



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cálíocht Sláinte

**Social Services
Inspectorate**

A

CHILDREN'S RESIDENTIAL CENTRE

IN THE

HSE DML AREA

FINAL

INSPECTION REPORT ID NUMBER: 296

Publication Date: 18th May 2009
Fieldwork Dates: 18th & 19th February 2009
SSI Inspection Period: 11
Centre ID Number: 10

ADDRESS: Social Services Inspectorate, George's Court, George's Lane, Smithfield, Dublin 7.
PHONE: 01-814 7400 FAX: 01-814 7499
WEB: www.hiqa.ie

Contents

- 1.** Introduction
 - 1.1 Methodology*
 - 1.2 Acknowledgements*
 - 1.3 Management structure*
 - 1.4 Data on young people*
- 2.** Analysis of findings
- 3.** Findings
- 4.** Summary of recommendations

1. Introduction

The Health Information and Quality Authority Social Services Inspectorate carried out an unannounced inspection of a children's residential centre in the Health Service Executive Local Health Office Dublin Mid-Leinster (HSE DML). Kieran O'Connor (lead inspector) Sharon Austin and Linda Moore (co- inspectors) conducted the inspection under *Section 69 (2) of the Child Care Act 1991* over a two day period from the 18th to 19th of February 2009.

The centre, a purpose built detached house on its own large grounds was based in an attractive area on the outskirts of a small town. It was indistinguishable from the surrounding homes. It was established 23 years ago in response to the needs of a sibling group.

The centres recently revised statement of purpose and function, which was reflected in practice, stated that the centre was a residential service for the HSE DML. It provided medium and long term placements for up to 5 girls and boys from 14 to 18 years on admission.

At the time of inspection there were 5 young people living in the centre, two boys and three girls aged between 14 and 17 years. They had been living there between six weeks and eight years and most of them told inspectors that they considered it their home. The centre was subject to a themed inspection in relation to aftercare by the social service inspectorate in 2008 and most recommendations were met in full. However a recommendation in relation to the development of a comprehensive aftercare service had not been met at the time of inspection. This will be discussed in the aftercare section below. A monitoring audit had also been completed in January 2008 by the HSE DML monitoring officer and the majority of recommendations had been met.

Overall inspectors found that the management and staff provided a good standard of care and this was the experience the young people clearly articulated when interviewed by inspectors. In particular there was a culture in the centre that fostered an attitude among the young people of caring for each other and other children who may come to live in the centre in the future. Inspectors commend the management and staff team for providing high quality service to children and young people. The areas that required improvement related to external management, vetting and formal staff supervision, aftercare and aspects of accommodation.

1.1 Methodology

Inspector's judgements were based on evidence of findings verified from several sources including direct observation, a review of records, interviews with the five young people, a parent, the manager, two social care leaders, three social care workers, five social workers, three of their team leaders and the centre line manager. Telephone interviews were also conducted with four parents who had children residing in the centre and a probation officer for one of the young people.

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

- The centre statement of purpose and function
- The centre policies and procedures
- The young people's care plans
- Questionnaires completed by social workers
- The monitoring officer's report
- The young people's care files
- Administrative records

- Details of physical restraints
- Details of unauthorised absences.

1.2 Acknowledgements

Inspectors wish to acknowledge the co-operation of the young people, management, staff and all other professionals involved in this inspection.

1.3 Management structure

The centre was managed by a unit leader and line managed by the local residential manager who in turn reported to the general manager.

1.4 Data on young people

At the time of inspection, the following young people were residing in the centre.

Listed in order of length of placement

<i>Young person</i>	<i>Age</i>	<i>Legal status of care</i>	<i>Length of placement</i>	<i>Number of previous placements</i>
#1 male	17	Care order	8.5 years	1 foster care 1 residential care
#2 male	14	Care order	6 years	2 foster placements 2 residential placements
#3 female	17	Voluntary care	5years 11 months	2 foster care 2 residential care
#4 female	17	Care order	6 months	2 foster placement
#5 female	17	Voluntary care	6 weeks	4 residential care

2. Analysis of findings

Practices that met the required standard

Primary Care

The children and young people in the centre received a high standard of primary care and their health needs were well met. There were written policies on all aspects of care and inspectors found these were largely reflected in practice. All young people identified a staff member they would talk to if they were upset or stressed about any aspect of their lives.

The young people liked living in the centre and saw it as their home. All their bedrooms were personalised with pictures of their families and favourite musicians on their bedroom walls. Each young person had chosen the paint colour for their bedroom. One young person said "we are like a family here we look out for each other". The young people were positive about the care they received. One young person when asked about living in the centre said, "I feel really safe here, the staff are nice and they know me inside out". Inspectors observed the staff relating to the young people in a sensitive, patient and cheerful manner. Another young person when asked what she would like to see changed replied "well I wouldn't change the staff".

There was a strong emphasis on daily routines which the young people appreciated. Meal times were occasions where everyone sat down together to discuss the events of the day. Young people were involved in swimming, dance lessons, martial arts, playing sport and studying extra subjects with members of the staff team. The young people were involved in drawing up the daily menu and sometimes participated in cooking themselves which they really enjoyed. All young people received a clothing allowance and could choose their own clothes. The staff team were aware of the young people's spiritual needs and young people were encouraged to attend a religious service of their choice weekly. They all had key workers who met with them individually and inspectors found evidence of some excellent key working practices. The staff team were creative in the way they conducted these sessions. For example, one of the young people was anxious about an upcoming interview for a job. One of the staff team conducted frequent interviews treating it like a quiz with the young person and he subsequently succeeded at interview. The young person told inspectors that this was very important to him and it had a positive impact on his self confidence. This was good practice.

Professionals external to the centre told inspectors that all the staff members were well informed about the progress of each young person.

Management and staffing

The centre was managed by a unit leader (local centre manager). A shift leader was assigned daily to co-ordinate centre tasks. Inspectors formed the view that the manager was respected by both the young people and the staff team. The unit leader provided purposeful leadership, focus and direction, and was accessible to both the young people and staff. There was a culture of consultation, staff empowerment and reflective practice, and staff confidence and morale were high. The unit leader was a constant presence in the centre and was well informed on all aspects of day-to-day care practices and on the needs of the individual young people. The young people told inspectors that if they were worried about something they would go and talk to her.

At the time of inspection, inspectors found a qualified, experienced dedicated staff team, providing a high standard service to the young people. The turnover of staff was low thus providing stability. There were 16 posts including the unit leader in the centre covered by 19 staff members. Five of the staff had worked in the centre for over twelve years. Nine had worked in the centre for over six years. There was with only one male member of staff and two of the young people suggested more male staff members

when asked what changes they would make in the centre. Inspectors urge the HSE DML to continue in their efforts to recruit male members of staff to ensure gender balance and to provide opportunity to model appropriate male and female relationships. There was a coherence and consistency in the staff approach the young people.

The staff team summed up the centre philosophy as one where they never give up on the children and young people.

A special feature of this staff team was their commitment to the young people giving them practical support and acting as advocates for them at that early vulnerable stage after leaving care. Inspectors found that this commitment was shared by all the staff team members interviewed. Professionals external to the centre spoke of the dedication of the staff team and their partnership approach to working with young people. Inspectors were told that some of the young people had made great progress and had blossomed since they came to live in the centre.

Children's Rights

The standard on children's rights was met. Practice in this area was particularly good. All the young people were informed of their rights on admission and received a child friendly booklet outlining these rights. The children and young people told inspectors that they were consulted about all aspects of their lives and inspectors found records indicating a good standard of consultation in key work sessions covering areas such as relationships, planning for case reviews, family involvement, and preparation for leaving care. Young people were also encouraged and facilitated to express their views in their care reviews. The centre had a well-developed complaints procedure that worked well in practice.

Another positive forum for consultation was the centres weekly community meetings. Inspectors were invited to attend and noted that there was an atmosphere of authenticity in the way the meeting was conducted. It was an open forum and issues such as house rules, centre holiday plans and relations between the young people themselves were aired in a respectful and constructive way.

All the staff team interviewed and the young people themselves were aware of the young people's right to information. Some of the young people read their daily log book and signed it to record that they had read it.

Administrative files

Care files and administrative records were generally of a high standard. All the children had care plans and reviews. The reviews were recorded as minutes. Inspectors recommend that these minutes become part of the care plan document. Inspectors found that great care was taken to maintain certificates, photos and memorabilia safely in the young peoples care files. This is commendable.

The management of behaviour

Inspectors found that the young people were well cared for, that staff related well to them, and that there was a high level of co-operation and an air of affection, banter and fun between them. The behavioural expectations were explicit. However, they were negotiated with young people. Sometimes some of the young people got into difficulties with the law. The young people were challenged and supported in managing their own behaviour in conjunction with their probation officer. There was close cooperation between the probation officer and the staff team. There had been some alcohol consumption by some of the older young people outside the centre. Given the vulnerabilities of the young people inspectors urge the centre to continue high level monitoring and risk assessment.

There was a strong emphasis and attention to relationship building between the staff team and the children. The staff team told inspectors that consistency in the team approach, a good relationship with the young people, and an understanding of them and their families was the key factor in managing behaviour. One young person told inspectors that the staff didn't overreact when she "sometimes lost the head".

Overall the centre had an atmosphere of purposefulness, warmth, calmness and fun.

Unauthorised Absences

There had been 11 instances of unauthorised absences from the centre involving two young people in the past year. Most of the absences were of short duration. One was for the duration of one week when a young person returned home following an access visit. All relevant people were informed in line with HSE policy and the absences were managed safely.

Physical restraints

There were no physical restraints in the past year.

The social work role and care planning

The standard on social work and care planning was met. All the young people had social workers who visited them regularly. Inspectors found that they had a comprehensive knowledge and understanding of the young people's individual needs. Some social workers had worked with the young people for over five years, in one case ten years and it was evident to inspectors they had an excellent relationship with them. This was confirmed by the young people who told inspectors that their social workers always "stood up for them" and although they sometimes don't agree with their social worker, "this was ok" as they know that they are always looking out for them. One young person told inspectors that he had been nervous about his future but was now content about it because his social worker, centre staff and other professionals had devised an aftercare plan in consultation with him. He was very happy with the outcome and felt secure about his future. He described his relationship with his social worker as "brilliant". Some young people told inspectors that having the same social worker since they were children was very important to them as it was much easier talking to someone they knew well. Another young person remembered that when they first came to the centre the social worker "stayed real late helping to settle me in".

Inspectors found that there was a high level of inter-professional cooperation between social workers and the centre. However, some social workers and other professionals find some aspects of communication with the centre needed improvement. This related to giving and receiving messages in relation to young people. Inspectors advise that the centre manager conducts a review of systems of communication with external professionals to ensure constancy among the staff team. All the young people had care plans and they were regularly reviewed. All social workers interviewed by inspectors had read centre files from time to time.

Child safety and protection

The staff team interviewed by inspectors had knowledge of centre policies in relation to the safety and wellbeing of the children and were vigilant and clear about how they would act in the event of concerns about the safety of the young people. Safeguarding was enhanced by a culture of openness and transparency amongst staff, which included an ability to challenge each other's practice. The staff team gave examples to illustrate this during interview. They told inspectors that they felt safe in the centre and were confident that any safety concerns would be dealt with by the centre staff or their social worker.

Contact with families

Inspectors found that the centre had a commitment to families and practice in this area was good. All the families received a booklet outlining the centres services when their child was admitted. All staff interviewed were aware of the central role that family played in the child's identity and potential support and where feasible made sure that contact was regular and meaningful. Most of the young people had some family contact. One parent told inspectors that he found staff very kind and respectful towards him and kept him well informed.

Health and specialist services

The standard on health was mostly met. All the young people had a general practitioner and a choice of a male or female doctor. The staff team were aware of the health needs of the young people. All had medical examination on admission if required. However, there was no medical history on file. Medication records on health needed to be reviewed as recording of prescribed medicine was not clear and needs to adhere to best practice. Some medicine was also out of date and needed to be returned to the pharmacy for safe disposal. There needed to be a system in place for the routine checks of medication and first aid kits. Overall inspectors advise a review of the process in place for the management of medication

The food in the centre was varied and nutritious. Key workers provided young people with information and advice regarding relationships and sexuality. The children and young people had individual special requirements. The centre was ever vigilant and child centred and regularly assessed medical specialists, speech and language, occupational and play therapy, psychiatric and psychological services as required. Inspectors advise that the key worker of one of the young people link in with a national group who are expert in understanding a particular issue of one of the young people.

Education

The staff team placed a high value on education and were clear that the young people deserved every opportunity to get the best possible education. Some of the young people had major school attendance difficulties prior to coming to live in the centre. Now all young people were attending school or training. One young person had been expelled from a project for non-cooperation. The staff team and centre leader showed this young person in very concrete terms the consequences this could have in the attainment of his career choice. They also introduced this young person to a professional already working in this area who advised him on his application and interview. The manager in conjunction with a medical specialist and the young person made a strong written case for his return and this succeeded. A young person recently arrived, was not attending school or training at the time of inspection partially because of difficulties locating appropriate training locally and partially because of her unwillingness to cooperate with the staff team in this matter. The staff team were unrelenting in their efforts to locate a suitable training for this young person and shortly after this inspection she began attending an educational project.

The care files had a discrete section which held detailed copies of all the young people's educational achievements.

Nearly all the young people told inspectors with considerable pride that they hoped to enter careers that required that they stay on in school as long as possible. The standard on education was met.

Register

The centre had a register specifying all the information required by regulation.

Practices that met the required standard in part

Inspectors found that the standards that were partially met were in relation to staff supervision, responses to monitoring recommendations, health and safety and aspects of the centre premises.

Staff supervision

The management structure in the regional residential child care services was well resourced with two residential managers managing four centres between them. The regional manager for this centre was in regular contact with the centre manager. However, formal supervision had only occurred three times in the year prior to inspection. This is insufficient and needs to be addressed. The unit leader of the centre was available to the staff team on a daily basis and the quality of supervision was of a high standard. Informal supervision was frequent for all staff and was seen by them as supportive, educational and empowering. However, because of a very demanding period over the past few months formal supervision had fallen into abeyance in some cases. Given the complex nature of some of the young people's needs formal supervision needs to recommence. Two of the social care leaders had supervision training and given the large staff team, inspectors recommend that they share the supervision task. This had been a recommendation following the monitoring officer's report referred to previously. Inspectors recommend that formal supervision recommences for all the staff team.

Other supports

Staff meetings occurred on a weekly basis. These were well attended and used as an education and training forum in addition to reviewing the needs of the young people in their care. Staff had received training in Children First, The National Guidelines for the protection and Welfare of Children Therapeutic Crisis Intervention (TCI) court room skills, health care risk management, cultural diversity and occupational first Aid and other topics relevant to their work. The HSE DML also had a policy of supporting staff to obtain relevant qualifications.

Staff also had support through the employee assistance service in the event of a stressful incident.

Monitoring

The standard on monitoring was well met. The monitoring officer received notification of all significant events. She had completed a comprehensive monitoring audit report in 2008. Most recommendations had been implemented and the remaining ones were nearly completed. She had regular contact with the centre. Inspectors recommend that the remaining recommendations are completed.

Aftercare

The standard on aftercare was met in part. This standard was subject to a themed inspection in June 2008 prompted by a complaint by a young person.

The HSE DML's draft policy on aftercare stated that amongst other things, they endeavour to act as a corporate parent and constantly improve aftercare services for young people up to the age of 21 years. The HSE implemented most of the recommendations stemming from the themed inspection and improved the provision of aftercare in response to this young persons needs.

However, some of the other young people became distressed and insecure about their own future in response to the perceived poor aftercare provision initially provided to the young person referred to previously. The young people told inspectors that they had witnessed the distress of one young person in relation to their aftercare and were fearful that they would be unsupported once they reached eighteen. This had changed.

On this occasion inspectors found that the young people had comprehensive aftercare plans in place and had the choice amongst other options to remain in the centre until they were 21 years of age if they were pursuing education. The young people told inspectors that their worries had now been addressed. This is very good care practice.

Inspectors were concerned however to note that centre's aftercare policy had changed. The previous policy allowed for their bed to be maintained in the centre for seven weeks depending on the needs of the young person where as the amended centre policy diminished the aftercare service to a maximum of three months and then only if there is a room available. The Residential Child Care Manager told inspectors this was intended to be an improvement. This needs clarity. Inspectors recommend a review of this aspect of centre policy to reflect the progressive aftercare practice now evident in the centre and implement this policy immediately. Inspectors were told that an aftercare service is in the process of being developed and a HSE confined competition has commenced for a coordinator of this evolving service.

Health and safety

A health and safety audit was carried out in February 2007 and recommendations were made. A follow up audit was conducted in February 2009 and all substantive recommendations were met. Inspectors recommend that the remaining recommendations listed below are completed as soon as possible.

Premises and accommodation

External premises

The premises are suitable as a children's home. It looked similar to other homes in the area and has ample garden space for the young people's recreation. However the garden needed to be cleared of old building material, old furniture and a general upkeep of the grounds should be carried out on a regular basis, oil tanker needed to be screened off for safety and new seating is required for the games room situated in the garden.

Internal centre requirements

The centre needs to be repainted. The sinks in the young people bedrooms needed to be repaired or replaced. All bedroom mattresses needed to be replaced.

Practices that did not meet the required standard

Practices in relation to staff vetting and fire safety did not meet the standards.

Vetting

All but one of the staff team had the required garda clearance. However, this staff member did not have the required garda clearance three years after commencing employment in the centre. In another case The HSE DML received the required three references' over nine months after a member of staff started work in the centre. Five of the staff team had two rather than the required three references.

Vetting was subject to recommendations in previous inspections. Inspectors were most concerned to find that there are still problems in this area. Inspectors recommend that the outstanding garda clearance is obtained immediately and in future three references are obtained prior to the commencement of employment in the centre. Inspectors recommend that the HSE DML audit internal systems in place in order to identify roadblocks that hinder compliance with this standard.

Fire safety

The centre had not written confirmation from a certified engineer or a qualified architect that all statutory requirements relating to fire safety and building control had been complied with.

3. Findings

3.1 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	√		

3.2 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:

- 1. The HSE DML should ensure that all care staff receive regular formal supervision.**
- 2. The HSE DML should ensure that the outstanding garda clearance is obtained immediately. In future three references are obtained prior to the commencement of employment in the centre.**
- 3. The HSE DML should conduct an audit of internal systems in order to identify roadblocks that hinder compliance with this standard.**
- 4. The HSE DML should ensure that decisions from care plan review meetings are integrated into the care plan.**

3.3 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 DML should ensure that all of the monitoring officer's remaining recommendations are implemented.

3.4 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	√		

3.5 Planning for children and young people

Standard

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

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

Recommendations:

6. **The HSE DML should ensure that their draft aftercare policy is ratified as soon as possible and the centre's aftercare policy is modified to reflect positive centre practice.**
7. **The HSE DML should ensure that a coordinator of aftercare is appointed without delay.**

3.6 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	√		

3.7 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	√		

3.8 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	√		

3.9 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	√		

Recommendation:

8. The HSE DML should ensure that
 - Recording of prescribed medicine on the medication records is clear as per best practice.
 - Medicine that was out of date is returned to the pharmacy for safe disposal.
 - There needed to be a system in place for the routine checks of medication and first aid kits.
 - A medical history of each young person is kept on file

3.10 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:

9. The HSE DML should ensure that the remaining recommendations of the health and safety audit are completed as soon as possible.
10. The HSE DML should ensure that
 - External premises requirements*
 - the garden is cleared of old building material, old furniture and a general upkeep of the ground should be carried out on a regular basis,
 - the oil tanker is screened off for safety and
 - new seating is required for the games room.
 - Internal centre requirements*
 - the centre is repainted
 - the sinks in the young people bedrooms are repaired or replaced
 - bedroom mattresses replaced.
11. The HSE DML should ensure that the centre had written confirmation from a certified engineer or a qualified architect that all statutory requirements relating to fire safety and building control have been complied with and relevant the document is forwarded to the inspectorate.

4. Summary of recommendations

1. The HSE DML should ensure that all care staff receive regular formal supervision.
2. The HSE DML should ensure that the outstanding garda clearance is obtained immediately. In future three references are obtained prior to the commencement of employment in the centre.
3. The HSE DML should conduct an audit of internal systems in order to identify roadblocks that hinder compliance with this standard.
4. The HSE DML should ensure that decisions from care plan review meetings are integrated into the care plan.
5. The HSE DML should ensure that all of the monitoring officer's remaining recommendations are implemented.
6. The HSE DML should ensure that their draft aftercare policy is ratified as soon as possible and the centre's aftercare policy is modified to reflect positive centre practice.
7. The HSE DML should ensure that a coordinator of aftercare is appointed without delay.
8. The HSE DML should ensure that
 - Recording of prescribed medicine on the medication records is clear as per best practice.
 - Medicine that was out of date is returned to the pharmacy for safe disposal.
 - There needed to be a system in place for the routine checks of medication and first aid kits.
 - A medical history of each young person is kept on file
 -
9. The HSE DML should ensure that the remaining recommendations of the health and safety audit are completed as soon as possible.
10. The HSE DML should ensure that
 - External premises requirements*
 - the garden is cleared of old building material, old furniture and a general upkeep of the ground should be carried out on a regular basis,
 - the oil tanker is screened off for safety and
 - new seating is required for the games room.
 - Internal centre requirements*
 - the centre is repainted
 - the sinks in the young people bedrooms are repaired or replaced
 - bedroom mattresses replaced.
11. The HSE DML should ensure that the centre had written confirmation from a certified engineer or a qualified architect that all statutory requirements relating to fire safety and building control have been complied with and relevant the document is forwarded to the inspectorate.