



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

**Social Services
Inspectorate**

A

CHILDREN'S RESIDENTIAL CENTRE

IN THE

HSE SOUTH AREA

FINAL

INSPECTION REPORT ID NUMBER: 309

Fieldwork Date: 12th to 14th May 2009

Publication Date: 23rd June 2009

SSI Inspection Period: 11

Centre ID Number: 5

ADDRESS: Health Information & Quality Authority, 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. Summary of findings

3. Findings

4. Summary of recommendations

1. Introduction

The Health Information and Quality Authority (HIQA), Social Services Inspectorate (SSI) carried out an announced inspection of a children's residential centre in the Health Services Executive (HSE), South Area (SA) under Section 69 (2) of the Child Care Act 1991. Patrick Bergin (lead inspector) and Kieran O Connor (co inspector) carried out the inspection over a three day period from the 12th to the 14th of May 2009.

The centre was located in a detached bungalow in an estate outside a large town. The centre was designated as providing three residential placements. At the time of the inspection there were three young people named on the register in the centre. One girl was residing in the centre while two others were in placements in separate Special Care Units. It was planned that one of these girls would return to the centre as a follow on to her current placement.

The written purpose and function of the centre stated that it provided short to medium term care for girls aged between 12 and 18 years. It also stated it provided emergency care to teenage boys although inspectors were told that emergency admissions were subject to the stability of the unit, the mix of young people and the availability of the staffing necessary to respond to an emergency placement request.

This service was last inspected in 2007 and this report is available on the SSI website as inspection report number 171. A follow up inspection was undertaken in July 2008 and the majority of recommendations had been met or partly met. The recommendations regarding acting staff positions were still outstanding.

1.1 Methodology

The judgements of inspectors are based on an analysis of findings verified from more than one source of evidence gathered through observation of practice, with interviews with young people, relevant HSE staff members and managers, examination of records and documentation and a viewing of accommodation.

The following centre documents were available to inspectors during this inspection:

- statement of purpose and function
- young peoples care plans and care files
- census forms on management and staff
- young people census forms
- administrative records
- HSE monitoring reports
- previous inspection report and follow-up report
- young person questionnaires
- fire safety certificate
- staff supervision records
- staff training records
- centre register
- health and safety statement 2008
- information booklet for young people
- serious incident review, planning and support programme booklet
- child protection notification forms

During the course of this inspection the following people were interviewed,

- acting centre manager,
- acting deputy centre manager
- child care leader
- social care worker
- child care manager (with responsibility for residential services)
- coordinator of children's residential services
- general manager
- two social workers
- HSE monitoring officer,
- one young people in residence,

1.2 Acknowledgements

Inspectors wish to acknowledge the assistance and cooperation of the staff members and HSE personnel who participated in this inspection. Inspectors wish to thank the young person in the centre for meeting with them and sharing her experiences of living in the centre.

1.3 Management structure

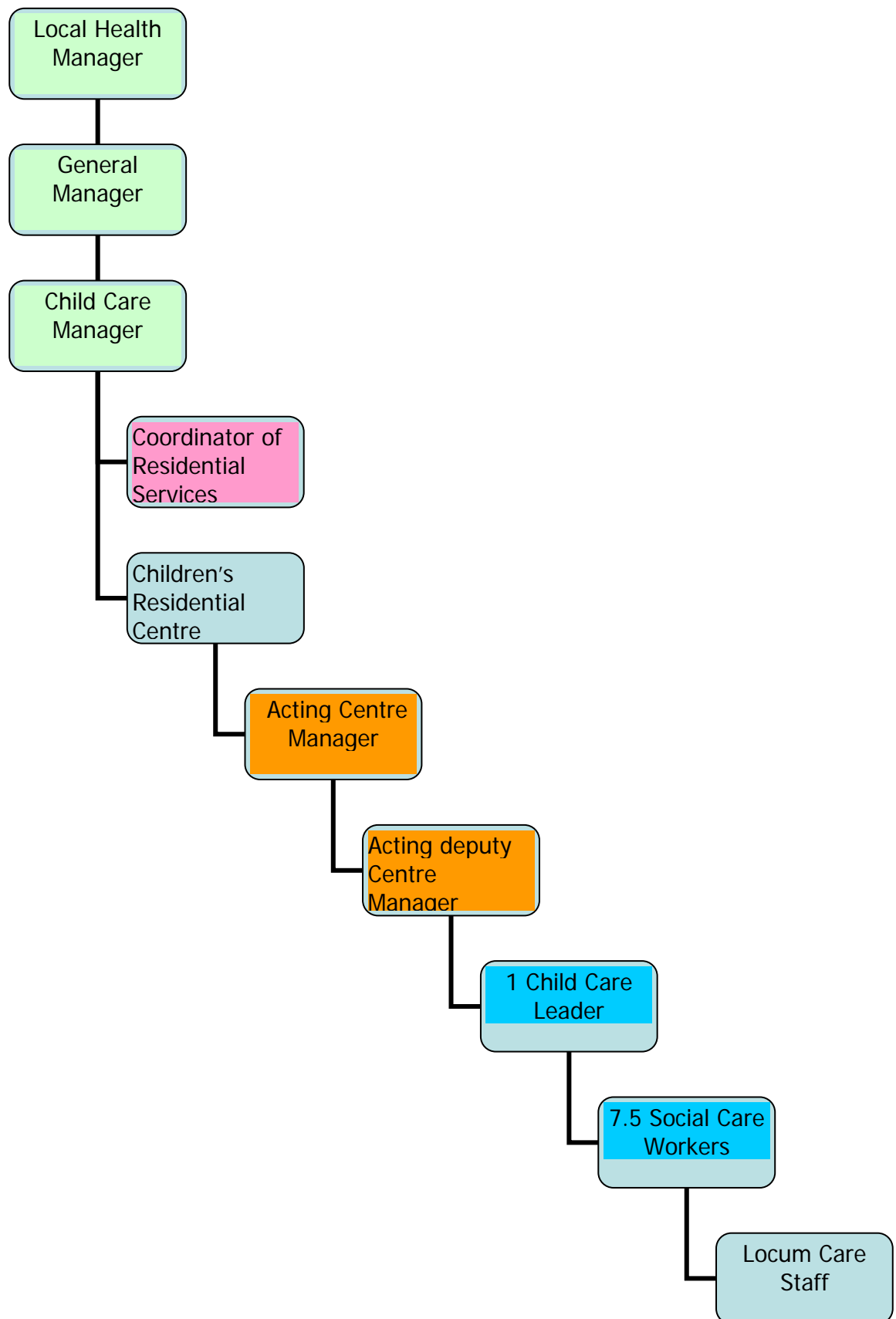
The centre was managed by an acting centre manager who also had responsibility for two other children's residential centres. She was supported in the management of the centres by a acting deputy centre manager. The day to day operations of the each centre was coordinated by a child care leader who reported to the centre and acting deputy managers. The acting centre manager reported to the child care manager with responsibility for children's residential services who in turn reported to a general manager.

The centre had an approved staff complement of 7.5 social care workers and a group of temporary and locum social care workers were available to the three residential centres to provide locum cover.

Specific duties and areas of responsibilities were allocated to each member of the management team. These areas included staff support, supervision, care practices and multi-disciplinary involvement. This structure and system was utilised in the management of the three residential services in the HSE area.

The diagram below provides an overview of the management structure for the children's residential centre.

Line management structure



1.4 Data on young people

On the first day of fieldwork one young person was in residence. Three young people were on the centre register however two were in placement in special care units.

Young Person	Age	Legal Status	Length of Placement	No. of previous placements
# 1	17	Voluntary care	52 months	1 respite foster care placement
# 2	16	Voluntary care & High Court Detention order	34 months	2 special care placements 1 long term foster care placement Many respite foster care placements
# 3	16	Voluntary Care & High Court Detention order	6 months	1 mainstream residential placement 1 special care placement

2. Summary of Findings

Inspectors found the care provided to young people was good. The majority of the standards were met however further action was required to address standards relating to purpose and function, emotional and specialist support and after care.

Two key concerns identified by the inspectors related to the lack of an aftercare service in the area for young people leaving care and specifically residential care and also a vacant psychologist post in the residential services.

Inspectors found that there was no aftercare service available to young people in the area. A service was previously provided in the area however due to the moratorium on filling vacant posts, the aftercare worker was subsumed into the residential services to meet core staffing level requirements in residential services.

A psychologist post supported residential care staff to understanding the causes of young people's behaviours and develop interventions to assist them. Inspectors were informed by HSE SA senior managers that the post had become vacant and could not be filled due to the HSE moratorium on staff posts.

Inspectors recommend that HSE revisit the need for young people to access psychological / specialised services and aftercare services and approval is provided to reinstate the level of service previously available to young people in the centre.

The staff team had experienced difficulties in managing young people's behaviours in months prior to the inspection. There was clear evidence of a coordinated approach

by the centre manager and external managers. Inspectors were impressed with the understanding and skills displayed by staff in helping the young people.

Two of the young people on the centre register were in special care placements. Care plans were in place for both of them identifying the strategy and services available to them, and including time frames. One young person was due to return to the centre which was agreed by all professionals in a phased way.

The second young person in special care was due to move to a high support unit and plans were being finalised for this transition. Centre staff were maintaining contact with both young people and their carers in an appropriate way to support their current placements.

The third young person was in residence in the centre during the field work. This young person had been absent from the centre for three months. An incremental approach was adopted to encourage her to return to the centre and engage with the staff team and her social worker.

Improvements in particular areas were advised by the inspectors. In general inspectors found the centre to be managed well and appropriate to meeting the needs of young people in the centre.

Practices that met the required standard

Management and staffing

The centre was one of three centres which were managed by the acting centre manager who was in this position for a number of years. Previous inspection reports highlighted the need for the manager post to be filled on a permanent basis. The management team was in place which comprised of the acting centre manager, acting deputy manager and child care leader. The child care leader managed the day to day operations of the centre.

There was a comprehensive system in place for the notification of significant events to social workers, HSE monitoring officer and senior management. Social workers forwarded information to young people's parents where appropriate.

Social workers told inspectors they were kept informed of all matters appropriately. There was a number of child protection concerns reported to social workers through the standard reporting forms under Children First 1999. This process will be discussed further under safeguarding standard.

The centre had an approved complement of 7.5 social care workers. Locum staff were available to the residential services in the area. Inspectors were told that there were difficulties maintaining staffing levels due to the demands of the three residential services in the area. Senior managers cited the moratorium on the recruitment of social care staff as a significant concern. Inspectors were told by centre managers and external managers that the difficulties in maintaining appropriate levels of staffing could negatively affect the availability of placements in the centre.

The staff rota provided for two care staff on all shifts from 7.30am to 11.00pm. There was 1 care staff rostered for waking night duty and another sleeps in the

centre. The child care leader worked three day shifts to provide administrative support to the staff team and the centre managers.

Inspectors undertook a random audit of the supervision records in the centre. Inspectors found that practice was of a high quality. The child care leader provided supervision to the core complement of social care workers in the centre. Locum care workers received supervision from the acting deputy manager as these staff provided locum cover to other children's centres in the area.

Records of supervision highlighted to inspectors the system of accountability for care workers and the support mechanism available to staff. Inspectors identified a situation where supervision was used to address challenges in the relationship between a care staff and young person. The positive outcome of this approach for the young person and care staff was evident. Inspectors were impressed with the emphasis on supervision and the link to the care of young people.

Staff meetings were held on a fortnightly basis. The child care leader and the acting deputy manager were always in attendance. This system was seen as an important part of the planning for young people. Key workers submitted reports on young people. A psychologist who was assigned to the residential services in the area also attended staff meetings. The participation of the psychologist was seen as a support mechanism to assist care staff understand the behaviours and experiences of young people. The post had recently become vacant. This matter will be addressed further under emotional and specialist supports services.

The centre manager maintained a comprehensive training record undertaken by all care staff for a number of years. It included therapeutic crisis intervention, first aid, sexual health, Children First 1999, fire training, teenage stress, parent plus and team facilitation. Inspectors were informed by centre and external managers that due to the current constraints within the HSE, priority was given to training in managing behaviour, safeguarding and child protection.

The centre had large quantities of administration information. Staff files were reviewed by inspectors and were found to be appropriate and easily accessible. Other files administrative including policy and procedure documents needed updating. Inspectors advise the centre managers to change record systems to improve management and tracking of documents.

Monitoring

Two monitoring officers operate in the HSE SA and in November 2008 the centre was allocated to a named monitoring officer. The inspectors interviewed the HSE monitoring officer as part of the field work. The inspectors had access to 7 monitoring reports which addressed the requirements of the Child Care (Standards in Children's Residential Centres) Regulations 1996. The monitoring officer was familiar with the centre management team, centre child care leader and the young people.

The HSE monitoring officer was knowledgeable about the challenges experienced by the staff team in managing challenging behaviour however he held the view that there were agreed strategies in addressing the risks posed by each of the young people. He noted the approach adopted by the centre and the HSE SA to address the level of absences and believed all that could be done was been attempted.

Inspectors held the view that the standard on monitoring was met. They also held the view that the HSE monitoring officer played a significant role in quality assuring that care practices were appropriate. The monitoring officer had identified that the standard 10.19 relating to fire-safety was not met. This will be addressed in the report under the section premises and safety.

Children's Rights

Inspectors found that the rights of the young people in the centre were understood and respected and in general care practices informed this view. The young person interviewed was clear that she believed her views were heard. She accepted that her wishes were not always met but stated the centre staff were fair in their care of her. Evidence from other sources, including questionnaires from young people concurred with this view.

There was a consensus amongst young people that they could make complaints when necessary however there was a culture in the centre which encouraged concerns or complaints to be dealt with at source. Inspectors advised centre managers to maintain a record of concerns or informal complaints so as to quality assure that current systems and processes were functioning appropriately.

Young people were aware that they could view information held in the centre about them. There was a proactive approach taken in the centre to form views on all documents and reports and the appropriateness of them to be viewed by young people. A "green slip" was attached to each report which containing the view of the author on the viewing of the document by the young person. There was also a review process built in to the system to consider documents which were restricted.

Inspectors advised centre and external managers of the need to be proactive in supporting young people access all their information before they reached adulthood.

Planning for children and young people

The social workers who were interviewed said the placements were suitable for the young people. The young person in residence in the centre was there for almost three years, there were strong views that she required a further 12 months to assist prepare herself for independent living. The young person in special care who was due to be readmitted to the centre was on a phased transition back to the centre. The social worker, centre managers and staff held that the young person had made huge progress during her placement in special care and the relationships and experiences she had in the children's centre were key to the success of the planned move.

There was a central admission committee who decided the placement of young people in the residential centres in the HSE SA. The admission process was designed to help young people move into the centre. Inspectors were concerned about the practice of emergency admissions to the centre and the placement of boys in a centre determined to be a girl's centre. Inspectors advised this matter needed to be addressed under the purpose and function of the centre.

Inspectors found that the appropriate statutory care plans and statutory care plan reviews were on file for each of the young people. There was evidence of an emergency care plan on file for a young person admitted on an emergency basis in 2008, who was subsequently admitted on a long term basis. There was evidence of

unnecessary delays in having a statutory care plan meeting however the matter was subsequently addressed.

Inspectors found difficulties with one young person having contact with her family. This was not due to shortcomings in the centre or the motivation from care staff. The practice was for staff to encourage family contact. Where the placement was a long distance from the young person's place of origin, centre staff made every effort to maintain links where possible.

Social workers visited the centre and evidence was found that social workers met with young people, took them out of the centre. There was evidence of social workers reading young peoples care files maintained in the centre.

Inspectors found the relationship between care staff and social workers was of a high standard. There was evidence of open communication and joint approaches in addressing areas of concern.

Inspectors found the discharges of young people from the centre were in line with agreed care plans and the ongoing contact and support provided by the service to young people who had left was commendable.

Children's case and care records

Inspectors reviewed children's care and case files as part of the fieldwork inspection. Inspectors found it difficult to navigate through the care files however care staff were familiar with the system. Inspectors highlighted to centre managers that without direction and support from care staff it would have been difficult to locate some documentation. Inspectors advised centre managers to restructure the care and case files to allow some material to be archived and for easily retrieval of documentation.

Inspectors noted the system of individual placement plans (IPP) was of a high quality. The information about to young people was reviewed regularly and was linked to the care plans and keyworker reports. Inspectors found that only relevant information was maintained in the IPP's, and these were designed to reflect the individual needs of each young person.

Care of young people

The opinions formed by inspectors on this standard were based on interview with one young person and questionnaires completed by two young people. Inspectors were also mindful that the centre had experienced difficulties with two placements resulting in two young people being placed in special care units.

The centre had a homely atmosphere and was decorated appropriately. Young people's rooms were painted considering their preferences. Inspectors formed the view that efforts were made to personalise the centre to reflect young people's wishes. They had choices in the clothes they bought and they purchased clothes as required. Young people prepare meals and helped purchase food.

There was a noticeable awareness of individual diversity including culture, religion and gender. There was evidence that care staff had supported young people in recognising their individuality and encouraging individual interests.

Sanctions were not a significant method used by the centre in managing behaviour. Whilst therapeutic crisis intervention was the stated approach to managing behaviour, inspectors found there was a multi-disciplinary approach to managing all behaviours. There was evidence of strategies used to encourage positive behaviour and curb escalating problematic behaviour. The role of the psychologist was deemed an important element in the success of the practices in managing behaviour.

There were no restraints recorded in the centre for the 12 months prior to the inspection however there were over a hundred absences without permission. These incidents involved all three young people and varied in lengths of time. Inspectors found that there was an appropriate incremental response from the HSE SA to absences depending on the level of risk and frequency. Inspectors also found there was a multidisciplinary approach to managing the concerns and risks associated with each of the young people.

Safeguarding and child protection

The centre submitted a revised draft safeguarding policy to the inspectors. The policy was being reviewed by the residential centre managers and it was envisaged this would be approved over the next few weeks. There was a good understanding amongst staff of safeguarding practices and young people expressed clearly their ability to identify an adult to speak with if necessary.

Children First Guidelines 1999 was the child protection policy used by staff in the centre. There was evidence of reports submitted to the social work department on child protection concerns. All of these were acknowledged and inspectors found that notifications were sent by social workers to the child protection notification management team following assessments. Social workers stated to inspectors that they were satisfied with the level of information forwarded to them from the centre and held the view that the centre staff and managers responded appropriately when child protection concerns were evident. Inspectors were satisfied that practice was of a high standard.

Education

Inspectors found there was an emphasis on attending school / training in the centre. There was evidence that different approaches were considered by centre staff subject to the young person's ability and interests. At the time of the inspection, the young person living in the centre had refused to complete a training course. Alternative options were being explored and the young person was open to engaging with other courses. Information relating to young people's educational attainments and assessments were evident on file.

Health

Young people had a medical exam on admission to the centre. Each young person had their own medical cards and a choice of doctors. There was immunisation records on two young people's files. It was noted they were in the centre for a number of years while another young person was in the centre a short time and this information was pending.

Premises

Following the inspection in 2007, some building works were undertaken to increase the size of the centre. A garage area was converted to an office and bathroom area. These changes had a positive impact for young people and staff. The centre was

maintained in good repair and furnishing and facilities were adequate for the provision of three placements in the centre.

The centre had a health and safety statement dated September 2008 and it was due to be reviewed in August 2009. A fire inspection audit was undertaken in July 2008 and this was to be reviewed in July 2009. Inspectors were provided with confirmation that the centre had appropriate insurance and the current policy was due for renewal in January 2010.

Practices that met the required standard in some respect only

Purpose and function

The centre had a written purpose and function which was reviewed in January 2009. It stated the centre provided care for up to three girls between the ages of 13 and 18. The service was described as offering short to medium term care. It stated that in exceptional circumstances a young person may continue to reside in the centre on a long term basis.

Inspectors were told by centre and external managers that the centre would accept emergency placements for boys. Records in the centre identified an emergency placement of a young boy in 2008 for three days. The provision of emergency placements for boys was raised in previous inspection reports and a review of the purpose and function of the centre was undertaken.

Inspectors were concerned that the stated purpose and function of the centre did not reflect practices in the centre. There must be a clear statement available to the central admissions committee to guide them in their decision to admit young people to the centre. Inspectors recommend the HSE SA define the service available in the centre considering the following headings,

- a. length of placement – emergency, short , medium or long term placements
- b. Gender- male or female or mixed gender
- c. Referrals from geographical areas- local, HSE SA

Register

The area maintained a register for the three residential centres. The required fields were included in the register. A young person admitted on an emergency basis was not recorded and inspectors advised the relevant information to be entered immediately.

The administrative structure of the register needed to be reorganised. Entries to the register were based on a year by year system with young people entered in the register on a number of occasions. It was advised that separate sections should be devised for each residential centre and young people should be entered once on the register. Centre managers acknowledged the need to restructure the current format and maintain the record in perpetuity and they gave an assurance this would be undertaken immediately.

Staff vetting

The staff census form submitted to the inspectors contained information on qualifications, garda vetting and references. A random audit was undertaken by inspectors of seven staff files and information presented to inspectors reflected content of these files. The staff census indicated that all care staff had garda vetting and the majority of staff has three references on file. Five staff had two references however their employment was seven years or longer. Inspectors noted that three staff had no references on file. These staff were in employment for more than several years. Inspectors were concerned that no supporting documentation was available to account for this position. Inspectors recommend the HSE SA acquire reference for the three staff identified in the census form.

Emotional and specialist support

Inspectors were concerned about this aspect of the functioning of the centre. Recent changes in the psychologist post for the residential services had resulted in the HSE SA been unable to fill this position. The psychologist post provided support and direction to the staff team and the psychologist also worked directly with young people living there. Inspectors were told by care staff, centre managers, external managers and social workers that the failure to fill the post would have a very negative impact on the service. The ability of the care staff to care for and manage young people with difficult behaviour was underpinned by the role of the psychologist to assist staff understand factors contributing to the behaviours. The option for the psychologist to engage with young people in their own environment at times where maximum benefit could be achieved was also cited as important to the success of the centre.

HSE SA senior management told inspectors that they did not have approval to fill the psychologist post. Interim measures were being explored however it was acknowledged by senior HSE SA managers that the temporary arrangement could not meet the demands of the centre. Inspectors recommend the HSE nationally revisit the approval of the psychologist post for the residential services in the HSE SA.

Preparation for leaving care / Aftercare

Inspectors found evidence of programmes been undertaken by key workers to prepare young people for leaving the centre. Inspectors were mindful that two young people in the centre will reach their eighteenth birthday in the next 12 months. Whilst the centre staff were undertaking particular approaches to equip young people with the skills to manage adulthood, inspectors were told that there was no aftercare service available to young people in the area.

Inspectors were told by senior HSE SA managers that an aftercare worker had operated in the area providing support to young people who were due to leave care and those who had left care. Due to the moratorium on the recruitment of care staff the aftercare post was subsumed into the core complement of residential care staff to fill a vacancy.

Inspectors recommend the HSE revisit the decision not to fill posts which have a direct impact on the provision of an aftercare service for young people leaving care.

Practices that did not meet the required standard

Fire safety

The HSE SA did not have written confirmation from a certified engineer or qualified architect that all statutory requirements relating to fire safety and building control have been complied with. The centre had been inspected by a private company on behalf of the HSE and specific works have been identified as requiring action. The HSE SA senior managers stated to inspectors a schedule of works was being finalised and a time frame had to be agreed. This standard is met in some respect only and inspectors recommend the actions necessary to meet this standard should be progressed.

Subsequent to the field work inspection, the inspectorate received written confirmation of the specification for works that need to be undertaken in respect of fire safety in the centre. Inspectors were also told that funds have been identified for this work and work has commenced with regard to preparing the tender documents.

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		√	

Recommendation:

- 1. The HSE SA should ensure the service available in the centre considers the following headings as part of its purpose and function**
 - a. length of placement – emergency, short , medium or long term placements
 - b. Gender- male or female or mixed gender
 - c. Referrals from geographical areas- local, HSE SA

2. Management and staffing

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

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

Recommendations:

- 2. The HSE SA should ensure the centre register complies with Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 21.**

3. The HSE SA should acquire reference for the three care staff without references.

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	√		

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		√	
Preparation for leaving care	√		
Aftercare		√	

Recommendations:

4. The HSE should revisit the decision not to fill the psychologist post for the residential services in the HSE SA.
5. The HSE should revisit the decision not to fill posts which have a direct impact on the provision of an aftercare service for young people leaving care.

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	√		

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		√	

Recommendation:

- The HSE SA should ensure that written confirmation from a certified engineer or qualified architect that all statutory requirements relating to fire safety and building control have been complied with is forwarded to the inspectorate.

4. Summary of recommendations

1. The HSE SA should ensure the service available in the centre considers the following headings as part of its purpose and function
 - length of placement – emergency, short, medium or long term placements
 - Gender - male or female or mixed gender
 - Referrals from geographical areas- local, HSE SA
2. The HSE SA should ensure the centre register complies with Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 21.
3. The HSE SA should acquire reference for the three care staff without references.
4. The HSE should revisit the decision not to fill the psychologist post for the residential services in the HSE SA.
5. The HSE should revisit the decision not to fill posts which have a direct impact on the provision of an aftercare service for young people leaving care.
6. The HSE SA should ensure that written confirmation from a certified engineer or qualified architect that all statutory requirements relating to fire safety and building control have been complied with is forwarded to the inspectorate.