



Health Information and Quality Authority

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

A

CHILDREN'S RESIDENTIAL CENTRE IN THE HSE DUBLIN MID LEINSTER

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1. Introduction

The Health Information and Quality Authority (HIQA), Social Services Inspectorate (SSI) carried out an unannounced follow up inspection of a children's residential centre in the Health Services Executive (HSE), Dublin Mid-Leinster Area (DML) under Section 69 (2) of the Child Care Act 1991. Kieran O Connor conducted a follow up inspection on 15th of October. The inspector found inter alia a poor response to key findings in relation to the placement of very young children in the centre from the full inspection in February 2009 and consequently judged the centre warranted a further full inspection.

Kieran O Connor (lead inspector) and Orla Murphy (co-inspector) subsequently conducted a full inspection from the 27th to the 28th of October 2010.

The centre was located in an attractive detached 6 bed roomed house in a quite suburb close to a small town some miles from Dublin. The house blended in well with the other family homes in the estate.

The centre provided short to medium term residential care, for up to five children (boys and girls) aged between four and eleven years on admission. The age group catered for in the centre was found by inspectors to be inconsistent with the Department of Health and Children's (DoHC), and the Health Service Executive's (HSE) national policy on the placement of children, twelve years of age and under in residential care. The overall aim of the centre was to reunite children with their families or to prepare them for moving on to a foster care placement. At the time of inspection there was one boy aged ten, and one girl aged eight years living in the centre. Another child of eleven years of age was in the process of transitioning into the centre from another centre. There had been four discharges and three admissions in the year prior to inspection.

1.1 Acknowledgements

Inspectors wish to acknowledge the help and cooperation of the children, their relations, staff and all other professionals involved in the inspection.

1.2 Methodology

Inspector's judgements are based on an analysis of findings verified from several sources including evidence gathered through observation of social care practice, examination of records and documentation, an inspection of accommodation individual interviews with three children, three of their parents, the acting manager, seven social care workers the acting regional services co-coordinator, three social workers and a social work team leader. A telephone interview was conducted with a HSE psychologist who had worked with some of the children.

Inspectors had access to the following documentation during this inspection:

- The centre's statement of purpose and function
- The centre's policies and procedures
- The children's care plans and care files
- Census forms on staff
- Census forms on the children
- Personnel files
- Administrative records
- Questionnaires completed by the children and their Parents
- Questionnaires completed by care staff, social workers and other professionals external to the centre
- The monitoring officers report
- Details of physical restraints in the past year
- Details of unauthorised absences in the past year
- The centre's fire register
- The registers register
- SSI Inspection report (Inspection Report ID number 293)
- SSI Cluster Report 2006 (South Western Area Health Board).

1.3 Management structure

The acting centre manager reported to the acting regional co-ordinator for residential care, who reported to the regional co-ordinator who in turn was line managed by the general manager.

1.4 Data on child

Listed in order of length of placement

Young Person	Age	Legal Status	Length of Placement	No. of previous placements
# 1 (girl)	8 yrs	Care order	2yrs 7 months	Two foster care placements One residential placement
# 2 (boy)	10yrs	Voluntary care order	7 months	Two foster care placements

2. Summary of Findings

The centre was subject to a previous follow up inspection in August 2009. Overall, inspectors found that the centre continued to be managed well. There was a warm family atmosphere that was relaxed and homely. All the children were engaged in activities and there was a sense of excitement among them.

Inspectors were seriously concerned to find poor progress in relation to alternative family care for one child. Inspectors were further concerned to find another child with a special arrangement whose placement inspectors judged was drifting, and the fact that another child also subject to a special arrangement had hit a child in the centre on numerous occasions. The core staff team was down from ten to four and agency staff provided cover for this. There was also an inappropriate emergency placement in the year prior to inspection. This centre had been commended in all previous inspections for the family like culture in the centre. These new developments were in danger of seriously diminishing this culture. However inspections found a staff team providing high quality care to the children despite these concerns.

Recommendations in this inspection relate to the very young age of the children in the centre, a lack of success in finding alternative appropriate placements for young children, social work practice, care planning, management, and some aspects of the premises.

Practices that met the required standard

Primary care

The standard on the care of the children was well met. All the children said that the staff team were very nice and great fun. They told inspectors that staff were easy to talk to and interested in how they got on when they went on a visit to their families or returned from school. The food in the centre was varied and nutritious. One child said it was "almost as tasty as the food at home". Two of the children said that although they would rather be at home or with a foster family this was a good place to live. Another child said "I like all the staff they make me laugh" The children looked healthy and well and there was an air of excitement and activity during the inspection as the children came and went out to play or for a bicycle ride with some of the staff team.

Generally all the children felt safe in the centre. They could select clothes of their choice. The staff team ensured that the children followed their interests and the children played football and went fishing with member of staff. The children had a pet rabbit in the centre which they were very proud of and looked after very well. Overall Inspectors found positive interactions, a sense of shared affection and sense of fun between the children and the staff team.

Contact with families

This standard was met. Inspectors found from centre records and interviews that family contact was very good in the centre. This was one of the centres main strengths. There was evidence that there was a commitment from the staff team to foster continued contact with the children's family, friends and the community. Parents interviewed told inspectors that the staff team are very friendly and

respectful of them and encouraged contact with their children and their views were respected by the staff. The frequency and quality of family contact was very good. Most of the children got to see their parents at least once a week. Parents were invited to lunch and tea on a regular basis. In particular two parents told inspectors they were confident that if they had a problem they could discuss it with the centre manager who they described as very approachable. Two parents told inspectors they had already raised concerns with him and they were dealt with in an effective manner.

Notification of significant events

This standard was well met and the supervising social workers were satisfied that this was carried out in a prompt manner. Notifications were made of matters such as unauthorised absences, complaints and incidents or accidents. The staff team interviewed by inspectors were clear about who they should notify about significant events and social workers were satisfied with the notifications they received.

Race, culture, religion, gender and disability

This standard was met. Inspectors found that information about the religion of each child was available on file and that staff encouraged children to practice their religion according to the wishes of their parents. Inspectors found that all the children attended a religious service of their choice weekly.

Health and specialist support

This standard was met. The staff team were aware of the medical needs of the children. All the children had their own local doctors. There was evidence on file of medical visits and dental appointment kept. The centre had good access to hospital services. There was a clear record of medication and prescriptions. There was a medical history on the children and a history of immunisations on file. Each child was linked into the child and adolescence mental health service in the region where necessary. One of the children did a behavioural modification programme developed in partnership with the local HSE psychologist and centre staff which was very successful.

Education

This standard was well met. The manager and the staff team were highly aware of the role of education in the children's lives and its importance for their self esteem and future life chances. In the year prior to the inspection some of the children had difficulties at school prior to coming to live in the centre. These difficulties were resolved and at the time of inspection all children were attending school every day. The children told inspectors that they now liked school. The staff team were well aware of the children's progress in school and actively linked in with the teachers and attended all school parent teacher meetings and ensured any additional supports were put in place.

The children told inspectors that the staff team take an interest in what happens at school. They also helped the children with their homework. All the staff team interviewed were also well informed about the children's talents, interests and what they would like to be when they are older. One of the children had difficulties in school in the past. This had been systematically addressed by good partnership work with the psychologist, the key worker and the teacher. Recently the child received a student of the week award on two occasions and was very proud of this

achievement. Inspectors commend the staff team for their attention to the educational needs of the children.

Unauthorised Absences

This standard was met. There was one absence without authority from the centre lasting 40 minutes in the year prior to inspection. This was dealt with in line with HSE DML policy and the Gardai were informed. Staff were familiar with the protocol of the centre for unauthorised absences. Each child had an individual absence management plan in accordance with regional policy.

Register

This standard was met. The centre had a register that included all details required under the Child Care (Placement of Children in Residential Care) Regulations 1995 Part IV Article 21 and the standards. There had been four discharges and three admissions in the year prior to inspection.

Staff vetting

Inspectors were informed in writing that all of the staff team including agency staff had Garda clearance and the required references. Inspectors perused a sample of staff personnel files and found that the required standards were met.

Insurance

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

Maintenance

The standard on maintenance was met. The centre was maintained to a good standard and inspectors found no outstanding maintenance requirements.

Fire safety

This standard was met. Daily fire checks were evidenced in centre records. Fire drills were occurring on a regular basis and always when a new child came to live in the centre. The fire equipment had been checked in the year prior to inspection. The centre possessed written confirmation from a certified engineer that all statutory requirements relating to fire safety and building control had been complied as required by the regulations and standards.

Practices that met the required standard in some respect only

Management and staffing

The standard on management was mostly met. There had been a change of manager since the first full inspection in February 2009. The manager had been a child care worker in the centre for over nine years and acting deputy manager for six months. He had been appointed as an acting manager in the centre for the past year. He was well qualified and experienced in child care. Inspectors judged that he had adjusted to his new position as manager very well. He brought good authority to the role and the staff team found him open supportive and child centred. Inspectors noted his thorough knowledge and advocacy for the children in the centre. All the children said that he looked out for them and looked after them well. He also had very good contact with the children's schools and when a sensitive issue arose in school that could have caused a lot of needless distress for one child he dealt with the matter in consultation with the teacher in a very swift, sensitive and effective

manner. All the children said they would talk to him if they were worried about anything. The staff team had differences of opinion at times but this was seen as part of the healthy ability to challenge each other and did not affect staff morale.

Inspectors were concerned to find however that the management had changed again since the last full inspection. It was noted in the HSE monitoring report that the children found the sudden departure of the previous manager unsettling. The management post had been an acting position for ten years. This is unacceptable. Inspectors recommend that the management position become permanent and there are no further chances in the management positions for the foreseeable future. There was no team leader or deputy management posts on the staff team. The management structure in the centre needed to be reviewed.

At the time of inspection inspectors found a dedicated well qualified team committed to providing a high quality service to the children. The permanent staff team members each had an average of over six years working in the centre. However at the time of inspection four of the permanent team were on leave.

Professionals external to the centre told inspectors that the team were very conscious and skilful in their care of the children. Professionals also told inspectors that all the staff team who they had contact with showed great interest in the welfare of the children and would thoroughly follow through with psychological and medical programmes proposed. Consequently inspectors were told that a particular behavioural issue in relation to one child was brought to a successful conclusion at an earlier stage than medically expected.

Inspectors had two concerns in relation to staffing. The staff team had a core approved team of permanent staff member of ten care workers and one acting manager. However, at the time of inspection a combination of maternity leave and long term sick leave meant the core team was down to four members. Consequently the staff team were being supplemented by one relief staff and six agency staff. The children were familiar to the staff team and these changes had unsettled them. This was compounded by the fact that one child had a special arrangement which meant agency staff were with him at all times. This will be discussed further in the management of behaviour section.

Staff supervision

The standard on supervision was mostly met. There was a commitment to formal supervision and it was occurring in practice. Although the agency staff were formally supervised by a team leader in their agency, the manager also formally supervised them. Inspectors perused a sample of records and found supervision was occurring monthly and the records reflected the importance of staff accountability and were very child centred. The acting manager in turn received monthly group supervision from the regional co-ordinator of residential care. Inspectors viewed this as valuable but insufficient. The acting centre manager needs to receive regular individual formal supervision with his line manager as required by the standards and best practice.

Training and other supports

All but two of the staff team had the required qualifications. They also attended training in child protection, therapeutic crisis intervention training (TCI), fire safety and first aid. They also had the services of the HSE employee assistance in the event

of any traumatic or stressful incidences at work. The line manager of the centre had visited the centre five times in the year prior to inspection.

Purpose and Function and admissions

The centre had a statement of purpose and function that stated that the centre provided short to medium term residential care for five children, boys and girls, aged between four and eleven years on admission. Inspectors found that the duration of the placements for the children resident in the centre in the year prior to inspection ranged from between 8 months and nearly three years, which was not consistent with the statement of purpose and function. The practice of placing children under 12 years of age in residential care was not consistent with DoHC's and the HSE's national policy (Department of Health and Children, Youth Homelessness Strategy, 2001) that states children under 12 years of age are placed in residential care in exceptional circumstances. It was not best child care practice and reflected the underdevelopment of foster care services in the region. The report "*The placement of children aged 12 and under in residential care in Ireland*" (SSI 2007) stated that research and good practice overwhelmingly support the principle that young children in particular should experience stable parenting in families that meet their needs and promote their welfare and development. Inspectors recommend that the HSE conduct an independent review of the service and a written report of its findings is furnished to SSI HIQA within three months of the publication of this report.

Suitable placements and admissions

Inspectors found that the children were suitably placed on admission given the centres purpose and function. However as already stated for one child it has become a long term placement. Inspectors were concerned about an inadequate risk assessment in relation to another admission. This will be discussed in the managing behaviour section. Inspectors were seriously concerned about an emergency admission of another sibling of a child already in the centre. Because of another emergency admission in another centre this child was moved from the residential centre where she lived for six years, to this centre. This emergency was dealt with some days later but this child remained in the centre for a further three weeks on the basis that it might be a constructive move for the two children. This arrangement did not work out and the child returned to her original residential home.

Inspectors were seriously concerned that these decisions occurred outside the regulatory care plan review. This is the appropriate forum for exploration of options in the child's best interests where all relevant parties can be consulted and challenges anticipated and decisions can be made in a thoughtful planned way. Inspectors recognise that emergencies do occur but some children's placements become emergencies because of poor strategic or long term planning by the HSE. These centres are the children's home and should be treated as such and sudden, unplanned transfers of very young children to other residential centre goes completely against HSE child policies, both children's residential centres purpose and function and most importantly, good child care practice.

Children's Rights

The standard on children's rights was mostly met. The children were informed of their rights on admission and they were given a booklet outlining their rights. The booklet was written in thoughtful, sensitive and child friendly language. The children told inspectors that they were asked about their preferences and choices in the centre. They were consulted about decorating their rooms. They all said their rooms were *"really cool, one of the best things about living in the centre"*. The children choose the colour of their room and decorated the wall with favourite music bands and football teams. One of the children asked for and received a pet fish which he looked after very well in his room. The children were involved in drawing up a daily menu and could choose their own clothes. They had a children's meeting where they could raise issues of concern to them. This forum was a good development and inspectors recommend that their frequency is increased.

The children were consulted about interests and hobbies and encouraged to participate in sports. The key workers told inspectors that part of their role was to consult with and advocate for the wishes of the children when it's in their best interests. During the course of the inspection one of the children expressed an interest in sea fishing and going to a professional football match with his key worker at some stage as he had never had done this before. This was brought to the manager's attention and to the child's delight this was organised for the near future by the second day of the inspection. This is very responsive outcome to a child's modest wishes and indicative of the centres good child centred practice.

The centre had a routine practice of making log books available for children to read. Some of the children interviewed were not aware of their right to see them. However they were very young children and did not appreciate the significance of their files. There was also confusion amongst some of the staff team about what they could read and refresher training in children's rights will help alleviate this. Inspectors recommend that staff receive further training in children's right to information about themselves. The staff team members interviewed by inspectors were aware of the organisation; The Irish Association of Young People in Care (IAYPIC) who are inter alia, an advocacy group for children in care. The children because of their young age were not aware of them. Inspectors recommend that IAYPIC are invited to the centre to meet with the children.

The centre had a well developed policy and procedure on complaints. There was a central complaints register in which five complaints were recorded. The staff team interviewed were every clear on how to deal with complaints in a child friendly way. There were six written complaints in the year prior to inspection. Inspector judged that five of them were dealt with in a timely and sensitive manner and in accordance with centre policy. There was one outstanding complaint. This complaint by the child was in connection with issues that could only be resolved by professionals external to the centre. The complaint was made to staff in the centre on 9th June 2010 who promptly formally notified the social work department the following day. The centre manager wrote to the social work department on two further occasions asking that the child concerns be addressed. However, at the time of inspection over four months later the child had not been interviewed and the complaint was not addressed. This delayed response to a child's complaint was not acceptable. It undermines the child's faith in making a complaint and being heard. Inspectors recommend that the child is interviewed and the complaint addressed as a matter of priority.

Social work and care planning

The standard on social work and care planning was met in part. All the children including a child that was in the process of transitioning to the centre from another centre had allocated social workers. However the child in transition had no care plan and another child's care plan was five months out of date at the time of inspection. Inspectors recommend that a care plan is devised for one child and the other child's care plan is updated as required by the regulations and standards. Statutory reviews were taking place however they need to occur more frequently because of the young age of the children. All the social workers read case files of the children in the centre from time to time as required by the standards.

However the frequency of the social workers respective visits and contact with the children and the centre varied considerably. Both children living in the centre had been allocated a new social worker in April 2010. One child received six visits to the centre from their social worker and the other child received two visits in that period. Although the second social worker met the child on access visits, this was insufficient. This child was unable to recall her social workers name. A key social work task is the development of a robust trusting relationship with children which is an important part of their responsibilities. This will not happen if there is a low level of contact with the children. This is particularly important for young children as change and developments within a short period can have a significant impact on them.

One young child had made a complaint that she wished to live with family in foster care and this had not occurred. Inspectors were seriously concerned that despite the fact that there was universal agreement among professionals known to the child that this would be in the child's best interests it had not occurred. The option of foster care placement had been recommended in two previous HIQA SSI reports, August 2008 and July 2009.

Inspectors recommend that the placement of this young child is given the highest priority and a progress report is furnished to the SSI HIQA three months from the publication of this report.

Another child was placed in the centre in January 2010. There was a concern about some aspects of behaviour in the community. Consequently the child was subject to a special arrangement which meant the child was subject to adult supervision at all times in the centre. As a consequence waking staff was introduced to the centre. The child was uncomfortable with this level of supervision. This was to be a short term measure pending an investigation into a complaint about his behaviour.

However, the parties to the complaint were not contacted until two months after the child came into care. The child was sent for assessment but this proved inconclusive. In the meantime the child was supervised by additional staff for 6 months and no further evidence of the concerning behaviour manifested itself during this time. The addition of new agency staff had diminished the homely atmosphere of the centre alluded to and commended in all previous SSI reports as one of the centres main strengths. In addition the inspectors were told by the regional coordinator of children's residential services that this special arrangement is costing the State some €5,000 weekly or approximately €160,000 since February 2010. Inspectors examined

several weeks of night logs which demonstrated that the child was not disruptive at night and an alternative method of monitoring could be explored.

Inspectors formed the opinion that there was a strong element of drift in this case and recommend that the special arrangement is reviewed and risk assessed as a matter of urgency.

Child safety and protection

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 their care. Inspectors were told by team members that safeguarding was enhanced by the openness and transparency of practice amongst staff which included the ability to challenge each others practice. All the children identified particular staff members as trusted adults. However, inspectors were concerned about one child sometimes getting hit by another child in the centre. This is discussed in the section on managing behaviour.

The management of behaviour

Inspectors found that the children were very well cared for, that the staff related well to them, and that by and large there was a high level of co-operation and an air of affection and fun between them. Inspectors observed the effective use of humour in minding the children and helping them to develop positive social behaviour. One child told inspectors that "the staff are fun they always make me laugh". There was a balance between good authority appropriate to adult child relations but there was an emphasis on relationships and simple negotiation of situations rather than an overemphasis on giving direction and sanctions to the children. Sanctions were rare and proportionate and the children found them by and large fair. There were a total of 12 physical restraints of short duration averaging four minutes involving three children in the year prior to inspection. These were reviewed by the centre manager, the monitoring officer, line manager and social worker in line with HSE DML policy.

However, inspectors were concerned to find that one child was fearful of been hit by another child who was transitioning to the centre at the time of inspection. During the inspection the child asked for a second interview with inspectors and told them she had been hit again during the inspection. This was occurring despite the fact that extra staff had been assigned to ensure that amongst other reasons, thus did not recur. Inspector brought their concerns and the child's complaint to the centre manager, the child's social worker and the line manager of the centre. The HSE is clearly obliged under standard 5; Planning for Children and Young People section 5.6 which states "*Admission policies and practices take account of the need to protect children from abuse by their peers*". It is unacceptable that a child in the care of the State is subject to any form of abuse. Inspectors recommend that this unacceptable behaviour is subject to:

- Effective risk assessment by the centre manager on a daily basis
- The child's social work visits increase
- The monitoring officer closely monitors the centre

- The line manager of the centre continues to maintain close oversight of the centre.

Administrative and care files

The standard on administrative and care files was mostly met. Inspectors found there were good recording systems in place reflecting the day to day operations of the centre. The content and organisation of the care files, log books and other records was of a good standard written in a respectful tone. There was no discrete section for education and inspectors advise that this be included. Some of the recording in the log books should be more succinct. Inspectors advise discontinuing the use of the word resident, and just refer to children or young people living in the centre.

Monitoring

The standard on monitoring was met in part. The monitoring officer had visited the centre twice in the year prior to inspection. She had initiated a self audit and subsequently issued a monitoring report to the HSE DML on 27th September 2010 based on an evaluation of the self- audit and an interview with the acting centre manager. She made recommendations in relation to centre policies, management, social work, care reviews and emergency admissions management and staffing. Inspectors recommend that the monitoring officer's recommendations are implemented as expeditiously as possible. The monitoring officer had retired in the month prior to this inspection. Inspectors received notification that a new monitoring officer was appointed in early November 2010. Given the young age of the children in the centre inspectors recommend that the centre is monitored on a monthly basis.

Premises and Accommodation

The standard on premises and accommodation was mostly met. Inspectors found that the centre was attractive and homely. The rooms were spacious and bright and efforts had been clearly made by the staff team to run the centre like a family home. The children loved their bed rooms in which they had placed pictures of their families on the walls. There was a lovely welcoming playroom with toys for children of every age. The front and back garden were well kept and frequently used by the children. There was a cage like structure surrounding the staircase from the ground floor to the first floor. Nobody could remember why it was originally placed there and staff speculated that it was placed there for safety reasons. The children told inspectors that they sometimes attempt to climb up to the top of it. The structure has an unsightly institutionalising appearance and deducts from the good efforts of the staff team to ensure that the centre is homely. Inspectors recommend a review of the use of this structure in a children's home. One child told inspectors which he loved his room his bed was too small. Inspectors recommend that this is immediately addressed.

Practices that did not meet the required standard

All of the standards in this centre were either met or met in part.

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		√	

Recommendations:

- The HSE should ensure that an independent formal evaluation of the need for this service is conducted as a matter of priority, and a written report sent to SSI HIQA 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 HSE should ensure that the centre management structure should be reviewed to achieve consistency, the management post is made permanent and that there are no more management changes in the centre for the foreseeable future.**
3. **The HSE should ensure that the centre manager receives formal and regular supervision**
4. **The HSE should ensure that recording keeping is more succinct.**
3. **Monitoring**

Standard

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

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

Recommendation:

5. **The HSE Should ensure that given the young age of the children, the centre is monitored on a monthly basis and a written report of findings issued.**

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:

6. The HSE should ensure that the complaint of one child is addressed.
7. The HSE should ensure that the staff team receive further training in children's rights.
8. The HSE should ensure that the Irish Association of Young People in Care is invited to visit 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		√	
Preparation for leaving care	√		
Discharges		√	
Aftercare	√		
Children's case and care files		√	

Recommendations:

9. The HSE should ensure that all children in the centre have a comprehensive care plan that reflects their needs.
10. The HSE should ensure that statutory care plan reviews are held frequently for young children and ensure the placement of children in family type placements as priority.
11. The HSE should ensure one child is found a suitable and appropriate foster care placement as soon as possible.

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:

- 12. The HSE (DML) should ensure that staff receive further training in the management of children's behaviour.**

7. Safeguarding and Child Protection

Standard

Attention is paid to keeping young people in the centre safe, through conscious steps designed to ensure a regime and ethos that promotes a culture of openness and accountability.

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

Recommendations:

- The HSE should ensure that children in the centre are kept safe from abuse from their peers as required by standard 5 of the children's standards as a matter of priority.

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	√		

Recommendation:

14. The HSE should ensure that the need for the protective surround covering the stairs is reviewed.

4. Summary of recommendations

- 1.** The HSE should ensure that an independent formal evaluation of the need for this service is conducted as a matter of priority, and a written report sent to SSI HIQA within three months of the publication of this report.
- 2.** The HSE should ensure that the centre management structure should be reviewed to achieve consistency, the management post is made permanent and that there are no more management changes in the centre for the foreseeable future.
- 3.** The HSE should ensure that the centre manager receives formal and regular supervision
- 4.** The HSE should ensure that recording keeping is more succinct.
- 5.** The HSE should ensure that given the young age of the children, the centre is monitored on a monthly basis and a written report of findings issued.
- 6.** The HSE should ensure that the complaint of one child is addressed.
- 7.** The HSE should ensure that the staff team receive further training in children's rights.
- 8.** The HSE should ensure that the Irish Association of Young People in Care is invited to visit the centre.
- 9.** The HSE should ensure that all children have a comprehensive care plan that reflects their needs.
- 10.** The HSE should ensure that statutory care plan reviews are held frequently for young children and have the placement of children in family type placements as priority.
- 11.** The HSE should ensure one child is found a suitable and appropriate foster care placement as soon as possible.
- 12.** The HSE (DML) should ensure that staff receive further training in the management of children's behaviour.
- 13.** The HSE should ensure that children in the centre are kept safe from abuse from their peers as required by standard 5 of the children's standards as a matter of priority.
- 14.** The HSE should ensure that the need for the protective surround covering the stairs is reviewed.