



Health Information and Quality Authority

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

A

CHILDREN'S RESIDENTIAL CENTRE IN THE HSE North East

INSPECTION REPORT ID NUMBER: 448

**Inspection Date: 11th and 12th January 2011
Publication Date: 22nd February 2011.
SSI Inspection Period: 13
Centre ID Number: 43**

ADDRESS: Health Information & Quality Authority, Social Services Inspectorate,
George's Court, George's Lane, Dublin 7
PHONE: 01-814 7400 FAX: 01-814 7699
WEB: www.hiqa.ie

Contents

1. Introduction

1.1 Methodology

1.2 Acknowledgements

1.3 Management structure

1.4 Data on children

2. Summary of findings

3. Findings

4. Summary of recommendations

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 North East under Section 69 (2) of the Child Care Act 1991, on the 11th and 12th January 2011. The lead inspector was Nuala Ward, and the co-inspector was Michael McNamara. The centre had been inspected last in March 2009 with a follow up inspection in April 2010. These reports can be accessed on www.hiqa.ie as reports numbers ID 300 and 335.

The centre was situated in a detached four-bedroom bungalow in a suburb of Dublin. The centre provided short to long-term residential care for four girls aged between 13 and 18 years. The overall function of the centre was to provide high quality care in a safe environment and support the children in developing life skills and, for those nearing the point of leaving care, in preparation for independent living.

At the time of the inspection there were three girls living in the centre, two sisters and another young person. A fourth young person had moved out of the service in the weeks before the inspection but had not yet been formally discharged from the service. Inspectors found that the centre had an experienced and committed staff team that provided good quality care and stability to the children. Most of the standards were met. The standards that were partly met concerned: supervision, management of bullying by children and response to child protection notifications by the social worker department. The last two are key areas which need to be addressed.

1.1 Methodology

Inspectors' judgements are based on evidence verified from several sources gathered through direct observation, an inspection of the accommodation, interviews and spending time with three children, a parent, the HSE monitoring officer, the centre manager, three centre staff, three social workers, a guardian-ad-litem and the external line manager, and examination of relevant records and documentation, including the following:

- the centre's statement of purpose and function,
- the centre's policies and procedures,
- a health and safety statement,
- a health and safety audit,
- the centre's fire register,
- confirmation of fire safety arrangements,
- confirmation of insurance,
- the centre's register,
- the children's care plans,
- the children's care files,
- administrative records,
- personnel records, including supervision records,
- questionnaires completed by two children.

1.2 Acknowledgements

The inspectors wish to acknowledge the co-operation of the children, parents and HSE managers and staff who participated in this inspection.

1.3 Management structure

The centre manager reported to the alternative care manager who in turn reported to the acting local health manager. Within the centre there were two child care leaders, one of whom was in the acting deputy manager position, and two acting child care leaders.

1.4 Data on children

At the time of the inspection the following children were resident in the centre:

Listed in order of length of placement

<i>Child</i>	<i>Age</i>	<i>Legal Status</i>	<i>Length of Placement</i>	<i>Number of previous placements</i>
# 1 (girl)	15	Interim Care Order	2 years and 5 months	One foster care placement
# 2 (girl)	17	Interim Care Order	1 year and 2 months	Two residential placements
# 3 (girl)	16	Interim Care Order	1 year and 2 months	Two supported lodgings placements
#4 (girl)*	16	Voluntary Care Order	3 months	None

* This young person was living in another centre at the time of the inspection but had not yet been discharged from the centre

2. Summary of Findings

Practices that met the required standard

Care of the children

The children were being well cared for. The individual needs of the children were addressed through specific activities for each young person such as kick boxing and swimming. Inspectors found in interviews with staff members that they had detailed knowledge about the children and their needs. Inspectors observed warm and good humoured interactions between the children and the staff team. Adults that had lived in the centre previously as children maintained regular contact with the staff team. The children had choices in purchasing enough clothes, and they received age-appropriate pocket money. They told inspectors they were happy living in the centre. They spoke highly of the staff team and the manager and could not identify to inspectors anything in the service that needed improvement. There was a strong nurturing ethos towards the children and there was evidence that staff members cared for the children and were concerned about their well being. All of the children told inspectors that would speak to staff members if they had any concerns or worries.

There was variety of food and meal times attended by inspectors were relaxed and informal. The children were supported to attend religious services if they desired and bereavement counselling was provided to one child following the death of a family member.

They were encouraged in their interests and hobbies, and to maintain contact with friends. Once a week they had a special night when they would visit a restaurant as a group or remain in the centre together and watch a DVD and have a take-away food.

Management and staffing

The standard on management was well met. The centre was managed by a suitably qualified person who was in post for a number of years.

The centre had adequate staffing. There were 15 posts in total filled by 16 staff members. The centre had one manager, one acting deputy manager, seven social care worker posts filled by eight staff members (two part time), and three social care leaders (two in acting positions). In addition there were three trainee social care workers on the team (one part time). The majority of the team had been in post in the centre for a number of years and this provided stability and continuity for the children who had previously lived in the centre as well as the children currently resident there.

Eight of the team had appropriate social care qualifications and two had qualifications in a related discipline. Four were in college studying for their social care qualification. One staff member had no qualification. All recently appointed staff team members had been appropriately vetted with Garda Síochana checks and references on file. The centre manager was in the process of seeking updated Garda checks for the staff team in accordance with local HSE policy.

The standard of training was well met. The centre had completed a training audit in May 2010. The majority of the staff team had received training in *Children First: National Guidelines on the Protection and Welfare of Children*, Therapeutic Crisis Intervention (TCI), Fire Training and First Aid. Additional training was provided in areas appropriate to the needs of the children in the service including an anti-bullying workshop, teenage health and substance misuse. One staff member was involved in researching and designing the anti-bullying workshop. The enthusiasm in the staff team for learning new and creative ways of working with the children in their care was commendable.

External professionals spoke highly of the managers and staff and of their commitment to the children. The parent interviewed by inspectors visited the centre on a regular basis and found the manager and staff team welcoming. The external line manager met with the centre manager on a regular basis and also attended team meetings.

Purpose and function

The centre had a clear purpose and function that was reflected in the work in the centre. Inspectors found evidence that children were well prepared for leaving care through assessment of their needs and advice and coaching in the practical aspects of independent living.

Notifications of significant events, and administrative files

The standard on the notification of significant events was well met. There had been 42 significant events relating to the four children in the 12 months prior to the inspection. These incidents varied from assaults experienced by some of the children outside of the centre to absences without permission. The social workers, parents, monitoring officer and line manager were informed of these events. Practice on the management of these events will be discussed under the relevant sections.

Register

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

Children's rights

The standard was met. The children had a good understanding of their rights. A representative from the Irish Association of Children in Care (IAYPIC) had met with all of the children and provided information on the organisation. This was good practice and reflected the child-centred ethos in the centre.

There was a good complaints policy. The children knew how to make a complaint and could identify people they could make a complaint to. They were confident their complaints would be listened to and addressed either by the staff team or by their social workers. In the year prior to the inspection there had been 10 complaints made by four children. Eight of these had been addressed and two were ongoing at the time of the inspection.

The children attended their care planning meetings and felt that their views were listened to. They were aware of their right to access their case files and daily logs and one young person had done so.

Contact with families

This standard was well met. The staff team worked closely with the families of the children through regular phone contact and visits to the centre. Parents cooked for their children in the centre on a regular basis and one parent went on holiday with her children and the staff team. They provided support to parents in their home, facilitated transport to access to siblings in other care placements and generally ensured children maintained close links with their families. Social workers commented to inspectors on the commitment of the staff team to working closely with families. One parent also spoke highly of the staff team and of their regular contact with them about the care of their children.

Preparation for leaving care and aftercare

The standards for preparation for leaving care, discharge and aftercare were met. All of the children had aftercare assessment plans in place. This process identified the needs of the children and an individual programme was designed to address needs such as budgeting, cooking and self-care. There was a local aftercare service which the service linked in with but the staff team also worked closely with the children in preparing them for leaving care. Children previously living in the centre remained in regular contact with the staff who provided ongoing emotional and practical support to them. This was positive for the children living in the centre at the time since they could witness how ongoing post care support was provided by staff members.

Education

The standard on education was met. All of the children were in educational placements. Two of the young people had completed their Junior Certificate Exams and had achieved good results. Two of the children were attending their training placements sporadically. There was evidence that the staff team were working closely with the educational providers and children in addressing this issue.

Placement supervision and visiting of children by social workers

Social workers told inspectors that there was good communication between themselves and the centre staff, and that they met the children in the centre frequently. The social workers were aware that they should read the case files from time to time but had not done so. There were frequent meetings about the children. The social workers confirmed that they were kept well informed of all complaints and significant events. The social workers also received weekly reports about the children which they welcomed. There was also evidence that social workers

and the staff team worked together with the children in addressing areas of concern such as bullying and absences from the centre.

Care files

Care files were well maintained and contained the majority of the documentation required under regulations. Placement plans and other reports on the children were of a high standard. There was no up-to-date care order on file for one young person.

Practices that partly met the required standard

Safeguarding and child protection

The standard on safeguarding and child protection was met in part. The staff had a good awareness of the principles of safeguarding, and there were clear procedures in place for notifying child protection concerns. There had been 24 notifications of child protection concerns relating to the four children in the 12 months prior to the inspection. These related to underage sexual activity, assaults by other people outside of the centre, inappropriate contact from adult males and an allegation of an historical sexual assault against one young person.

All of these concerns were appropriately notified as child protection concerns to the social workers in Dublin North West that were assigned to the children at that time. There was evidence that the staff team had worked with the young people about keeping themselves safe through individual work on sexual health and relationships.

Inspectors found that there was no written evidence in the centre's files of a response by the social workers to these notifications. The lack of response was highlighted by the HSE monitoring officer in May 2010 and the centre manager wrote to senior managers in the social work department seeking a response. At the time of this inspection, eight months later, this issue was still outstanding.

Inspectors found that social workers had met with the local garda síochána about some of these issues but there was no formal notification as per Children First: National Guidelines for the Protection and Welfare of Children 1999. Social workers told inspectors that there was a lack of child protection and risk assessment training for social workers in this area. *Children First: National Guidelines for the Welfare and Protection for Children* historically had not been implemented in this area due to industrial relations issues and social workers were awaiting training in the new revised version of these guidelines.

There was no clear risk assessment process for social workers. One social worker told inspectors that they had only recently become aware of an outstanding allegation of sexual assault against one young person that was notified by the centre manager to the social work department ten months previously.

Inspectors found there was no consistent co-ordinated inter-agency response to these concerns. The social workers should without delay, assess the status of each notified concern in a co-ordinated manner with the relevant agencies and maintain a record of the outcome. In accordance with *Children First: National Guidelines on the Protection and Welfare of Children 1999*, they should ensure that notification is made to the area's child care manager as appropriate and child protection case conferences convened if required.

Inspectors recommend that placing social workers and the centre manager and staff establish at the point of admission the criteria and procedures for notifications within the framework of the HSE's regional policy.

Monitoring

The standard on monitoring was met in part. The monitoring officer was promptly notified of all significant events, as required by the standard. The monitoring officer had introduced a self-audit tool for centres based on the *National Standards for Children's Residential Centres 2007* and the *Child Care (Placement of Children in Residential Care) Regulations 1995*. This self-audit was carried out by the centre manager in May and November 2010. It was quality assured by the HSE monitoring officer in May 2010 and a draft report on the audit was provided to inspectors.

The main recommendations from the HSE monitoring officer concerned the responses of social workers to child protection notifications, supervision of staff, and the quality and recording of care planning for individual children. The majority of these issues had been addressed including new supervision contracts, supervision training for the deputy manager and improved recording. Concerns relating to care plans for two children at that time had been addressed. Frequency of supervision remained an issue at time of inspection.

It is a matter of concern to inspectors that the lack of written responses to child protection notifications from social workers highlighted by the HSE monitoring officer had still not been addressed at the time of this inspection.

Supervision and Support

The standard on supervision was partly met. Both the centre manager and the deputy manager received training in supervision. From the records inspectors found that the quality of the supervision was good. However, it did not occur within the frequency required by local HSE policy. The centre manager had supervision infrequently and some staff members had not received supervision for some time.

Statutory care planning

This was met in part. The children attended their care plan meetings and were confident their views were listened to. Two of the children had a care plan that was comprehensive and to a high standard. There was no updated care plan for the remaining two children as required under the child care regulations and the quality of the care plans on file was poor. The inconsistent quality of care plans was highlighted by the HSE monitoring officer in May 2010 and should be immediately addressed by the social work department.

Management of behaviour, use of restraint

The standard on the management of behaviour was met in part. The manager and staff told inspectors that the main focus on managing behaviour was through the quality of the relationships between the staff and children. Inspectors found evidence that this was reflected in practice and that in many ways it had a positive impact, and inspectors were told that the behaviour of some of the children had significantly improved since they moved into the service.

All of the staff team were trained in the TCI which is the HSE endorsed model for managing behaviour. In the year prior to inspection there had been no restraints of children in the centre. Sanctions such as losing pocket money were appropriately used to address some difficult behaviour. Positive rewards were also used as incentives for good behaviour.

The most serious concern for inspectors was the incidence of bullying between two children. This had gone on for a number of weeks and had escalated to such a point that one of the children had presented for medical assistance, made a complaint to the local Garda Síochána and subsequently refused to return to the centre.

Concerns about bullying between children were highlighted in the inspection report in 2009, and it was of concern to inspectors that it was still an issue in this inspection. There was evidence that the staff team had repeatedly attempted to address this issue with the children without success. All staff members had attended anti-bullying training. However, inspectors advise that external expertise should be sourced for the team to support them in managing this persistent behaviour as well as to develop effective programmes of individual work with the children involved.

The social worker for the young person that moved out of the centre should ensure that she receives adequate support to address the impact of her experience. The HSE should ensure that a review of the incident is conducted to see what could have done differently including notification of accumulated concerns through the child protection system. The admission risk assessment process for future placements should include the protection of children from bullying, in accordance with standard 5.

Health

The staff team worked with the children individually, discussing their health including sexual health and wellbeing. Three of the children had a medical assessment on admission to the centre and one did not. There was no history of immunisations on file for three of the children. Encouraging healthy eating was a theme in the centre. The staff team told inspectors that there were serious concerns about the eating habits of two of the children and described numerous attempts to encourage healthy eating and exercise. Due to the risks associated with unhealthy eating the staff team should ensure that the strategies used to address the problem maintain their momentum and engage the motivation of the children.

Premises and safety

The centre was situated in a large detached bungalow in a suburb of Dublin. Generally, the standard of accommodation was good and the house appeared homely and well decorated and maintained. Inspectors were provided with a copy of the centre's health and safety statement which had been signed by all the staff from May 2010. The centre had valid up-to-date insurance. Overall, the centre was maintained to a high standard and apart from a hole in the roof of an outhouse which has been identified in previous inspections as needing attention, there were no other outstanding repairs for the buildings. Inspectors examined a sample of the maintenance records and found that the response to requests for repairs was generally good.

However, a concern for inspectors was that the repair of a fire safety door spring was outstanding since September 2010. Some of the light fittings were without bulbs. Two air ventilation ducts from domestic appliances, a dryer and cooker hood, were uncovered. This has potential to let rodents into the house. Inspectors did not receive evidence of a rolling programme of maintenance, but the centre had been fully redecorated since the last inspection. The kitchen units showed signs to considerable wear and tear with the front of one drawer missing. They need to be upgraded. There was some delay in response to some requests for repairs.

The centre had two members of staff who were health and safety officers, both of whom had received training in health and safety. A health and safety assessment was conducted by a member of the staff in September 2010. It identified potential hazards for the most part and indicated what measures were in place to address them. An updated assessment should be carried out by or with an appropriately qualified and authorised person external to the centre. It needs to take into account access into the back garden and the attempts to break windows by local children.

All but two of the staff were trained in First Aid. The centre's vehicle had a current tax certificate, and the centre was in the process of acquiring a notice indicating that it is covered by State's insurance. Medicines were appropriately stored in a locked metal cabinet, and the medication administration system was good. As well as the staff member administering the medication, children signed when they received medication. The system included a weekly stock check.

The fire precaution and prevention system was checked every quarter by a servicing company. There was written confirmation of fire safety arrangements in the centre from the HSE regional fire safety officer. The last check of the alarm system took place in November 2010. Also, in November 2010 a new set of fire extinguishers was installed. There was no clear evidence about the checks on smoke alarms. Inspectors were told that a sample of checks completed of detectors was checked at each quarterly system check. However, they found one alarm with a label indicating that it was last checked in October 2008.

Staff received training in fire prevention and evacuation. The centre had written confirmation from the HSE fire safety officer on There was evidence of regular three-monthly fire evacuation drills taking place, and a drill was carried out after the latest admission so that the newly placed young person would be familiar with the routine. The fire register is well maintained by one of the centre's health and safety officers.

Practices that did not meet the required standard

There were no practices that did not meet the required standard and this reflects well on the staff team and managers of this centre.

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	√		

Recommendations:

1. The HSE should ensure that formal supervision occurs regularly in accordance with HSE policy.

3. Monitoring

Standard

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

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

Recommendation:

- The HSE should ensure that all outstanding recommendations from the HSE monitoring report dated May 2010 are implemented without delay.

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	√		

5. Planning for children and children

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 children	√		
Social work role		√	
Emotional and specialist support	√		

Preparation for leaving care	√		
Discharge	√		
Aftercare	√		
Children's care records	√		

Recommendations:

3. The HSE should ensure that social workers develop good quality care plans for the children which meet all the statutory requirements of the child care regulations.
4. The HSE should ensure that statutory care plans reviews occur within the frequency required by the regulations.
5. The HSE should ensure that social workers read the child's case file and daily logs in the centre from time to time.
6. Care of children

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	√		

Recommendation:

6. The HSE Dublin North West should ensure that an effective strategy is put in place to address bullying between children in the centre in accordance the regional HSE policy ¹, and that persistent bullying is regarded as a child protection issue in accordance with *Children First*².

¹ Policy 4.3

HSE Dublin North East Policies and Procedures for Children's Residential Centres 2010

² Section 11.7

Children First: National Guidelines for the Protection and Welfare of Children 1999

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		√	

Recommendations:

7. The HSE Dublin North West management should ensure that deficits in the child protection system are identified and addressed as a matter of urgency.
8. The HSE Dublin North West should ensure that the outstanding child protection notifications are concluded and an outcome recorded following a co-ordinated response with the relevant agencies.

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	√		

9. Health

Standard

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

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

Recommendation:

9. The HSE should continue in their efforts to address the health needs of all of the children and immunisations records are obtained.

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 (Placement of Children in Residential Care) Regulations, 1995.

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

Recommendation:

10. The HSE should ensure that the kitchen is appropriately ungraded and that all outstanding maintenance issues are addressed.

4. Summary of Recommendations

- 1.** The HSE should ensure that formal supervision occurs regularly in accordance with HSE policy.
- 2.** The HSE should ensure that all outstanding recommendations from the HSE monitoring report dated May 2010 are implemented without delay.
- 3.** The HSE should ensure that social workers develop good quality care plans for the children which meet all the statutory requirements of the child care regulations.
- 4.** The HSE should ensure that statutory care plans reviews occur within the frequency required by the regulations.
- 5.** The HSE should ensure that social workers read the child's case file and daily logs in the centre from time to time.
- 6.** The HSE Dublin North West should ensure that an effective strategy is put in place to address bullying between children in the centre in accordance the regional HSE policy ³, and that persistent bullying is regarded as a child protection issue in accordance with *Children First*⁴.
- 7.** The HSE Dublin North West management should ensure that deficits in the child protection system are identified and addressed as a matter of urgency.
- 8.** The HSE Dublin North West should ensure that the outstanding child protection notifications are concluded and an outcome recorded following a co-ordinated response with the relevant agencies.
- 9.** The HSE should continue in their efforts to address the health needs of all of the children and immunisations records are obtained.
- 10.** The HSE should ensure that the kitchen is appropriately ungraded and that all outstanding maintenance issues are addressed.

³ Policy 4.3

HSE Dublin North East Policies and Procedures for Children's Residential Centres 2010

⁴ Section 11.7

Children First: National Guidelines for the Protection and Welfare of Children 1999