspectors found from centre records that reporting of these absences was in line with the Dublin North East policies and procedures. There were 105 absences from the centre in the year prior to the inspection. Sixty one of these related to one young person who was 17 years of age and was beginning the process of moving out of care. Twenty were in relation to another child who was 11 years of age. Inspectors found that although this young child was absent from the centre on many occasions, his/her whereabouts was known to the centre and/or family members. Inspectors found that there was no distinction between the reporting of classification of absences for children of different ages and/or whether their whereabouts were known or not. As

such, inspectors recommend that the centre works with individual children's social workers to determine when an absence is classified and reported as such.

Safeguarding and child protection

This standard was partly met. The centre held records of all child protection concerns reported to the placing social work departments. These records and interviews with centre staff showed that although responses were prompt for some children, they were not for others. One report made was not acknowledged by the social work department involved. Some of the child protection concerns reported had resulted in child protection case conferences and the development of safety plans for the children. They were found to have been reviewed regularly by the child care manager involved.

One child made an allegation against a staff member 12 weeks prior to the inspection. A safety plan was put in place whilst this matter was being assessed by the placing social work department and investigated by the Gardaí. However, at the time of the inspection this matter remained outstanding. This was not acceptable. To meet this standard, the HSEDNE should ensure that all child protection concerns are:

- acknowledged
- assessed by placing social work departments
- brought to a conclusion in as short a time as possible.

Education

This standard was partly met. The centre placed a high value on education and made every effort to support and encourage the children to attend school and/or a training course. The centre held educational records and achievements of the children on the children's individual files. Three of the children living in the centre attended school and/or a training course, although attendance was sporadic for one. The children interviewed told inspectors that they liked school. A fourth child was not attending school and this was of particular concern to inspectors due to his/her young age. Although every effort was made to engage this child in education, this was not successful. Home tuition was being explored for him/her at the time of the inspection, as were ways of engaging him/her with his/her school placement. Inspectors recommend that the HSEDNE ensures that one child is receiving an education in an appropriate educational setting.

Health

This standard was mostly met. Each of the children interviewed said they were in good health. Centre records showed that each of the children had their own doctor and all visits to the doctor and medications prescribed/administered were recorded on the children's files. One child required orthodontic treatment for some time, and although this had been identified by the social work department involved, funding was not made available. This was unacceptable. Inspectors recommend that this child receives the orthodontic treatment they require.

Maintenance and repairs

This standard was mostly met. The last full inspection found that the centre required considerable maintenance work and inspectors found that this was mostly completed. The centre bathrooms were renovated, a new heating and water system had been installed and a new kitchen was fitted. The centre had also been decorated with new carpets, fresh paint, and new furniture. Re-decoration of the centre was ongoing and

there were areas that required some more attention. For example, a shower had been relocated and the ceiling was not repaired. Some of the door locks on the bathrooms required replacing, and there were holes in some of the landing walls that required filling in. The centre held a maintenance log and this showed that responses to maintenance requirements was good and had certainly improved since the last inspection. Inspectors recommend that the HSEDNE ensures that any outstanding maintenance requirements are attended to.

Safety

This standard was partly met. The centre had a health and safety statement that was dated December 2010 and was found to have been reviewed in February 2011. The centre also had a trained health and safety representative. Health and safety issues were found to be a standing item on the staff team meeting agenda. The centre had experienced children accessing the roof. Due to situations of risk, the centre had also begun the practice of locking the front and back doors on a regular basis. These doors could only be opened by a staff member with a key. These were also fire exits. This practice was not formally risk assessed by the centre. Inspectors recommend that the HSEDNE ensures that the roof is not accessible to the children, and that locking the external doors of the centre is formally risk assessed and is for reasons of managing imminent risk and is not routine practice.

Practices that did not meet the required standard

Fire safety

This standard was not met. The centre had an up-to-date fire register. Inspectors found that fire drills and evacuations had been carried out in the year prior to the inspection. Inspectors were concerned to find that all fire extinguishers for the centre were held in the main office and were not accessible unless a staff member opened the door with a key. This was a three story building, with a kitchen in the basement. Inspectors also found that the centre did not have written confirmation from a certified engineer or qualified architect that all statutory requirements relating to fire safety and building control had been complied with. The centre did have correspondence from the HSE fire and safety officer outlining the arrangements in place in the centre. This was also a finding of the last full inspection of the centre in 2009 and the previous recommendation still stands. Inspectors recommend that the HSE comply with standard 10.19 and provide written confirmation to the Authority as a matter of priority.

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 children 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 children. 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	√		

Recommendation:

1. The HSEDNE should ensure that the staff team are trained in the recently revised *Children First Guidelines*.

3. Monitoring

Standard

The HSE, 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 HSE 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	√		

4. Children’s rights

Standard

The rights of children are reflected in all centre policies and care practices. Children 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:

2. The HSE should ensure that:

- all complaints are dealt with in a timely manner
- children and parents have confidence in the complaints process
- the complaints systems and procedures are accessible to everyone.

5. Planning for young people and young people

Standard

There is a statutory written care plan developed in consultation with parents and children 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 children 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		✓	
Discharges	✓		
Young people's care records	✓		

Recommendations:

3. The HSEDNE should ensure that one child's current placement is reviewed to ensure it is for the shortest time possible, and that it continues to be a suitable placement for him/her.
4. The HSEDNE should ensure that:
 - two children have an up-to-date care plan

- one child's care plan reflects his/her current placement and clearly outlines the placement objectives
- one child has his/her case reviewed in accordance with the National Standards
- two children's cases are reviewed immediately and following on from that, on a monthly basis in accordance with national policy on the placing of children 12 years and under in residential care
- care planning is an inclusive process that where appropriate, the wishes of parents are considered and met.

5. The HSE should ensure that:

- social workers visit children in accordance with the national standards and talk with them in private from time to time
- social workers are always accessible to the children should they need to talk to them
- social workers read children's care files from time to time.

6. The HSEDNE should ensure that one young person is referred to the local aftercare service, has an after care plan developed and an aftercare needs assessment carried out.

6. Care of young people

Standard

Staff relate to children in an open, positive and respectful manner. Care practices take account of the children's individual needs and respect their social, cultural, religious and ethnic identity. Children have similar opportunities to develop talents and pursue interests. Staff interventions show an awareness of the impact on children 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		✓	

Recommendations:

7. The HSE should ensure that no child in this centre is adversely affected by the behaviour of one child and/or staff responses to these behaviours, and that appropriate measures are taken to resolve these difficulties as a matter of importance.

8. The HSEDNE should ensure that external professional guidance is sought by/provided to the centre on the management of one child's behaviour.

9. The HSEDNE should ensure that the centre works with individual children's social workers to determine when an absence should be classified and reported as such.

7. Safeguarding and Child Protection

Standard
Attention is paid to keeping children 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		√	

Recommendation:

10. The HSEDNE should ensure that all child protection concerns are:

- acknowledged
- assessed by placing social work departments
- brought to a conclusion in a short a time as possible.

8. Education

Standard
All children 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		√	

Recommendation:

11. The HSEDNE should ensure that one child receives an education in an appropriate educational setting.

9. Health

Standard

The health needs of the children 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:

12. The HSEDNE should ensure that one child receives the orthodontic treatment they require.

10. Premises and Safety

Standard

The premises are suitable for the residential care of the children 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 partly met the required standard</i>	<i>Practice did not meet the required standard</i>
Accommodation	√		
Maintenance and repairs		√	
Safety		√	
Fire safety			√

Recommendations:

13. The HSEDNE should ensure that any outstanding maintenance requirements are attended to.

14. The HSEDNE should ensure that the centre's roof is not accessible to the children, and that locking the external doors of the centre is formally risk assessed and is for reasons of managing imminent risk and is not routine practice.

15. The HSEDNE should ensure that the centre complies with standard 10.19 and provides written confirmation of this to the Authority as a matter of priority.

4. Summary of Recommendations:

1. The HSEDNE should ensure that the staff team are trained in the recently revised *Children First Guidelines*.
2. The HSE should ensure that:
 - all complaints are dealt with in a timely manner
 - children and parents have confidence in the complaints process
 - the complaints systems and procedures are accessible to everyone.
3. The HSEDNE should ensure that one child's current placement is reviewed to ensure it is for the shortest time possible, and that it continues to be a suitable placement for him/her.
4. The HSEDNE should ensure that:
 - two children have an up-to-date care plan
 - one child's care plan reflects his/her current placement and clearly outlines the placement objectives
 - one child has his/her case reviewed in accordance with the National Standards
 - two children's cases are reviewed immediately and following on from that, on a monthly basis in accordance with national policy on the placing of children 12 years and under in residential care
 - care planning is an inclusive process that where appropriate, the wishes of parents are considered and met.
5. The HSE should ensure that:
 - social workers visit children in accordance with the national standards and talk with them in private from time to time
 - social workers are always accessible to the children should they need to talk to them
 - social workers read children's care files from time to time.
6. The HSEDNE should ensure that one young person is referred to the local aftercare service, has an after care plan developed and an aftercare needs assessment carried out.
7. The HSE should ensure that no child in this centre is adversely affected by the behaviour of one child and/or staff responses to these behaviours, and that appropriate measures are taken to resolve these difficulties as a matter of importance.
8. The HSEDNE should ensure that external professional guidance is sought by/provided to the centre on the management of one child's behaviour.
9. The HSEDNE should ensure that the centre works with individual children's social workers to determine when an absence should be classified and reported as such.
10. The HSEDNE should ensure that all child protection concerns are:
 - acknowledged
 - assessed by placing social work departments
 - brought to a conclusion in a short a time as possible.

11. The HSEDNE should ensure that one child receives an education in an appropriate educational setting.
12. The HSEDNE should ensure that one child receives the orthodontic treatment they require.
13. The HSEDNE should ensure that any outstanding maintenance requirements are attended to.
14. The HSEDNE should ensure that the centre's roof is not accessible to the children, and that locking the external doors of the centre is formally risk assessed and is for reasons of managing imminent risk and is not routine practice.
15. The HSEDNE should ensure that the centre complies with standard 10.19 and provides written confirmation of this to the Authority as a matter of priority.