



Health Information and Quality Authority

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

INSPECTION OF A CHILDREN'S RESIDENTIAL CENTRE IN THE HSE DUBLIN NORTH EAST

**Inspection Report ID Number: 551
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Centre ID Number: 21**

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1. Introduction

The Health Information and Quality Authority (The Authority) Social Services Inspectorate (SSI) carried out an announced inspection of a children's residential centre in the Health Services Executive (HSE) Dublin North East Area under section 69 (2) of the Child Care Act 1991. Aoife Lenihan (Lead Inspector) and Kieran O' Connor (Co-Inspector) carried out the inspection over a two day period from 30th-31st May 2012.

The centre was last inspected in June 2009 2010 and a follow up inspection was conducted in March 2010. The reports can be accessed on the Authority's website www.hiqa.ie as inspection reports 364 and 353.

The centre was a detached two storey house located near good local amenities and had access to good public transport. The centre's purpose and function was to provide medium to long term care for up to five boys and girls aged between 12 and 18 years of age. The centre provides care to children under 12 in exceptional circumstances. It also provided an aftercare service to young people who had spent time living at the centre. At the time of inspection there were three boys and one girl living at the centre.

The main finding from this inspection was the high level of care provided by the centre to young people with diverse and complex needs. Inspectors found the centre had an experienced and committed team. The centre focused on building relationships and this approach had resulted in considerable improvement in the lives of the young people living there. The young people told inspectors that they were well cared for, felt safe and were confident in the staff caring for them.

This report makes a number of recommendations in relation to; supervision and support, preparation for leaving care and aftercare, managing behaviour, absence without authority, safety and fire safety. Inspectors commend the management and staff for the quality of care provided to the young people in the centre.

1.1 Methodology

Inspector's judgements are based on an analysis of findings verified from several sources including: evidence gathered through direct observation of practice, interviews, examination of records and documentation, and an inspection of accommodation, interviews with four young people, two parents, the centre manager, the acting deputy manager, one acting social care leader, two social care workers, the HSE monitoring officer, the alternative care manager, one school principal and three social workers.

Inspectors had access to the following documents:

- The centre's statement of purpose and function
- The centre's policies and procedures
- The centre's register of admissions and discharges
- The centre's census forms
- The children's care files
- Questionnaires completed by all children
- Questionnaires completed by social workers
- Complaints register
- The centre's staff personnel files
- The centre's register of significant event reports
- Details of restraint records at the centre in the past year
- Details of unauthorised absences at the centre in the past year
- The HSE monitoring report for the centre

1.2 Acknowledgements

Inspectors wish to acknowledge the hospitality and co-operation of the children, staff and other professionals involved in this inspection.

1.3 Management structure

The centre was managed by a Centre Manager who was assisted by an Acting Deputy Centre Manager. The Centre Manager reported to the Alternative Care Manager who in turn reported to the Area Manager Health Service Executive (HSE) Dublin North East.

1.4 Data on children

The following young people were living in the centre:

Listed in order of length of placement

<i>Young Person</i>	<i>Age</i>	<i>Legal Status</i>	<i>Length of Placement</i>	<i>No. of previous placements</i>
Female	17	Care Order	11 months	One Foster Placement Four Residential Care Placements Two Special Care Placement One High Support Placement
Male	16	Voluntary agreement	3 years, 5 months	None
Male	15	Interim care order	1 year, 5 months	None
Male	14	Interim care order	1 year, 5 months	None

2. Summary of Findings

Practices that met the required standard

Purpose and Function

This standard was met. The centre had a written statement of purpose and function. This clearly outlined the aims and objectives of the centre and inspectors found that the young people living at the centre were appropriately placed.

Management

This standard was met. Inspectors found from interviews with young people, parents, staff and external professionals that it was a well managed centre. Inspectors found that the centre's management team an established, caring and approachable one. The centre had a qualified manager supported by a qualified deputy manager. The centre manager had been working in the centre for over 15 years and had established an effective approach to care based on building relationships. She was also involved in the day to day running of the centre.

The deputy manager was responsible for administration, rotas and deputising for the centre manager. Inspectors found the management team's style complemented each other. Both managers supervised and supported staff.

There was good oversight and monitoring mechanisms in place both internally and externally such as staff supervision and oversight of all centre records. Inspectors found the centre managers consulted with young people and staff. Staff meetings occurred every two weeks.

The centre manager was supervised and supported by the external line manager, who met the centre manager weekly. Inspectors found that the external line manager was well informed about the needs of the children living in the centre.

Notification of significant events

This standard was met. The centre had a register of significant incidents. External professionals interviewed told inspectors they were satisfied they had been notified of all significant incidents. In the 12 months prior to the inspection there had been 65 serious incidents.

The centre manager, the monitoring officer and staff the centre had recently reviewed their threshold for recording and reporting serious incidents. This was discussed at staff meetings and was under continuous review to ensure consistency in reporting. Inspectors found the staff team could clearly identify what types of incidents warranted reporting.

Staffing

This standard was met. The management team were supported by two child care leaders and nine child care workers, two of whom were part time. The staff team were experienced in residential care and the majority had a qualification in social care or equivalent. The staff team was a stable and effective one and staff had worked at the centre from seven to 16 years. Inspectors also found that a number of staff had been supported by the centre and the HSE in achieving social care qualifications while working at the centre.

A sample of rotas reviewed reflected adequate levels of staffing and that there was a manager or child care leader on each shift. The centre always had two staff on duty and a third to provide cover for access visits. Two additional staff members were providing relief cover for staff leave and they were specifically chosen by the centre manager for their experience and knowledge of the young people living in the centre. Relief staff were rostered for extra shifts to ensure that the levels of staff met increased need at specific times such as staff leaving the centre for access visits.

Staff vetting

This standard was met. Inspectors found that of the staff files sampled all had garda vetting and requisite references.

Training and development

This standard was met. Inspectors found staff attended regular training and refresher courses in therapeutic crisis intervention (TCI), first aid, fire safety and *Children First: National Guidance for the Protection and Welfare of Children*. They also attended other courses to support their professional development.

Monitoring

This standard was met. The centre was monitored by a HSE monitoring officer. She had visited the centre twice in the 12 months prior to inspection and completed a self assessment and monitoring report within one month of the inspection. The monitoring officer was well informed about the centre and the comprehensive report detailed 26 recommendations.

Inspectors found that the centre had completed 24 out of 26 recommendations at the time of the inspection. The HSE Monitoring Officer confirmed receipt of all reports of significant incidents made by the centre.

Care of young people

This standard was met. Inspectors found the centre provided young people with a stable homely environment and young people felt supported to achieve their full potential. All could name a staff member who they could turn to if they were worried about anything. Inspectors found that individual identity was promoted and young people were encouraged in their hobbies and interests. Young people told inspectors that they really enjoyed activities at the centre and that staff participated in activities with them such as football, attending youth clubs and music.

Young people and centre staff shared meals and inspectors observed warm and relaxed interaction at mealtimes. Young people were encouraged to eat healthy meals. Inspectors found a wide variety of fresh fruit and vegetables available. External professionals told inspectors that the young people talked about looking forward to meals at the centre. Birthdays and other significant events were celebrated at the centre.

Race, culture, religion, gender and disability

The centre had a policy in relation to diversity and the purpose and function detailed how the centre met young people's spiritual needs. Staff told inspectors about some young people attending gospel masses which they enjoyed and that staff encouraged young people to talk about spirituality and religious beliefs.

Safeguarding and child protection

This standard was met. The centre has child protection policies detailed in the centre's policies and procedures manual. Staff had completed training in *Childrens First: National Guidelines on the Protection of Children*. Inspectors found staff were knowledgeable about the principles of child protection and safeguarding and their role in identification and notification of child protection concerns. Inspectors found staff could challenge each other in an open culture where concerns and issues were communicated to the centre managers and social workers. Young people told inspectors they could talk to centre staff if they were worried about anything.

There had been two child protection reports made by the centre in the 12 months prior to inspection. Inspectors found that the centre, external managers and professionals were managing these appropriately including allocating additional resources as required and putting safety plans in place.

Education

This standard was met. The centre had a policy emphasising the importance of education. All of the children living at the centre were attending school and staff helped young people with homework and drove them to and from school. Inspectors observed school achievement awards displayed in the centre.

Inspectors found education was greatly valued by the centre. Inspectors met with a school principal as part of the inspection who praised the centre for using creative ways of encouraging attendance. This was in relation to one young person who had difficulty attending school. Consequently inspectors found this young person was now attending school every day.

Children's Rights

This standard was met. Young people could name a staff member or manager they would turn to if they were worried about anything. They told inspectors that staff had spoken to them about their rights and given them a copy of the national standards for children. They also told inspectors they felt listened to.

Inspectors observed an open culture, one in which young people could express their views and wishes that was effective in ensuring their views were heard. Inspectors observed that young people could sit in the office and talk to staff about any worries or concerns. This is good practice.

The centre had a policy on complaints. The children were aware of the centre's complaints process and told inspectors they were confident to make a complaint should they wish to do so. Young people who had made a complaint reported that they were happy with the result. Centre records showed that there were two complaints made in the year prior to inspection. Inspectors found that these had been investigated and concluded appropriately and that young people were kept informed. The centre recorded complaints in a register of complaints that had been recently amended to detail the investigation outcome and the date of the investigation outcome.

Access to information

This standard was met. The centre had a policy on access to information. Young people understood that they could access their individual care files.

Suitable placement and admissions

This standard was met. The centre had a detailed policy on admissions to the centre in the *policies and procedures for children's residential centres, HSE Dublin North East*. This outlined the admission process for planned and unplanned admissions, pre-admission risk assessment and the key workers procedure for admissions to the centre.

There was one admission to the centre in the last 12 months. Inspectors found this had followed a planned process. Young people and their parents told inspectors that they were given information and got the opportunity to visit the centre before going

to live there. The centre was introducing a detailed risk assessment for all new admissions.

The young people living in the centre had complex and very different needs. From interviewing staff and external professionals inspectors found that the young people were suitably placed and the centre was meeting their diverse needs.

Social work role/Supervision and visiting of children

This standard was met. All young people living at the centre had a social worker. Through centre records, questionnaires and interviews, inspectors found that social workers visited the children regularly and met with them in private. They had good knowledge about the needs of the young people.

Social workers told inspectors that communication with centre staff was good. They confirmed they were notified about all significant events and child protection concerns. The frequency of visits depended on the needs of the young people and the number of visits increased when required. Social workers told inspectors that they read centre files from time to time.

Statutory care plans and reviews

This standard was met. All of the children living in the centre had a care plan. Statutory care plans were reviewed in line with the regulatory requirements for each young person. Young people told inspectors they were aware of their care plan and could look at it if they wanted to.

Inspectors reviewed care plans and found them comprehensive. The needs for care, assessment of health, educational, emotional and behavioural, identity, family relationships, social and self care skills as well as the young persons and parent's views were clearly documented. The ability of the placement to meet young person's needs was documented in the form of a comprehensive action plan with responsible person and timescale outlined. There was evidence of parents and young people being involved in drawing up care plans and attending care plan review meetings.

Contact with families

This standard was met. Inspectors found that the centre placed a high value on contact with families and made great efforts to work with children and their families in the community. Inspectors found family members visited young people at the centre and staff encouraged contact with families. Staff drove children to and from access visits.

Inspectors met with two parents during the inspection. They told inspectors that they felt welcomed at the centre and were treated with respect. One parent told inspectors how on one occasion she cooked a meal for the young people and staff. Parents told inspectors the centre kept them informed at all times about their children and that they got on very well with centre staff.

Emotional and specialist support

This standard was met. The young people living at the centre had complex needs and attended external professional specialist services. Inspectors found the centre provided considerable emotional support also. Young people had key workers and they told inspectors that they could talk to them or other centre staff if they were worried about anything. Inspectors found the relationships and support provided by the centre manager and staff to be a key element in improving the lives of the young people.

Health

This standard was met. All children had access to a doctor and had a medical on admission to care as required. Staff were knowledgeable about the young peoples health needs and inspectors found the centre met the young people's complex health needs including attending hospital appointments and following care plans outlined by healthcare professionals. One young person had specific medical needs and staff were knowledgeable about how to support the young person and kept good documentation in this regard.

Staff and external professionals told inspectors that communication between the centre and multiple healthcare professionals, hospitals and external organisations was managed well. Medications were secured in a locked cabinet in the office. Inspectors found staff guided young people to make healthy life choices.

Discharges

This standard was met. The centre register showed there were two planned discharges from the centre in the 12 months prior to inspection.

Administrative and care records

This standard was met. Each young person had an individual care file. Inspectors found there were good recording systems in place to reflect the day to day operations in the centre.

Care files were well structured, accessible and securely stored. The content of care files, log books and other records were of a good standard, clear and written in a respectful tone. Inspectors found evidence of weekly reports and monthly updates from key workers and centre staff. The centre managers reviewed all documents before filing. This was good practice.

Register

This standard was met. A register of admissions contained up to date information on all placements and information as required by regulation. The register detailed the location of care files of discharged young people that had been professionally archived to ensure ease of access in the future.

Accommodation/Maintenance and repairs

This standard was met. The centre was located in a detached house in a mature suburban housing estate. The centre was furnished and decorated to a high standard. It had a spacious kitchen/dining area, a living room and conservatory with

a television and a garage for storage. It had a large and well maintained back garden. There were photos of the young people and a number of paintings that staff had done displayed on the walls.

All young people had their own bedrooms which were spacious and nicely decorated. All bedrooms had en-suite bathrooms. The centre was well maintained and staff told inspectors that maintenance requests were dealt with promptly by relevant HSE maintenance department.

Practices that met the required standard in some respect only

Supervision and Support

This standard was mostly met. The centre had a supervision policy detailed in *policies and procedures for children's residential centres, HSE Dublin North East*. This specified that supervision was provided to staff at intervals no greater than six to eight weeks. The policy also specified that personnel supervise other members of the staff team at a grade below them.

Supervision was provided to the staff team by the centre manager, the deputy manager and a team leader. The centre manager was in turn supervised by the alternative care manager. Through reviewing a sample of personnel files and interviewing staff, inspectors found that supervision was of a good standard and focused on the young people and their placement plans. Staff told inspectors that they were held accountable and greatly supported by both managers. The centre had regular staff meetings every two weeks.

However the deputy manager was supervised by a staff member of an equivalent grade. While this was beneficial in reflecting on practice inspectors recommend that additional formal supervision be carried out by the centre manager to ensure that supervision reflects lines of accountability.

Managing behaviour/restraint

This standard was met in part. Staff spoke about managing challenging behaviour in a sympathetic and understanding way. The centre managed challenging behaviour through building relationships with young people. There were no instances of restraint and two occasions when physical intervention had been used in the past twelve months. Both incidents had been recorded on therapeutic crises intervention (TCI) forms and notified to the appropriate external professionals. The centre had a crisis intervention review group that reviewed use of restraint and physical intervention every three months. Care records reviewed had Individual Crisis Management Plans (ICMP) that assisted the staff in identifying and managing specific behaviours. Staff had regular refresher training on TCI.

The centre kept records of sanctions applied to the children. The centre concentrated on building relationships and inspectors found sanctions when applied were appropriate, proportionate and fair. The young person's response and oversight by the centre manager was recorded.

Despite this young people reported that they sometimes did not feel safe due to the behaviour of other young people. Inspectors acknowledge that the centre is currently managing this but recommend that the centre continues to manage behaviour to balance the needs of all young people living at the centre.

Absence without authority

This standard was met in part. There were 15 instances of unauthorised absences from the centre in the year prior to inspection. These ranged from two hours to 24 hours. Absences were reported to the relevant social workers, external managers, parents and Gardai.

Inspectors found one young person living at the centre regularly left the centre and the mainly overnight absences carried additional risk. Staff focused on keeping the young person safe and building trust to improve this situation and had agreed that the young person contact the centre when absent. Inspectors found evidence of this on daily reports. Inspectors acknowledge the centre are managing this situation using a measured approach but recommend that every effort is made to decrease the level of unauthorised absences from the centre.

Preparation for leaving care and aftercare

This standard was met in part. Staff worked closely with young people to encourage independence and prepare young people for leaving care. The centre provided an aftercare service to young people that had spent time living at the centre and staff told inspectors about past residents who kept in touch and visited the centre from time to time. At the time of the inspection two of the young people were aged 16 and over. Neither had an aftercare worker assigned to them despite one young person nearing 18 years of age.

One young person's recent child in care review recommended an aftercare plan be drafted and an application made to the HSE resource panel regarding aftercare and allocation of an aftercare worker. This was in progress at the time of the inspection. This young person said they were unsure about their aftercare plan, did not feel prepared for and were worried about leaving care. It is recommended that the HSE in consultation with the young person assign an aftercare worker and complete an aftercare plan.

A second young person had an aftercare plan and aftercare needs assessment completed by their social worker and key worker. While the aftercare plan was documented it had not been agreed definitively by the young person or the HSE resource panel. Inspectors found the centre had a flexible approach to the aftercare plan including maintaining the placement after they turn eighteen and moving to independent living on a phased basis. Inspectors found the centre was focused on the best interests of the young person in this respect. It is recommended that the HSE in conjunction with the young person agree on aftercare including a contingency plan.

Safety

This standard was mostly met. The centre had a safety statement that was in draft form. It also had a risk assessment detailing hazards and control measures. It is recommended that the current safety statement be finalised and communicated to staff.

Fire safety

This standard was met in part. The centre's risk assessment stated fire drills are carried out twice yearly. However staff told inspectors that fire drills were carried out quarterly and when new young people were placed in the centre. Inspectors found evidence of fire drills being carried out quarterly in the last six months and fire equipment had been serviced within two weeks of the inspection. The centre also maintained a fire book that detailed the young people and staff that were physically present in the centre. Staff had received fire training.

The centre did not provide written confirmation from an architect or certified engineer that all requirements in relation to fire safety and building control regulations had been complied with. This had been the subject of recommendations in the previous inspection and follow up inspection. Inspectors recommend that this occurs without delay.

3. Findings

1. Purpose and function

Standard

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

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

2. Management and staffing

Standard

The centre is effectively managed, and staff are organised to deliver the best possible care and protection for young people. There are appropriate external management and monitoring arrangements in place.

	<i>Practice met the required standard</i>	<i>Practice met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Management	√		
Register	√		
Notification of significant events	√		
Staffing	√		
Staff vetting	√		
Supervision and support		√	
Training and development	√		
Administrative files	√		

Recommendation:

1. The HSE should ensure that formal supervision reflects lines of accountability.

3. Monitoring

Standard

The HSE, for the purposes of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements are in place to enable an authorised person, on behalf of the 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	√		

4. Children's rights

Standard

The rights of young people are reflected in all centre policies and care practices. Young people and their parents are informed of their rights by supervising social workers and centre staff.

	<i>Practice met the required standard</i>	<i>Practice met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Consultation	√		
Complaints	√		
Access to information	√		

5. Planning for children and young people

Standard

There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. The plan states the aims and objectives of the placement, promotes the welfare, education, interests and health needs of young people and addresses their emotional and psychological needs. It stresses and outlines practical contact with families and, where appropriate, preparation for leaving care.

	<i>Practice met the required standard</i>	<i>Practice met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Suitable placements and admissions	√		
Statutory care planning and review	√		
Contact with families	√		
Supervision and visiting of young people	√		
Social work role	√		
Emotional and specialist support	√		
Discharges	√		
Preparation for leaving care and Aftercare		√	
Children's case and care files	√		

Recommendation:

- The HSE should ensure that all young people two years prior reaching the legal age of leaving care have an aftercare worker and aftercare plan including contingency arrangements as required.

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:

3. The HSE should ensure the centre continues to manage behaviour to balance the needs of all young people living at the centre.
4. The HSE should ensure that every effort is made to decrease the level of unauthorised absences from the centre.

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	√		

8. Education

Standard

All young people have a right to education. Supervising social workers and centre management ensure each young person in the centre has access to appropriate educational facilities.

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

9. Health

Standard

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

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

10. Premises and Safety

Standard

The premises are suitable for the residential care of the young people and their use is in keeping with their stated purpose. The centre has adequate arrangements to guard against the risk of fire and other hazards in accordance with Articles 12 & 13 of the Child Care Regulations, 1995.

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

Recommendations:

5. The HSE should ensure that the current safety statement be finalised and communicated to staff.
6. The HSE should ensure that a written confirmation from an architect or certified engineer that all requirements in relation to fire safety and building control regulations be provided without delay.

4. Summary of recommendations:

1. The HSE should ensure that formal supervision reflects lines of accountability.
2. The HSE should ensure that all young people two years prior reaching the legal age of leaving care have an aftercare worker and aftercare plan including contingency arrangements as required.
3. The HSE should ensure the centre continues to manage behaviour to balance the needs of all young people living at the centre.
4. The HSE should ensure that every effort is made to decrease the level of unauthorised absences from the centre.
5. The HSE should ensure that the current safety statement be finalised and communicated to staff.
6. The HSE should ensure that a written confirmation from an architect or certified engineer that all requirements in relation to fire safety and building control regulations be provided without delay.

Social Services Inspectorate

Action Plan for Inspection No. 551

Centre ID: 21
HSE Area: HSE Dublin North East

Date Action Plan Issued: 4th July 2012

No.	Recommendation	Action to be taken	Person Responsible	Implementation Date
1	The HSE should ensure that formal supervision reflects lines of accountability.	The Deputy Manager is now receiving formal supervision from the Centre Manager thus reflecting lines of accountability.	Centre Manager	02/07/12
2	The HSE should ensure that all young people two years prior reaching the legal age of leaving care have an aftercare worker and aftercare plan including contingency arrangements as required.	The HSE will ensure that young people in the centre who are entitled to an aftercare worker will have an aftercare worker appointed. The social worker, aftercare worker and the keyworker will convene an aftercare planning meeting and draw up a plan forthwith.	Alternative Care Manager Social Worker Aftercare worker Keyworker	15th August 2012 31st August 2012.
3	The HSE should ensure the centre continues to manage behaviour to balance the needs of all young people living at the centre.	The centre continues to manage behaviour to balance the needs of all young people living in the centre.	Centre Manager	On-going.

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No.	Recommendation	Action to be taken	Person Responsible	Implementation Date
4	The HSE should ensure that every effort is made to decrease the level of unauthorised absences from the centre.	The centre will continue to manage absences from the unit with a view to reducing the level of unauthorised absences	Centre Manager	On-going
5	The HSE should ensure that the current safety statement be finalised and communicated to staff.	The safety statement has been completed and communicated to all staff.	Centre Manager	Completed 13th June 2012

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6	The HSE should ensure that a written confirmation from an architect or certified engineer that all requirements in relation to fire safety and building control regulations be provided without delay.	At time of inspection the centre had a letter to state that the premise is in 'substantial compliance' and the centre is currently awaiting the final report from the engineer. Once the report has been received, the centre will begin to address any outstanding issues preventing full compliance. This work will be prioritised with the aim of achieving full compliance within four weeks of receiving the final report.	Centre Manager	01/10/2012
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