



Inspection of a Children's Residential Centre in the HSE South 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), South Area (SA) under Section 69 (2) of the Child Care Act 1991. Orla Murphy (Inspector) carried out the inspection over two days from the 28th to the 29th of June 2011.

The centre was located in the outskirts of a town, in a mature, quiet residential area. It was a four bed-roomed detached house, with a large rear garden and a front drive way. The area was well serviced with public transport, and there were adequate local facilities including a church, schools and shops in the immediate vicinity.

The purpose and function of the centre is to provide short to medium term care for young people aged 13 – 18 years of age. The centre provides placements for a mixed gender group with a maximum of three young people at any one time. At the time of inspection there were three young people living in the centre.

1.1 Methodology

The judgements of the inspector are based on an analysis of findings verified from more than one source of evidence gathered through observation of practice, interviews with young people, relevant HSE staff members and managers, examination of records and documentation and a viewing of accommodation.

The following documents were available to the inspector during this inspection:

- policy and procedure documents
- copies of child protection report forms
- a copy of the register
- copies of complaints made by young people
- young people's care plans and care files
- young people's census forms
- administrative records
- HSE monitoring reports
- previous inspection reports and follow-up report
- 3 young person's questionnaire
- 3 questionnaires completed by social workers
- fire safety certificate
- staff census form
- a sample of staff files
- staff training records

During the course of the inspection the following people were interviewed:

- acting centre manager
- 1 acting child care leader
- 2 child care workers
- child care manager (with responsibility for residential services)
- HSE monitoring officer
- One young person

Telephone interviews were carried out with two social workers.

1.2 Acknowledgements

The inspector wishes to acknowledge the assistance and cooperation of the young people, staff members and other professionals who participated in this inspection.

1.3 Management structure

The external centre manager and deputy manager are acting positions and have responsibility for three residential centres in the local area. The acting centre manager reports to the child care manager who has line management responsibilities. The day-to-day operations within the centre are the responsibility of an acting child care leader who reports directly to the acting centre managers.

1.4 Data on young people

On the first day of fieldwork the following young people were residing in the centre:

Young Person	Age	Legal Status	Length of Placement	No. of previous placements
# 1 Male	13	Care order	1 year 11 months	1 previous placement
# 2 Female	16	Voluntary agreement	1 year	2 foster care placements
# 3 Male	14	1 year Care Order	4 weeks	1 foster care placement 1 residential placement

2. Summary of Findings

The centre was last inspected in September 2008 and a follow-up inspection took place in January 2009. The majority of the recommendations from these inspections were met.

The inspector spent time interacting with all of the young people throughout this inspection. Only one young person agreed to meet with the inspector privately but all three young people completed questionnaires regarding their opinions and experiences in the centre.

The centre was one of three centres in the service, all located in the same geographical area. The manager and deputy manager had overall responsibility for the three centres and an acting child care leader managed each individual centre on a day-to-day basis.

There had been staffing deficiencies in the wider service since mid 2010 arising from a combination of staff leaving posts and a national moratorium on recruitment within the Health Service Executive. In the year prior to the inspection the centre had been closed most weekends as the two young people living in the centre went home every weekend. On these occasions staff were released to work in the other residential centres in the service to combat staff shortages.

Historically, the centre had only catered for boys but this had changed in the year prior to the inspection. Within that time two girls had been admitted. This represented a change for the staff team but all acknowledged that this had been an overall positive change for the centre and the group dynamic.

In this inspection, the the inspector found that the staff team cared for, and were committed to the wellbeing of the young people living in the centre. They were responsive to them and the inspector observed very positive interactions and relationships between staff and young people. Staff had particular skill in diffusing negative interactions between young people.

The inspector found that staff managed the behaviour of young people well and there were no unauthorised absences, significant events or physical restraints in the year prior to the inspection. The routines of young people were well balanced with structured and unstructured activities, but the inspector found that bed times were late which, when young people's behaviour was disruptive at those times, led to even more reduced sleep.

The inspector found the administrative and care records in the centre were of a high standard. They were professionally written, comprehensive and easily cross referable. There was clear evidence of the records being reviewed by external managers and social workers. There was an excellent system regarding young people's access to their records. All documents written by external professionals were cleared at the time of the receipt of the document as to whether the young person could have access to them or not. A form outlining the consent (or not) of the author was then attached to the document.

The inspector found that complaints were responded to swiftly by staff and recorded clearly. In one instance, the inspector found that a complaint should have been explored as a potential child protection issue, but overall staff displayed a good understanding of safeguarding and child protection.

Practices examined that met the required standard

Purpose and Function

The centre's purpose and function stated that it offered mixed gender placements for up to three young people between the ages of 13 to 18 years. At the time of inspection there were three young people aged 13, 14 and 16 years respectively. Placements were designed to be short to medium term in length, with an eventual aim of the young person returning home or to a foster care placement. One young person had only recently been admitted, while the two other young people had lived in the centre for significantly longer. All of the young people came from areas outside the immediate region. Referrals to the service are submitted to an Admissions Committee. The centre had been closed at weekends in the past year as the two young people resident went home every weekend. At the time of the inspection, these young people were continuing to return home every weekend but the centre was starting to remain open to accommodate the newly admitted young person.

Both management and the supervising social workers were satisfied that the current placements were suitable and met the needs of the young people. One young person raised a desire to live nearer their home town through the questionnaire submitted to the inspector.

Register

This standard was met. The inspector examined the register which showed that there were three admissions to the centre and two subsequent discharges in the year prior to the inspection. The register recorded the name, dates of birth/admission/discharge, next of kin details, social work details and the legal status of each child. The inspector also advises that the location of archived files of young people that have been discharged is recorded in the register, to aid future requests by young people who may wish to access their files.

Monitoring

This standard was met. The HSE Monitoring Officer visited the centre 4 times in the year prior to the inspection and produced reports from these visits. He highlighted concerns regarding the staffing deficiencies in the wider service in 2010. He informed the inspector that he found staff were responsive to his visits and recommendations. He was satisfied that he was kept informed of significant events (when they occurred) in a timely manner. He was also satisfied that he was informed of any child protection concerns regarding young people. He interviewed staff and young people during his visits and advised the inspector that the staff team had developed positive relationships with young people who had complex needs and that one young person in particular had become much more settled. The inspector found evidence on several records that the monitoring officer had reviewed records such as complaints, the register, care files and other documents.

Management and Staffing

This standard was met. The acting child care leader reported to, and received, formal supervision from the acting centre manager. The acting centre manager (and acting deputy manager) managed three residential centres in the locality. The manager reported to the child care manager who had responsibility for all the children's residential services in the area. The acting centre manager and acting deputy were based in an office in the nearby town. They supervised staff, attended staff meetings and visited the centre weekly

or more often if required. Day-to-day management of the centre was the responsibility of the acting child care leader.

The inspector found the centre was well-managed and had clear lines of accountability. The acting child care leader had been in post for three years and felt well supported by both the deputy and centre manager. Staff informed the inspector they were well supported by the acting child care leader on a day-to-day basis.

The centre had an experienced and dedicated staff team. They were well qualified and many had worked in the centre since it opened. The core staff compliment for the centre was six full-time and one part-time staff members comprising social care workers and one child care leader. A remaining part-time child care worker post was filled by relief staff on an 'as required' basis. There had been significant staffing shortages in 2010 within the wider service. This centre wasn't as affected by the wider shortages as the young people in the centre went home every weekend. Staff from this centre were then deployed to other centres at weekend to provide support.

At the time of the inspection two young people were still going home at weekends, but the most recently admitted young person was remaining in the centre and the staff team remained in place.

The team held 'focus days' to look at areas of work that needed attention and team building. The inspector examined the record of these days and found they were productive and sought to enable the team to reflect on their practise.

The inspector examined a sample of the most recently employed staff and found they had the appropriate references on file. All had written confirmation from the HSE personnel department that satisfactory Garda clearances had been returned for them.

Notification of significant events

This standard was met. The monitoring officer and the supervising social worker were satisfied that they received full and prompt notification of all significant events concerning young people living in the centre. The inspector examined notifications on files and found they were detailed and completed in full. Events concerning violent incidents and restraint were also reviewed by the Therapeutic Crisis Intervention (TCI) monitoring group. However, there had been no such incidents in the year prior to the inspection.

Administrative files

This standard was well met. The inspector examined a range of administrative records and found them to be of a very high standard. Records were clear, comprehensive and could be clearly cross referenced with related documents. The acting centre manager and acting deputy centre manager monitored records regularly.

Complaints

This standard was met. The centre had a complaints procedure which identified different stages of complaints and the action required in respect of these. An appeal process was also included in the procedure. There were six complaints made by young people in the year prior to the inspection. These were all eventually resolved to the young people's satisfaction. All young people who completed a questionnaire stated they were fully aware of how to make a complaint and were confident that any complaint they made would be looked into by staff. The young person who met with the inspector stated he could identify several staff members that he could discuss concerns or complaints with and was

satisfied that they would be properly concluded. One complaint should have been referred to the Social Work Department to be considered as a child protection report (see *Safeguarding and Child Protection* section of this report). As a complaint, it was investigated and recorded in detail.

Access to information

This standard was well met. The inspector found that there was an excellent system regarding young people's access to their records. All documents written by external professionals were cleared at the time of the receipt of the document as to whether the young person could have access to them or not. A form outlining the consent (or not) of the author was then attached to the document. If the young person was not allowed to see the document then the author was required to describe the reasons why, on the form attached to the document. A future review date of this decision was also requested on the form. All young people that were consulted with by the inspector were fully aware of their rights to read their files and their logs and all stated they had seen their care plans. The young people had also chosen to read their logs at particular times during their placements. Staff interviewed by the inspector also had a clear understanding of young people's rights in this regard.

Social Work Role

This standard was met. The inspector was unable to meet with the social workers as they had prior commitments; however, all had completed questionnaires prior to the inspection and telephone interviews were conducted with two social workers. Social workers felt the young people were safe and well cared for. They also commented on the staff commitment to the young people and described them as "strong advocates" for the young people in their care. The young people living in the centre all confirmed they met with their social workers monthly in the centre. Social workers attended regular planning meetings in the centre. There was evidence that the social workers regularly read records in the unit and were kept informed of all significant events relating to the young people.

All of the young people had up-to-date care plans and all confirmed in their questionnaires that they had seen their plans and were involved in their care plan reviews. All of the young people expressed a strong desire to return to their previous placements and in the case of two young people this was being planned. The remaining young person had only recently moved to the centre and needed a period of stability and support before developing a long term plan.

Children's case and care records

This standard was well met. The inspector found that the young people's care records in the centre were of a high standard. They were professionally written, comprehensive and easily cross referable. The records were respectful in tone and identified the young people's positive behaviours, events and achievements in addition to more challenging incidents. Records examined provided detailed information regarding young people's appointments with external professionals, providing a comprehensive account of interventions and work undertaken with young people.

Individual care in group living

This standard was met. The inspector found that staff valued young people and recognised their attributes, achievements and skills in addition to acknowledging their needs and behavioural difficulties. Staff spoke warmly about young people and held them in high regard. The inspector found that daily logs and reports were written in a positive and professional way. Staff supported young people extensively to host and visit their

friends and family outside of the area by providing transport, collecting people from public transport and facilitating visits. One young person was very involved in clubs and groups in the local community. Another young person was very reluctant to engage with local activities, preferring to stick to groups they had attachments to in their area of origin. The inspector found that staff had consulted with young people individually, and had developed a full range of activities for the summer including several camping trips, biking, outdoor trips to the beach, forests, parks and activity centres. One young person informed the inspector that they felt staff “really like me even though I make them mad sometimes”. Staff were fully aware of the young people’s wishes for their long term futures. Staff were also very aware of the skills and strengths of the young people, and displayed concern regarding some of their more complex needs. The inspector observed the young people being encouraged regarding their interests and their individuality. Two young people were very engaged in cooking meals throughout the inspection and received lots of encouragement regarding this. All of the young people identified a trusted adult that they could go to if they were worried or upset through discussions with the inspector or in the questionnaires returned.

Absence without authority

This was met. There were no absences by young people in the year prior to inspection. Repeated absences of any young person would trigger meetings between the HSE and Gardaí under the children missing from care joint protocol between the Gardaí and the HSE, *Children Missing from Care, A joint protocol between the Garda Síochána and the HSE*. All relevant external parties such as the HSE monitoring officer, Gardaí, the social worker and parents are advised of these absences in line with the regional policy.

Health

The inspector found that very detailed records were maintained in the centre regarding the health of the young people resident in the centre in the last year. Records of young people’s immunisations and health history were held on each file. GP, dental and hospital appointments were recorded and staff attended appointments with young people. Records were maintained of contact with health professionals and staff advised parents of health issues. Staff administered medication to young people where required and satisfactory records were maintained of these. Medication was stored in a locked cabinet.

Education

This standard was met. Both young people that had been resident in the centre in the year prior to the inspection had successful school placements in the region and were supported and encouraged by staff to maintain those placements. The most recently admitted young person had no school placement when he moved to the centre four weeks before the inspection. As this was close to the summer break, staff were in the process of applying for a school placement to begin when the school term resumes. The inspector found detailed records on young peoples care files to demonstrate staff had regular contact with schools, resolving any issues as they arose and attending functions such as parent teacher evenings. Parents were kept up-to-date with young people’s progress in school including examination achievements and any concerns that arose.

Practices that met the required standard in some respects only

Supervision and support

This standard was mostly met. The supervision of social care staff is shared by the acting deputy centre manager and the acting child care leader. Staff informed the inspector they received regular, formal supervision every four to five weeks. The inspector examined a sample of supervision records which were clear and detailed and these confirmed the regularity of the supervision. Because of the movement of staff around the three centres in the service, the acting child care leader was supervising some staff that were based in other centres. This was not helpful as she did not have the ability to observe their practice on a day-to-day basis. The inspector recommends the HSE SA review the supervision structure of the service as a whole to identify caseloads of supervisors and ensure they are more aligned to the centre those they supervise work in.

Team meetings are held fortnightly and the inspector examined the minutes of these meetings. The agenda for meetings were child centred and well attended given the small core number of staff. On average, 6-8 staff attended each meeting. The inspector found there had been nine team meetings since January 2011.

Managing behaviour

This was mostly well met. The inspector was advised that historically, the team had experienced extremely challenging and violent behaviour with some young people. The behaviour of the young people resident at the time of the inspection was in some ways complex, but more emotionally challenging than violent. The inspector observed staff managing this behaviour very well and staff had clear responses to young people. All young people had an Individual Crisis Management Plan (ICMP) which detailed the agreed and appropriate responses to behaviours displayed by the young people.

The inspector found that the bedtimes of young people were quite late, particularly for the youngest person in the centre. Bedtimes also seemed to trigger negative behaviour, so the time young people went to sleep was extended further. This meant that the young person was receiving even less sleep than intended by the bedtime. The centre had waking night staff but this is not a reason to allow young people to remain up late and consequently be tired or late for school the following day. The inspector recommends the centre reviews the bedtime routine of young people to ensure they have adequate settling time and sleep at night.

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

All staff were fully trained and up-to-date in the approved behaviour management system TCI (Therapeutic Crisis Intervention).

Safeguarding and Child protection

The inspector found that this standard was mostly met and staff had a good understanding of child protection and safeguarding issues. The inspector was provided with details of one child protection report made by staff to social work departments in the year prior to the inspection. There was clear evidence of staff communicating with the relevant parties regarding this concern and its outcome. The inspector found that another incident that had been processed as a complaint should have been brought to the attention of the social work department to be considered as a potential child protection report. The inspector recommends that this incident is raised with the social work department for consideration without delay. All staff had received training in and followed

Children First Guidelines 1999 and the centre's child protection policy was based on these guidelines.

Emotional and specialist support

This standard was met in part. The inspector was told that there had been challenges historically in filling the psychologist post in the regional service. A half time post was filled since October 2010. A half time post remains vacant. Prior to this the psychology post was vacant for 18 months. The additional half time post could not be recruited, reportedly due to the moratorium on recruitment in the HSE nationally. The current situation meant that a comprehensive and consistent service could not be provided to residential services in the region. This had a direct impact on the centre as there was limited support available to young people and staff. The inspector recommends the HSE SA review psychology supports for the region and addresses any shortcomings as a matter of urgency.

The inspector was informed that all the young people currently resident received varying levels of psychology support in accordance with their needs. However, if increased demands arose for future residents of the service, it is unlikely that the current provision could meet those demands.

Premises and safety

The centre was located in a mature estate on the outskirts of a large town. It was homely and decorated to a good standard internally. Each young person had their own bedroom which they had personalised to their own tastes. However, externally, it appeared neglected and this was compounded by the good condition of the neighbouring properties. The exterior is in urgent need of redecoration, brickwork repair and several dead trees/shrubs require removal. The centre should be in keeping with neighbouring properties and not stand out as being different and the inspector recommends the HSE SA attend to these issues immediately. The inspector examined records of maintenance requests. Some of these were not responded to promptly and the requests were made repeatedly but it was not clear from the record where requests had been repeated, and the original date the repair was requested. The inspector recommends that the HSE SA review the record and its structure to make it clearer where requests have not been responded to and necessitated a repeated request.

Fire drills were held regularly and fire fighting equipment was serviced and checked on an annual basis. This was up-to-date at the time of this inspection. There was written confirmation from a qualified architect/engineer that the centre complied with fire and building regulations as required by standard 10.19.

Practices that did not meet the required standard

There were no practices that did not meet the required standard.

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 met the required standard in some respects only</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 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	√		

Recommendation:

1. The HSE SA should ensure that the supervision structure of the service is reviewed as a whole to identify caseloads of supervisors and ensure they are more aligned to the centre those they supervise work in.

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

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	√		

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	√		
Social work role	√		
Emotional and specialist support		√	
Preparation for leaving care		Not assessed	
Aftercare		Not assessed	

Recommendation:

- The HSE SA should review psychology supports for the region and address any shortcomings as a matter of urgency.

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 SA should ensure the centre reviews the bedtime routine of young people to ensure they have adequate settling time and sleep at night.

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		√	

Recommendation:

- The HSE SA should ensure that the incident identified during the inspection is raised with the social work department for consideration without delay.

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	√		

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	√		

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	√		

Recommendations:

5. The HSE SA should ensure that the exterior of the centre is redecorated, and that the brickwork, and several dead trees/shrubs are attended to immediately.
6. The HSE SA should ensure that the maintenance record and its structure are reviewed to make it clearer where requests have not been responded to and necessitated a repeated request.

4. Summary of recommendations

- 1.** The HSE SA should ensure that the supervision structure of the service is reviewed as a whole to identify caseloads of supervisors and ensure they are more aligned to the centre those they supervise work in.
- 2.** The HSE SA should review psychology supports for the region and address any shortcomings as a matter of urgency.
- 3.** The HSE SA should ensure the centre reviews the bedtime routine of young people to ensure they have adequate settling time and sleep at night.
- 4.** The HSE SA should ensure that the incident identified during the inspection is raised with the social work department for consideration without delay.
- 5.** The HSE SA should ensure that the exterior of the centre is redecorated, and that the brickwork, and several dead trees/shrubs are attended to immediately.
- 6.** The HSE SA should ensure that the maintenance record and its structure is reviewed to make it clearer where requests have not been responded to and necessitated a repeated request.