



Health Information and Quality Authority

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

A

CHILDREN'S RESIDENTIAL CENTRE

IN THE

HSE SOUTHERN AREA

INSPECTION REPORT NUMBER: 450

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Centre ID Number: 364

ADDRESS: Health Information & Quality Authority, Social Services Inspectorate,
George's Court, George's Lane,
Smithfield, Dublin 7
PHONE: 01-8147400 FAX: 01-8147499
WEB: www.hiqa.ie

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1. Introduction

The Health Information and Quality Authority (HIQA), Social Services Inspectorate (SSI) carried out an unannounced inspection of a children's residential centre in the Health Services Executive Southern Area (HSE SA). Kieran O Connor (lead inspector) and Orla Murphy (co-inspector) conducted the inspection under Section 69 (2) of the Child Care Act 1991, on the 13th and 14th of December 2010.

The centre was located in a large attractive detached house with a large back and front garden in the country side near a large town. It had easy access to local amenities such as schools, shops, sports fields and good public transport.

Following a reconfiguration of children's residential services in the area since the last full inspection the centres purpose had changed from mixed gender to boys only. Its purpose and function currently is to provide two full time residential care placements and four respite placements for boys aged between 12 and 17 years on admission.

There was a follow up inspection by the SSI in October 2010. Inspectors found that of the eleven recommendations made in the inspection report (ID 440), six recommendations were met in full and five were met in part. In this inspection, Inspectors found that all but one recommendation in relation to property maintenance had now been met.

At the time of inspection there were six young people registered in the centre. There was one child living full-time in the centre, four young people availing of respite care in the centre and one young person registered for respite care but had not availed of this service yet at the time of this inspection.

Inspectors found this centre was providing a good service for the young people. The centre had gone through a difficult period in the past 12 months in relation to the management of some aspects of the young people's behaviour but there had been significant improvement the time of this inspection primarily because young people in the centre now don't display frequent challenging behaviour. The staff had experienced some serious difficulties and while more work needed to be done in the skill of managing behaviour, the team remained focused and resilient. The manager and staff presented as experienced and dedicated providing good quality care. There had been communications difficulties in the past with between the social work department and the centre but this had been improved and inspectors found good partnership approach now. While this report outlines a number of recommendations in relation to purpose and function, aspects of management, children's rights, behaviour management, monitoring, and premises, Inspectors found overall there was a warm, caring and relaxed, homely atmosphere in the centre.

1.1 Methodology

Inspectors' judgements are based on an analysis of findings verified from several sources including: evidence gathered through observation of practice, examination of records and documentation, an inspection of accommodation an interview with young person, two parents of two children, the centre manager, a social care leader, a social care worker, two social workers, and the acting child care manager. Telephone interviews were carried out with another young person, two parents of two of the children and a psychologist.

The inspectors had access to the following documents during the inspection:

- The centre's statement of purpose and function
- The centre's policies and procedures
- The centre register
- The young people's care plans and care files
- Administrative records
- Details of unauthorised absences for previous twelve months (2)
- Details of physical interventions for the previous twelve months(7)
- Details of critical incidents for the previous twelve months (73)
- Questionnaires completed by two young people
- Questionnaire completed by two social workers
- HSE Monitoring Officers report.
- Monitoring reports carried out by external manager

1.2 Acknowledgements

The inspectors wish to acknowledge the co-operation of the young people, parents, staff of the centre, and all other professionals involved in this inspection.

1.3 Management structure

The centre manager reported to the acting child care manager who in turn reported to the local general manager.

14. Data on young people

On the first day of fieldwork the following young people were registered in the centre, listed in order of length of placement:

Young Person	Legal Status	Length of Placement	No. of previous placements
# 1 (boy)	Care order	18 months	1 Residential Placement
2 (boy)	Voluntary Care	8 months	1 Foster Care 1 Residential Care
# 3 (boy)	Voluntary Care	8 months	1 Foster Care
*4 (boy)	Voluntary care	7 months	None
*5 (boy)	Voluntary care	2 months	None
*6 (boy)	Voluntary care	3 weeks	1 residential care

* respite care

2. Summary of Findings

Practices that met the required standard

Care of young people and group living.

The standard on the care of the young people was met. There was written policies on all aspects of the care of young people. In general, inspectors found that care practices were good and both young people interviewed by inspectors said they felt cared for in the centre. The relationship between the staff team and the young people was good. One young person said that the staff in the centre were kind, fun and they listened to him. He said he felt safe and cared for living in the centre. Both young people told inspectors that if they had a problem they would discuss it with the manager and it would be "sorted because he was sound". One young person had made a complaint in the past and he was pleased with how quickly and effectively it was dealt with by the staff team. He said that he would prefer to be at home but he told inspectors that staff try to make the centre "a second home". He could name at least two members of staff who he was very fond of and who he would talk to if he was worried about anything. The young people told inspectors that they each had a room to themselves which was spacious and they could personalise it with photos and favourite bands. Another young person told inspectors that the staff took an interest in him and his future.

Inspectors found the provision of food was very good. It was varied and nutritious. There was a practice of staff and young people having their meals together where practicable. Members of the staff team interviewed told inspectors that birthdays and achievements were celebrated in the centre.

Inspectors found from a perusal of centre files that that there was an emphasis on focused work with young people. There was evidence that the care staff managed the key working role in a creative way and coordinated inputs from other agencies well. There was a commitment to involving young people in activities and leisure pursuits such as football, kickboxing and music.

Training and Development

All the staff team had the required qualifications. Management and staff spoke positively of the local training department. Staff had received training in core aspects such as *Children First; National Guidelines for the Protection of Children*, first aid, drug awareness, preventing self harm, Therapeutic Crisis Intervention (TCI), and fire safety.

Notification of significant events

The standard on notifications was met. There was a new standardised method of recording and reporting significant incidents through out the HSE SA. Records of these notifications were maintained in the centre. External professionals interviewed were satisfied that notifications were made in a prompt manner.

Contact with families

Inspectors found from interviews with parents, young people and the staff team that family contact was very good. Both parents said they saw their children regularly and were always made feel welcome in the centre and they were kept well informed about their children's progress. There was a well planned schedule of visits for access which was adhered to by the staff team. Parents told inspectors that they were always treated with respect by the staff team and their view was listened to on a casual day to day basis and at more formal care review meetings. It was centre policy that parents receive minutes of statutory reviews. They described the manager and staff team as very caring towards their children.

Register

The centre had a register which contained the information required in the Child Care (Placement of Children in Residential Care) Regulations 1995 Part 1V Article 21.

Insurance

The centre provided inspectors with documentary evidence that they were adequately insured.

Staff supervision and Support

The standard on supervision was met. The centre had a written policy on supervision. Generally formal supervision was seen by the staff team as supportive and a vehicle for accountability. The centre manager was committed to formal supervision and it was occurring in practice. It was contracted and well organised. The manager held the view that it was essential for accountability, learning and professional development. He in turn received monthly formal supervision from his line manager the acting child care manager.

Other supports

Team meetings were occurring on a fortnightly basis and were well attended. The centre also had the services of a psychologist who met with individual children and advised the staff team on the psychological needs of the young people in their care.

Education

The standard on education was met. Inspectors found that the staff team and management placed a high value on education as a vehicle for enhancing self esteem and securing the young peoples future. The centre had a comprehensive written policy on education. Inspectors found evidence that school attendance was maintained in the great majority of cases. The centre manager told inspectors that staff ensured that this occurred either by bringing the young people themselves or ensuring that the social workers had a plan in place for this to occur. One young person told inspectors that a key rule in the centre was that you had to attend school. Inspectors found that where difficulties occurred the education welfare service was informed as appropriate. When a young person was not attending school prior to placement it was centre policy to do individual work with the young person and proactively encourage the young person to return to school in conjunction with his supervising social worker. Inspectors found that in another case because of a behavioural issue at school, a young person lost his school place. The manager in conjunction with the social worker made contact with the school and offered support and successfully re-negotiated a return to school for this young person. This is good practice. At the time of inspection all but one of the young people registered at the centre were in education or training. This young person had obtained a place in a special school but was not attending at the time of inspection. This was being addressed by the centre staff in partnership with his social worker. Inspectors commend the centre staff for their approach to the provision of education.

Fire Safety

There was written confirmation from a qualified engineer that all statutory requirements relating to fire safety and building control have been complied with in accordance with standard 10 of the standards. Regular fire drills were carried out and recorded in the fire register. Daily safety checks were completed by staff. A quarterly check of fire fighting equipment and the alarm system was carried out by an external service provider.

Practices that met the required standard in some respect only

Standards were partially met in relation to purpose and function, monitoring, care records, aspects of; management and staffing, health, children's rights, behaviour management, child safety and maintenance of the property.

Purpose and Function

In the previous full inspection, the statement of purpose and function had described the centre as a residential facility of the HSE Southern area offering short to medium term accommodation (up to six months) for five young people, boys and girls aged 12 to 16 years on admission. However, the centre had now changed its purpose and function following a reconfiguration of services in the area to provide two full time residential care placements and four respite placements for boys and was also available for respite care.

The young person in the centre at the time of inspection found the influx of short term respite placements in the centre unsettling. Inspectors judged that the broad and all encompassing nature of the purpose and function make it difficult to gate keep admissions in the centre. This was evidenced by the fact that in the year prior to inspection there had been five unplanned discharges from the centre. Inspectors advise that centres work best where there is a clearly defined and limited purpose and function. Inspectors recommend that the purpose and function of the centre is reviewed and a report of forwarded to SSI within three months of the publication of this report.

Management and Staffing

The standard was mostly met. There were 13.5 whole time posts comprising a qualified and experienced manager, five social care leaders for four posts, 10.5 social care workers, one house keeper, and an administrative staff for a 0.5 post. The manager was an experienced professional who displayed an in-depth knowledge of the young people registered in the centre. The manager was described by two young people as sound and easy to talk to. He was well organised and had good systems in place that assisted in the management of the centre. The staff team interviewed by inspectors said they would like to be more informed about the manager's external responsibilities such as committee work, HSE meetings and developing HSE policy. Inspectors judged that some aspects of communication between the manager and the staff team needed to improve. Notwithstanding this staff interviewed told inspectors that the manager was supportive and provided good leadership and direction. Inspectors found that some aspects to the management of behaviour needed to be improved. This will be further explored in the behaviour management section.

Inspectors found that all the team were professionally qualified. They were dedicated and committed to providing a good service to young people with at times complex needs. They presented as an experienced stable team with an average length of service of over seven years. External professionals described the staff team as warm, caring and committed to the children and young people in their care. Inspectors were told that they were skilful in dealing with some of the young people's complex needs in the past few months.

Children's care records and administrative files

The standard on care and administrative records was mostly met. The content and organisation of care files log books and other records were of an exceptionally good standard. Inspectors found there was no copy of the care agreement in two of the files and advise that they be placed in the care file. All required records and registers were appropriately used and up to date. Overall, there was a coherent filing system. They were extensive and organised in a way that facilitated ease of access for effective management and accountability. Two of the care files did not have an up to date care plan. The files had copies of medical examination if required, care reviews, birth certificates and other documentation required by regulation.

Monitoring

The standard on monitoring was met in part. The monitoring officer had visited the centre in the year prior to inspection and met with the young people and the staff team. He wrote reports based on his analysis of a self audit questionnaire completed by the centre manager. He was notified of all significant events. Staff interviewed by inspectors found him supportive and his advice valuable. The monitoring officer had issued a report on 9th July 2010 with seven recommendations. Inspectors judged that behaviour management needed to be further addressed. At the time of inspection five of these recommendations had not been met. Inspections recommend that these recommendations are implemented without further delay.

Behaviour management and unauthorised absences

The standard on behaviour management was met in part. Inspectors found that by and large the young people were well cared for and that the staff related well to them. Staff interviewed told inspectors that a consistency in the team approach and a good relationship with the young people and an understanding of them and their families were the key factors in managing behaviour. Sanctions were minor and proportional. There was an emphasis on giving the young people the opportunity to develop positive relations which assisted them in learning skills of

sharing, negotiating and cooperation. Inspectors found that this approach had evidently and commendably working for some of the young people in the past year.

However, inspectors found that there was an overemphasis on this “positive relations aspect” in managing behaviour and it frequently was not working for a number of young people in the past year. As a result, young people felt able to engage in risk taking behaviour within the centre repeatedly. For example inspectors found incidents in the past year where the staff office was broken into and prescribed medicine stolen and used to self harm, other incidents of self harm, property seriously damaged, injuring inflicted on staff, severe verbal abuse towards staff, and bullying of other children. In one case bullying behaviour continued sporadically for three months. Inspectors judged that at times it appeared that the young people were in charge rather than the adults.

Inspectors are of the view that it is important all young people are given good guidance on respectful relations with both staff and other young people. Bullying between young people is not acceptable at all. The staff team needed to be more assertive, using good authority more appropriate to an adult child relationship. All the staff team had been trained in TCI in all its aspects up to and including restraint. There were no physical restraints in the year prior to inspection. There had been seven physical interventions involving two young people. These are interventions such as standing between two young people to prevent an assault. Inspectors found these were risk assessed of short duration averaging less than one minute. The staff team had a practice not to restrain. However, given the challenging behaviour of some of the young people that placed themselves and others at risk, inspectors recommend a review of the practice of no physical restraints as part of TCI in the centre.

While staff told inspectors had had experienced difficulties and at times were under considerable pressure, inspectors observed positive interactions between them and the young people. However, further development and support in responding to challenging behaviour was needed.

There had been two instances of unauthorised absence involving two young people both aged 17 years in the year prior to this inspection. The centre maintained a record of instances when young people went missing from the centre. The centre used the HSE Gardai Siochana protocol for reporting children missing and measuring levels of risk associated with these instances. These absences were overnight in relation to one young person and two nights in relation to the other young person. Inspectors found that appropriate remedial action was taken by the staff team in consultation with the social workers and unauthorised absences did not recur.

Vetting

All the staff team had been garda vetted and all but one the staff team had the required three references. Inspectors perused a sample of staff personnel files and found that these files met the required standard. Inspectors recommend that a third reference is acquired in one case.

Children's Rights

The standard on children's rights was mostly met. Young people had been informed about their rights on admission. The young person told inspectors that generally they were consulted about all aspects of his life and encouraged to give his views at care plan review meetings. They were consulted about school and leisure activities. They were also involved in drawing up a daily menu and could choose their own cloths and interests. The centre facilitated regular young peoples meeting. Issues raised by the young people were discussed at team meetings on a fortnightly basis and feedback was given to the young people.

Inspectors found in the main that the young people were confident that their complaints about matters in the centre would be taken seriously and dealt with effectively. He told inspectors had made a complaint and the manager had resolved it quickly.

Young people and the staff team were aware that young people could read their daily log and their own case file but one young person believed he would have to give a number of days notice. Inspectors advise this miscomprehension is corrected. It was good centre practice to ensure that the key worker did preparatory work with the young person. This needed to be discussed with young people again. One young person was not aware of the organisation; *The Irish Association of Young People in Care (IAYPIC)* who are inter-alia an advocacy group for children in care and he would like to meet them. Inspectors recommend that IAYPIC are invited to visit the centre.

The young people did not have access to the internet in the centre. One young person told inspectors that he would like internet access, as all his friends have this access. Inspectors recommend a review of centre policy in relation to access to the internet in the centre. There was a written policy in the centre addressing the spiritual needs of young people as required by the regulations and the young people were invited to a religious service of their choice once a week.

Social work and care planning

The young people had social workers who visited them frequently and regularly and saw them privately in all cases. There had been an issue of inter-professional difficulties between the social worker service and the centre that was subject to a recommendation in the last SSI inspections in 2009 and October 2010. This had now been addressed through ongoing meetings between the social work department and centre staff. Social worker told inspectors that there was now a high level of communication with centre staff. Inspectors found there was a good level of inter-professional work and interagency cooperation between the centre and social workers. Two social workers interviewed told inspectors that the centre team keep them well informed about all aspects of the young peoples care. They felt young people were safe in the centre. Both of the young people interviewed said they valued contact with their social workers and felt the social workers cared about them. They both said they would talk with their social workers if they had any worries. However, inspectors were concerned to find that in the recent past one very vulnerable young person had a succession of three supervising social workers which is contrary to best practice. Four of the young people had comprehensive care plans and they were regularly reviewed. There was evidence that young people and their families were consulted in the drawing up of the care plans. There had been concerns in the past two inspections about social workers not reading file and this was subject to recommendations in the past. On this occasion inspectors found that files are now read, practice is commented in written form on the file and signed by the respective social worker. This is very good practice.

Safeguarding and child protection

The manager and members of the staff team interviewed by inspectors had a good knowledge of centre policies and national guidelines on child safety and protection and were vigilant and clear about how they would act in the event of concerns about the safety of children. In the last inspection follow up in October 2010 inspectors found that there had been forty three child protection notifications submitted to the social work department between June 2009 and July 2010 relating to seven children. The majority of those concerns related to alleged or suspected inappropriate behaviour by the children. As stated previously, this highlighted poor management of risk taking behaviour by young people within the unit. Staff relied on relationships with young people to manage this behaviour and it was not effective. The inspector was furnished with copies of the standard notification forms. Several had been

acknowledged by the social work department but there was no evidence on file of the status of each of these notifications. Given the number of notifications made and the uncertainty as to their status, the inspector wrote to the Local Health Manager to follow up on this matter. The local health manager responded on 1st December 2010 outlining the status of each notification and confirming that this information was now forwarded to the centre manager. Inspectors perused centre case files and interviewed two social workers involved in the child protection notifications. Inspectors found that outcomes to the notification was now recorded and stored on the case files in the centre. Inspectors found that these notifications were dealt with in line with *Children First; National Guideline for the Protection and Welfare of Children*.

Health and emotional support

The standard on health was mostly met. All the young people had a general practitioner. All had comprehensive medical examination on admission and health records on medical history file were of excellent quality. There were records of immunisations. There were very comprehensive psychological and social history reports on file. The staff team were aware of the health, emotional and psychological needs of the young people. Inspectors found excellent key working sessions on file covering life story work and relationships and sexuality. The centre was ever vigilant about the medical, psychological and welfare needs of young people and the young person was regularly assessed by medical specialists as required in conjunction with his social worker. Food in the centre was varied nutritious and according to one young person, delicious.

Inspector's found that one young person had complex emotional needs and the staff team had sourced specialist advice in this area. Inspectors were told by these external professionals that the staff team were proactive and responsive to advice about the management of these young persons needs. Inspectors acknowledge the skill and commitment the staff team, however given the complex needs of the young person, inspectors recommend a frequent review of this placement to ensure the best possible outcome for this young person.

Premises

The standard was partly met. The centre was located in a large attractive two story detached house with a large back and front garden in the country side on the outskirts a large town. It had easy access to local amenities such as schools, shops, sports fields and public transport. Inside the house was homely. Each young person had their own room which they personalised with pictures of their families and posters of music and sports stars. There were two large gardens front and rear containing an all weather basket ball/tennis court. The court and the grass lawn looked neglected and unkempt and there was broken glass to the side of the garden. Inspectors were told that the glass had been there for a number of months. This is not acceptable. Inspectors learnt that this was cleaned up within two weeks following the inspection visit. The gardens need to be treated like any ordinary family home and should be of the same standard as any neighbouring houses so that young people have respect for and take pride in their surrounding. Inspectors recommend that these matters are addressed immediately and steps are taken by management to ensure this environmental neglect does not reoccur.

Practices that did not meet the required standard

All of the standards in this centre were either met or partly met

3. Findings:

1. Purpose and function

Standard

The centre has a written statement of purpose and function that accurately describes what the centre sets out to do for young people and the manner in which care is provided. The statement is available, accessible and understood.

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

Recommendation:

1. The HSE SA should review the purpose and function of the centre and submit its findings to the Authority within three months of the publication of this report.

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 HSESA should ensure that there is improved internal communication between the manager and some of the staff team evidenced in team meetings and staff supervision.
3. The HSESA should ensure that a third reference is acquired for one member of the staff team.

3. Monitoring

Standard

The Health Service Executive, for the purposes of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements are in place to enable an authorised person, on behalf of the Health Service Executive to monitor statutory and non-statutory children’s residential centres.

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

Recommendation:

4. The HSE WA should ensure that the HSE monitoring officer’s outstanding recommendations are implemented as a matter of priority.

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		√	

Recommendation:

5. The HSE SA should ensure that the policy on access to information is reviewed with staff to ensure that each young person understands what is contained within their care files and outline how they can access information.
6. The HSE SA should that a policy on internet access for young people in the centre is developed and implemented.
7. The HSE SA should ensure that the Irish Association of Young People in Care (IAYPIC) are invited to the centre.

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	√		
Discharge		√	
Aftercare	√		
Children's case and care records		√	

Recommendations:

- 8 The HSE SA should ensure that all young people have a care plan on file in the centre.
9. The HSE SA should ensure that all discharges from the centre are planned.
10. The HSE SA should more frequently review the placement of one young person referenced in the report.

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	√		

Recommendations:

- The HSE SA should review the policy and practices on managing challenging behaviour in the centre and ensure centre staff receive relevant training.

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 policy in relation to bullying among young people in the centre is implemented.

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 (Placement of Children in Residential 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:

- The HSE SA should ensure that the response to routine maintenance is conducted in a timely manner including the maintenance of the gardens and the all weather pitch.

4. Summary of recommendations:

- 1.** The HSE SA should review the purpose and function of the centre and submit its findings to the Authority within three months of the publication of this report.
- 2.** The HSESA should ensure that there is improved internal communication between the manager and some of the staff team evidenced in team meetings and staff supervision.
- 3.** The HSESA should ensure that a third reference is acquired for one member of the staff team.
- 4.** The HSE WA should ensure that the HSE monitoring officer's outstanding recommendations are implemented as a matter of priority.
- 5.** The HSE SA should ensure that the policy on access to information is reviewed with staff to ensure that each young person understands what is contained within their care files and outline how they can access information.
- 6.** The HSE SA should ensure that a policy on internet access for young people in the centre is developed and implemented.
- 7.** The HSE SA should ensure that the Irish Association of Young People in Care (IAYPIC) are invited to the centre.
- 8.** The HSE SA should ensure that all young people have a care plan on file in the centre.
- 9.** The HSE SA should ensure that all discharges from the centre are planned.
- 10.** The HSE SA should more frequently review the placement of one young person referenced in the report.
- 11.** The HSE SA should review the policy and practices on managing challenging behaviour in the centre and ensure centre staff receives relevant training.
- 12.** The HSE SA should ensure that policy in relation to bullying among young people in the centre is implemented.
- 13.** The HSE SA should ensure that the response to routine maintenance is conducted in a timely manner including the maintenance of the gardens and the all weather pitch.

