



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

**Social Services
Inspectorate**

A

CHILDREN'S RESIDENTIAL CENTRE

IN THE

HSE Southern Area

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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 South (HSE South). Kieran O'Connor (lead inspector) and Sharron Austin (support inspector) conducted the inspection under *Section 69 (2) of the Child Care Act 1991* over a two day period from the 15th to the 16th of April 2008.

The centre had been under the aegis of a religious order up to 2001 when it was transferred on lease to the then Southern Health Board, now Health Service Executive Southern Area (HSE South). The building came into the ownership of the HSE South under the redress scheme. The centres statement of purpose and function, which was reflected in practice, outlined that the centre was a residential service for the counties of Cork and Kerry. The range of care offered was short to medium term care, described as between six months and two years, shared care, respite care, and outreach work. It provided placements for up to eight girls and boys from 12 to 18 years. At the time of the fieldwork visit the number had reduced in practice to four children and this needed to be stated in the statement of purpose and function.

At the time of inspection there were four young people living in the centre, three boys and one girl aged between 15 and 16 years. They had been living there between six months and four years. The centre was located in a former orphanage, a large Victorian house on its own large grounds overlooking an estuary. The building was a large 19th century institution totally unsuitable as a modern child care facility. The children and young people told inspectors that the staff were nice but they strongly disliked the building. The centre was subject to a previous inspection in 2004. The recommendations of that inspection were met with the exception of one, namely, to discontinue the use of the current premises as a children's residential centre.

1.1 Methodology

In this inspection, inspector's judgements are based on evidence of findings verified from several sources including interviews, direct observation and a review of records. Interviews were conducted with; four young people, four parents of four young people, the acting centre manager, the acting deputy manager, an acting child care leader, five child care workers, the monitoring officer, the child care manager, the acting general manager, the residential coordinator, the children's residential service senior psychologist. Telephone interviews were conducted with four supervising social workers. Inspectors also examined relevant records and documentation, and conducted an inspection of accommodation.

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 parents, social workers and teachers
- The monitoring officer's reports
- 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, their parents, staff and other professionals involved in this inspection.

1.3 Management structure

The centre manager reported to the HSE South child care manager residential services 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</i>	<i>Length of placement</i>	<i>Number of previous placements</i>
#1 male	15	Care order	6 months	2 foster placements
# 2 male	15	Voluntary care	1 year	4 foster placements 1 residential assessment
# 3 female	13	Care order	4 years 3 months	1 relative foster placement 1 foster placement
4 male	16	Care order	2 years 10 months	1 relative care 5 foster placements 5 residential care

2. Analysis of findings

Practices that met the required standard

Management and staffing

This was a well managed centre and there were good internal and external monitoring systems in place. The centre had recently had a change of manager. The previous manager who had been in post for over sixteen years had retired and inspectors found that her legacy of care and long term commitment to the children was evident in the centre. Some former residents still visited the centre regularly.

The transition to new management had been seamlessly implemented. The acting manager was clear about her approach to management, namely to delegate and empower the staff team as much as possible. This is what inspectors found in practice. She provided good leadership and direction, and was accessible to both the young people and staff. She was ably assisted by an acting deputy manager. They divided management tasks in a well organised way. Each manager brought their individual strengths to the role. They were well informed on all aspects of day-to-day care practices and especially the needs of the individual young people.

At the time of inspection fieldwork, inspectors found a qualified, experienced, dedicated staff team, providing a good service to the young people. One of the strengths of this staff team was its stability and the continuity of care it provided. The majority of the staff team had been working in the centre for a minimum of seven and a half years, with six staff members on the team contributing over ten years.

The HSE had a policy of supporting staff to obtain relevant qualifications and the HSE South training department also provided further courses. Inspectors were told that the availability and quality of training was of a high standard. There was a good gender balance on the staff team and this was welcomed by the young people. All newly appointed staff received formal induction, and all were trained in Therapeutic Crisis Intervention (TCI) and *Children First, National Guidelines on the Welfare and Protection of Children*.

Supervision and other supports

The standard on supervision was well met, and there was a clear commitment to staff support. Formal supervision was compulsory and took place regularly and frequently for all staff including the house keeper and administrator. They also occasionally attended some staff meetings in relation to operational matters to ensure good communication and cohesion in the centre. Staff interviewed by inspectors said formal supervision was supportive, educational and empowering. Inspectors examined a sample of records and found that it was of high quality. It was focused; reflective and accountable and paid close attention to the needs of the young people. The centre manager had supervision with the local child care manager each month. The centre had group facilitation from an external consultant on a six monthly basis and more frequently if required. Staff also had support through the employee assistance service in the event of a stressful incident. This service has been availed of on a few occasions in the last year. There was also a management support committee comprising the child care manager, the psychologist and the residential coordinator. The purpose of this group was to monitor the morale and levels of stress in the staff team. The manager told inspectors that she was well supported by her line manager.

Team meetings occurred on a weekly basis. The senior clinical psychologist associated with the centre attended part of this meeting to assist staff gain further insight into the young people's needs. There was a serious incident review group comprising a psychologist, the regional residential co-ordinator and the TCI trainer attended the team for debriefing in the event of a particularly traumatic episode in the centre.

Children's Rights

Practice in relation to children's rights was good. All the young people were informed of their rights on admission. They were all aware of the Irish association of young people in Care. The young people were encouraged and facilitated to express their views at their statutory review meetings. They were consulted about school courses and work placements. They exercised choice about leisure activities such as deep sea fishing and football which the young people really enjoyed. They chose their own clothes and participated in selecting the weekly menu.

The centre had a clear complaints procedure and inspectors found that complaints they reviewed had in the main, been dealt with promptly and appropriately. There was no independent person allocated in the event of an appeal. Appointing an independent complaints officer had been envisaged by the HSE South for some time but had not occurred. Senior managers told inspectors that it was now proposed that the coordinator for residential services take over this role as they had no line management responsibilities for the centres. Inspectors recommend that this is implemented as soon as practicable.

Staff were aware of children's right to information about themselves. However, there was some confusion among two of the young people as to some information on file such as psychological or social work reports. Inspectors advise that this is clarified. The centre had a policy on spiritual care of the young people. Some of the staff team were aware of the young people's spiritual needs. However, others told inspectors that there was no formal policy or practice in this area, other than the young people were asked if they wanted to attend a religious service of their choice. Some of the young people had suffered significant bereavements in their lives and in this context staff showed creativity and sensitivity in helping them come to terms with this. This needs further development in consultation with their parents.

The management of behaviour

There was a strong emphasis on the therapeutic aspects of TCI and it was implemented thoughtfully. There was a sanctions policy which was proportionate such as deducting pocket money for smoking in the bedroom. Young people found the sanctions by and large fair. The centre have had a complex mix of young people living in the centre in the past year and at times there had been great difficulties managing the young people's behaviour. At times there was a difficulty in maintaining authority in the centre as at times the young people did not engage positively with centre staff. However the managers and staff team and other professionals external to the centre showed resilience and commitment and relentlessness in their efforts to continue to work positively and therapeutically with the young people.

Unauthorised Absences

There had been 69 instances of unauthorised absence from the centre involving four young people in the past year. Over half were of short duration, risk assessed, and appropriate professionals were informed. The centre had good relations with the local Gardai and the joint protocol between them and the HSE South when young people went missing without permission was functioning well.

Physical restraints

There were a total of five physical restraints in the year prior to the inspection. These were reviewed by the manager, the monitoring officer and the critical incident group.

Contact with families

Inspectors found that the centre had a positive relationship with families of the young people and encouraged contact in accordance with the standard. There was a culture of respect, inclusion and positive relations with children's families. Four of the parents contacted by inspectors said they are kept well informed about their children. They said that they always felt listened to and treated with respect by the staff at the centre. One parent said "staff really care for my child and are always willing go the extra mile beyond the call of duty to make sure the best thing, not the easy thing, is done".

Partnership

There was a good level of inter-professional work and inter-agency cooperation between the centre and other professionals. The psychologist attends the team meeting every second week. There was a high degree of joint working between staff and the psychologist which was valued by all. He told inspectors that the staff team show great understanding and initiative in their dealings with him. Contact with the centre by some of the supervising social workers was poor. However, in the main social workers told inspectors that communication was very good and they were notified of all significant events.

Emotional and specialist support.

Access to emotional and specialist support was good. The centre had the dedicated services of a clinical psychologist who attends staff meetings fortnightly, assesses all children coming into the service, is a consultant to the key workers and works directly with the individual young people. The young people related well to him. Professionals external to the centre spoke highly of the dedication and commitment of the staff team. This was demonstrated in many creative ways. One of the young people needed special individual attention related to a medical matter, received commendable care from team members and was making excellent progress now in a specialist service as a direct consequence of this. However the supervising social worker and the staff team were having major difficulty accessing appropriate adolescent disability services for one young person with special needs and inspectors recommend that specialist services be made available as soon as possible.

Monitoring

The standard on monitoring was well met. The HSE South Monitoring officer met with the young people and staff and inspected against selected standards. The monitoring officer received notification of all significant events and his recommendations had mostly been implemented or were nearly met.

Vetting

All the staff team had the required garda clearance and three references. The HSE South had obtained Garda clearance and three references prior to the commencement of employment for all staff employed in the past three years. However, the HSE South need to obtain garda clearance for one of the administrative staff employed in the centre.

Health

The standard on health was 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 and records on health records were of good quality. The food in the centre was varied and nutritious.

Register

The centre had a register specifying all the information required by the regulations,

Aftercare planning

Preparation for leaving care was good. Discharges were planned. What was perhaps unique to the centre was that former children who lived in the centre some settled with their own families, still returned to the centre.

Practices that met the required standard in part

Inspectors found that standards were partially met in relation to purpose and function, aspects of safeguarding, and the social work service.

Purpose and function

The standard on purpose and function was met in some respects only. The centre had an all embracing purpose and function that essentially excluded none.

All referrals were processed through a regional admissions committee. The admissions committee needed to develop a more comprehensive risk assessment of each referral. This risk assessment needed to take greater account of the children already in the centre. The staff team were reluctant to refuse a referral of any child in crisis and the all encompassing purpose and function of the centre meant that there was no effective risk assessment to determine if the mix of children in the centre was unsuitable. The staff team were managing children with a variety of needs. Two young people in need of more specialist services were living at the centre. Inspectors recommend a review of these placements. A decision had been made to reduce the number of places available in the centre from eight to six and this should be reflected in the centre's statement of purpose and function.

Administrative files

The content and organisation of care files needs to improve. The centre needed to develop a more coherent filing system organised in a way that facilitated ease of access for effective management and accountability. Inspectors recommend a review of care files.

The social work role and care planning

Practice in relation to social work was uneven. All the young people had supervising social workers. Two social workers visited the young people frequently and saw them privately. Two other social workers did not visit the young people regularly or frequently and in two cases there were gaps of five months and three months respectively. This was a source of dissatisfaction for the young people concerned. However, other social workers were valued by their young people who looked forward to their visits. They visited the centre and regularly and worked in close partnership the staff team.

All the young people had statutory care plans however they were of poor quality in two cases. There were factual errors in one care plan such as wrong name, wrong address, wrong date of birth and they were unsigned. There were also regular statutory reviews. However, some of the tasks agreed at case reviews had not been commenced or implemented with sufficient haste by the supervising social workers and this led to an element of drift. Minutes of statutory care reviews which were the responsibility of the supervising social worker had still not been sent to the centre six weeks after the review. Two of the social workers interviewed were not sufficiently

informed about some aspects of the young people's case. Two of the four social workers interviewed by inspectors had not read centre files.

Inspectors recommend that the principal social worker ensures that that supervising social workers visit the young people more frequently, implement agreed tasks as set out in statutory care plans reviews in a more timely manner, read care files and centre records from time to time as required by the standards.

Education

Inspectors were told by the centre managers, staff and other professionals external to the centre that education was highly valued for young people as an essential component in insuring their future occupational success in adult life thus improving their life chances. However of the four young people, three were attending school. Although the manager and staff team persisted in finding education training or work placements the young person either dropped out or refused to attend. This meant that the young people had no real structure to their day, were consequently bored and at times got involved in delinquent behaviour. To meet the standard inspectors advise the supervising social workers and centre staff to persevere in finding creative ways to facilitate their attendance at school or training.

Safeguarding and child protection

The staff team were clear about safeguarding and child protection. However, four of the young people told inspectors that they had been bullied at some stage in the past year. The management and staff dealt with incidents of bullying in an effective manner when they occurred. However, given the mix of young people and difficulties of supervision at times because of the size of the building inspectors recommend a review of the staff response. Inspectors recommend that the monitoring officer regularly reviews bullying incidents in the centre.

Practices that did not meet the required standard

Inspectors found that standards were not met in relation to compliance with fire regulations and premises and accommodation.

Fire safety

The centre needed written confirmation from a certified engineer that all statutory requirements relating to fire safety and building control have been complied with as required by standard 10.19.

Premises and accommodation

The premises are totally unsuitable. While the building was well located it was too large and too old to be used as a children's residential centre. The building was dark, dismal and in a decrepit state. The young people found living in the centre depressing. One young person took inspectors on a tour of the building outside showing multiple parts of the walls and roof in disrepair. All the managers, the staff team and other professionals associated with the centre considered the building unsuitable and unsafe. Some of the young people engaged in risky behaviour and the size of the building made it difficult for staff to provide the right level of supervision. A common theme among all the young people was that they hated the building and felt ashamed to be living there. The land surrounding the building was large and overgrown and was used at times by people not connected with the centre for alcohol and illegal drug consumption. The young people showed Inspectors discarded cans and refuse and other paraphernalia associated with illegal drug consumption on the land within the confines of centre property. The care of children and young people in such an institutional environment runs contrary to the policy of caring in a

setting as close to normal family life as possible. A recommendation was made to move to a more suitable centre in the inspection of 2004. HSE South senior managers responded by writing to the Department of Health and Children stating that a review of residential services was underway and the replacement of this centre was a priority in the context of formal transfer of other premises from the voluntary sector to the board. It is totally unacceptable that such a key recommendation made over four years ago is still not implemented. During this inspection, Inspectors were told by senior HSE South managers that plans for a new centre have gone to tender and are at an advanced stage.

Inspectors reiterate the recommendation of the inspection in 2004 and that the HSE South should cease using the current premises as children's residential centre and find a suitable alternative without further delay. Inspectors recommend that this centre is closed and an alternative premises is secured within 3 months of the final report of this inspection.

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		√	

Recommendations:

1. The HSE South should review the purpose and function of the centre.
2. The HSE South should ensure that the statement of purpose and function reflects the change in available placements in the centre.

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:

3. The HSE South should ensure that Garda clearance is obtained for the administrative employee.
4. The HSE South should review the care file system in the centre.

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	√		

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	√		

Recommendation:

- The HSE South should ensure that the proposal that the coordinator for residential services is tasked with the role of the independent person as part of complaints policy is implemented as soon as practicable.

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 South should ensure that that all supervising social workers visit the young people in the centre regularly.
7. The HSE South should ensure that social work tasks identified at care review meetings be implemented as a matter of priority to avoid case drift.
8. The HSE South should review the placements of two of the young people in the centre.
9. The HSE South should ensure that statutory care plan review minutes are completed and sent to the centre as a matter of priority.
10. The HSE South should ensure that all social workers read the centre's care files from time to time.

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	√		

Recommendation:

- The HSE South should further develop policy and practice in relation the spiritual development of the young people in consultation with their parents.

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		√	

Recommendations:

- The HSE South should ensure that supervising social workers and the monitoring officer closely monitor all incidents of bullying.
- The HSE South should ensure that all referrals are risk assessed taking into account the needs of the children already in the centre.

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		√	

Recommendation:

- The HSE South should ensure that one of the young people recommence attendance at school or training.

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	√		

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:

15. The HSE South should ensure that the response to routine maintenance is conducted in a more timely manner.
16. The HSE South should ensure that written confirmation from a certified engineer or qualified architect is obtained outlining that all statutory requirements relating to fire safety and building control have been complied with as required by standard 10.19.
17. Inspectors reiterate the recommendation in the inspection in 2003 that the HSE South should cease using the current premises and find a suitable alternative within three months of the final publication of this report.

4. Summary of recommendations

1. The HSE South should review the purpose and function of the centre.
2. The HSE South should ensure that the statement of purpose and function reflects the change in available placements in the centre.
3. The HSE South should ensure that Garda clearance is obtained for the administrative employee.
4. The HSE South should review the care file system in the centre.
5. The HSE South should ensure that the proposal that the coordinator for residential services is tasked with the role of the independent person as part of complaints policy is implemented as soon as practicable.
6. The HSE South should ensure that all supervising social workers visit the young people in the centre regularly.
7. The HSE South should ensure that social work tasks identified at care review meetings be implemented as a matter of priority to avoid case drift.
8. The HSE South should review the placements of two of the young people in the centre.
9. The HSE South should ensure that statutory care plan review minutes are completed and sent to the centre as a matter of priority.
10. The HSE South should ensure that all social workers read the centre's care files from time to time.
11. The HSE South should further develop policy and practice in relation the spiritual development of the young people in consultation with their parents.
12. The HSE South should ensure that supervising social workers and the monitoring officer closely monitor all incidents of bullying.
13. The HSE South should ensure that all referrals are risk assessed taking into account the needs of the children already in the centre.
14. The HSE South should ensure that one of the young people recommence attendance at school or training.
15. The HSE South should ensure that the response to routine maintenance is conducted in a more timely manner.
16. The HSE South should ensure that written confirmation from a certified engineer or qualified architect is obtained outlining that all statutory requirements relating to fire safety and building control have been complied with as required by standard 10.19.
17. Inspectors reiterate the recommendation in the inspection in 2003 that the HSE South should cease using the current premises and find a suitable alternative within three months of the final publication of this report.