Health Information and Quality Authority
An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte

Social Services Inspectorate

A

CHILDREN'S RESIDENTIAL CENTRE

IN THE

HSE SOUTH

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1. Findings

Introduction
The Health information and Quality Authority Social Services Inspectorate carried out an announced inspection of a High Support Unit (HSU) in the Health Service Executive South (HSE South). Kieran O'Connor (lead inspector) and Bronagh Gibson (co-inspector) conducted the inspection under *Section 69 (2) of the Child Care Act 1991* from the 20th to the 22nd of August 2008.

The HSU was located in the grounds of a hospital on the outskirts of a city. The unit, a former medical clinic, had been internally modified for use as a HSU. There had been no architectural changes to its external features. It was established 10 years ago in response to the specific needs of one young person. Its statement of purpose and function said that it provided a service to adolescent boys who presented with problematic behaviour. It was a regional service for the HSE South.

The unit was previously inspected by the Social Services Inspectorate in April 2006 and all recommendations had been met.

Amongst other things the previous inspection report commended the good standard of primary care and it is noteworthy that inspectors found the same quality of care during this inspection. On this occasion, inspectors found whilst the young people felt respected and cared for in the unit, the management of behaviour was problematic and at times some young people did not feel safe in the centre. Key recommendations are made in relation to the management of behaviour, social work, review of placement and improvement of premises.

1.1 Methodology

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; three young people, a child care leader, an acting child care leader, the acting deputy manager, four child care workers, the unit psychotherapist, the monitoring officer, a social worker senior practitioner, two supervising social workers and the acting general manager Telephone interviews were conducted with three parents of the three young people and a supervising social worker. An inspection of accommodation was also conducted.

Inspectors examined the following documents:

- The centre's statement of purpose and function
- The centre's policies and procedures
- The young people's care plans
- Questionnaires completed by social workers
- Questionnaires completed by the young people's general practitioner
- The young people's care files
- Administrative records
- Health and safety reports
- Fire safety certification

1.2 Acknowledgements

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

1.3 Management structure

The centre is managed by a unit manager and two team leaders. The external management structure comprises a child care manager, a general manager, and a local health manager.

1.4 Data on young people

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

Young Person	***Age***	***Legal Status***	***Length of Placement***	***No. of previous placements***
#1 male	14	Interim care order	10 months	29 foster placement. 2 residential care1high support
# 2 male	15	Voluntary care	7 months	4 foster placement
# 3 male	17	Voluntary care	6 months	None

Practices that met the required standard

Primary care

The young people in the unit received a good standard of primary care and their health needs were well met. The provision of food was of an excellent standard. There were written policies on all aspects of care and inspectors found these were largely reflected in practice. The young people identified a staff member they would talk to if they were upset or stressed about any aspect of their lives. All the young people were generally positive about the staff team, and the care they received. For example one young person said that "staff are brilliant really; you really can get on with them". The staff team went to great lengths to ensure that the young people availed of leisure opportunities and consequently the young people were involved in swimming, football, quads and go-carting. In the main the young people interviewed by inspectors were positive about the care they received. There was an atmosphere of warmth and fun between the staff and young people.

They all had key workers who met with them individually and inspectors found evidence of good key working sessions. The young people had their own rooms which they had decorated and personalised according to their choice. External professionals valued the service the unit provided and spoke of a committed and child centred team. Communication with young people was generally of a high standard. The standard on primary care was met.

Purpose and function

The unit was established as a high support unit for up to five boys aged between 13 and 18 years who presented with problematic behaviour. The purpose and function of the unit was well understood by those interviewed by inspectors. The statement was supported by a comprehensive policies and procedures document. It described a model of care that emphasised relationship building, role modelling by staff members, the use of everyday events to promote learning, and assessment, therapy and education delivered on site. The statement accurately reflected the service provided. The unit were reviewed in the past two years and a decision was taken to broaden the service to include other young people with vulnerable and challenging behaviour. Some times the young people with behavioural difficulties also got into difficulties with the law. Issues that caused the young people difficulties were addressed during their period in the unit.

At the time of inspection there were only three young people in the centre because staff had difficulties in managing the behaviour of some of them in the unit and it was deemed unsafe to increase placements in the short term.

Management and staffing

The HSU had a full time manager, two childcare leaders with responsibility posts, a part time psychotherapist, 13 childcare staff, the school principal, one full time and three part time teachers, an administrator and a housekeeper. At the time of inspection the unit manager was on term time leave and two of the staff team were on maternity leave. One child care leader was the acting unit manager. The absence of an experienced manager was a factor in relation to difficulties in managing the challenging behaviour of one young person. Term time is discretionary and is subject to the contingencies of the needs of the unit. Given the fact that these behavioural difficulties were foreseeable, inspectors advise that in future a risk assessment is completed prior to the granting of term time leave.

There was also a management advisory committee chaired by the child care manager. This committee provided advice to both the unit manager and the general manager on the management of the unit. A subgroup within this committee decided on admissions and discharges. The acting general manager visited the centre on a monthly basis since the manager took leave.

Overall inspectors found that the unit was generally well managed, and that there were good internal and external monitoring systems in place. Care staff and young people reported that the acting unit manager was accessible to them and they found her helpful and supportive. She frequently shared meals with the young people and was well informed on all aspects of day-to-day care practices and on the needs of the individual young people. However the manager and staff team had difficulties managing the behaviour of one young person and needed to be more assertive in their approach to behaviour management.

At the time of inspection, inspectors found a dedicated, well qualified team committed to providing a good service to the young people. They presented as a stable experienced team with an average length of service in the unit of over seven years. There was a good gender mix amongst them.

Professionals external to the centre spoke of the dedication of the staff team and valued the service they provided. The three young people interviewed by inspectors were positive about the care they received and stressed that while they had some complaints, explored later in this report, they liked the staff. Two of the young people said they felt they were making progress since they came to live in the centre.

Staff supervision and support

There was a commitment to supervision and staff support. The acting unit manager had monthly formal supervision with her line manager. The acting manager and acting deputy manager in turn hold formal supervision on a six weekly basis with all staff. They had received training in formal staff supervision. Inspectors examined a sample of records and found that supervision was of good quality and well recorded. There was an emphasis on the needs of the young people and the support and development of the staff team. Formal supervision was seen by most of the staff team as an opportunity to account for their work, and was supportive, educational and empowering. However, a small minority of the staff team interviewed did not fully understand that the primary function of supervision is accountability. It is also mandatory and not subject to the preferences of individuals. Inspectors recommend that the external line manager address this matter. The standard in relation to staff supervision and support was met.

Other supports

Staff meetings occurred weekly. There was a multi-disciplinary team on site, consisting of teachers, a part time psychotherapist and care staff, as well as ancillary staff. The child care manager visits the unit on a regular basis.

The HSE had a policy of supporting staff to obtain required qualifications and training and at the time of inspection two staff members were at college. The staff team had access to good in-service training.

Staff had received training in “Children First, the National Guidelines for the Protection and Welfare of Children”, Therapeutic Crisis Intervention (TCI), Occupational First Aid, staff training in defusing challenging behaviour, play therapy and other topics relevant to their work. All newly appointed staff received formal induction. The staff team have access to the HSE South employee assistance service. The unit also has a debriefing programme in place in the event of a particularly stressful event. Some of the staff team who had experienced such an event told inspectors that the support of the unit managers and colleagues was of most value during those difficult times.

Monitoring

The standard on monitoring was met. The centre had been visited by the monitoring officer on 12 occasions in the past year. In more recent months due to difficulties in managing challenging behaviour he had increased his visits to fortnightly. He met with the young people and staff, monitored against selected standards and made recommendations. His last written report was completed in May 2008. All his recommendations to date had been met. He received notification of all significant events. The monitoring officer made himself available to the manager and staff on a regular basis. He told inspectors that the centre was a much needed service, but was going through a difficult time managing the behaviour of one young person. All the staff interviewed by inspectors found him supportive and his advice valuable.

Family contact

The standard on family contact was met. The three parents interviewed by inspectors said with the unit team were dedicated to the care of their children. The unit had a positive relationship with the families of the young people and encouraged contact where possible. Shared care is occurring and going well for two of the young people. The parents told inspectors that they were listened to and treated with respect by staff. They said they received a warm welcome and are encouraged to attend meetings and reviews. One parent said that she often had lunch in the unit with staff and the young people and the unit ensured regular contact even when she was in hospital. Another parent told inspectors that the unit runs a parenting course that she finds helpful and empowering.

Health

The standard on health was met. All the young people received a medical examination as close as practicable to admission. All had medical histories on file. The young people could either go to their local general practitioner or attend a practice near the unit. The staff team were well aware of the health needs of the young people. The unit accessed other medical specialists as required. The unit had good access to emotional and specialist support. The unit had its own in house psychotherapist who did individual therapeutic work with the young people and co-works with key workers on family work. The unit also had access to a child and adolescent psychiatrist for consultation in relation to the care of the young people.

Education

The standard on education was well met. The staff team told inspectors that they placed a high value on education. The unit had its own school attached to the main building. The young people had educational plans tailored to their needs. One young person needed one-on-one classes and this was implemented. Another young person who had drifted out of the school system prior to his placement told inspectors that he now loved going to school. He said he had not missed one day and was “proud to have completed his junior certificate”. He told inspectors that the school is helping him to fulfil his ambition to become a carpenter. Inspectors learnt subsequent to inspection that the young people achieved really good exam results this year. This is commendable.

Aftercare planning

The standard on aftercare planning was met. Preparation for leaving care and after care was good. Discharges were planned.

Administrative files

The standard on administrative files was met. The content and organisation of care files, log books and other records was of a good standard. Overall the filing system was coherent, securely maintained, and organised in a way that facilitated ease of access for effective management and accountability.

Vetting
All of the staff team employed at the centre had garda clearance and thee references as required by the standards.

Register
The centre had a register specifying all the information required by the regulations. This standard was met.

Fire safety
The centre possessed 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. The standard on fire safety was met.

Practices that met the required standard in some respect only

Inspectors found that standards were partially met in relation to some aspects of social work, management of behaviour, child safety, children's rights, vetting, and premises and maintenance.

Social work and care planning.
The standard in relation to social work and care planning was met in part. All the young people had social workers who visited them regularly. Two young people valued social work contact and told inspectors that they listen to them and if they were unhappy would do something about it. Two of the social workers interviewed by inspectors had not read centre files from time to time as required by the standards. All the young people had care plans and they were regularly reviewed. However one care plan was not fully completed omitting details such as number of previous placements. There was a good level of inter-professional work and inter-agency cooperation between the centre and social workers in the majority of cases. The social workers told inspectors that communication was good and they were notified of significant events. Inspectors were told that in a small number of cases there had been a delay of three days before they received notification.
Inspectors had concerns about the delay in making important information available to the unit in one case referred at short notice because of the risks associated with this young person. It soon became apparent that he had complex needs and the unit learnt that there were many reports outlining these needs. Inspectors found that at the time of inspection, some 10 months later, despite many verbal and written requests from the unit, highly significant psychiatric, psychological and forensic risk assessment reports were not made available to the unit. Most of these reports were written by HSE staff. One of the reports was finally made available to the unit subsequent to and as a consequence of this inspection. However given his ongoing welfare needs inspectors recommend that those outstanding reports are sent to the unit as a matter of priority. This delay is indicative of poor professional practice. Inspectors recommend that in future when making a referral to the unit, social workers give priority to making all relevant reports available to the unit as soon as is practicable. Inspectors were further concerned to find in the same case that a social worker and her team leader were not sufficiently informed about key aspects of the young person's history crucially relevant to his referral in the first place.

Two of the young people had been appropriately placed in the unit and social workers told inspectors that they were progressing well since placement in the unit. However, inspectors had concerns about the level of risky behaviour one young person displayed towards himself and others and recommend that a statutory care review meeting is called to review his needs.

Children's Rights

The standard on children's rights was met in part. Young people were informed of their rights on admission. They also received a booklet written specifically for young people outlining unit policies and children's rights. The young people told inspectors that they were consulted about all aspects of their lives, and facilitated to give their views at care plan review meetings. They were also aware that they could access information on their files. The young people wrote their own reports for statutory review meetings. The centre had a routine practice of making log books available for young people to read. They had their own meetings prior to staff meetings where they raised issues that mattered to them. They were consulted about school courses, given a wide choice of leisure activities; they were involved in drawing up the daily meal menu, and could choose their own clothes. The young people were encouraged to attend a religious service of their choice on a weekly basis.

The centre had a well developed complaints procedure that up to the recent past had worked well especially on minor day to day issues. Young people said that they could talk to the acting manager or their key worker if they were worried about anything. However two of the young people had made complaints about being bullied in the unit by another young person. The behaviour complained of is discussed further below in the child safety and behaviour management section.

Child safety and protection

The staff team interviewed by inspectors had a good knowledge of centre policies in relation to the safety and wellbeing of the children. However, inspectors had concerns about the level of bullying in the unit. This took the form of one young person mocking other young people, threatening them and pushing them. The young people had voiced their concerns to the staff team about this on many occasions but bullying behaviour continued. They had lost confidence that the staff were in a position to stop bullying behaviour in an effective manner. The young people told inspectors that they believed that staff "have no power to control another young person". In the three months prior to this inspection there were 41 notifications of significant events that reflected difficulties in managing behaviour mainly of one young person. There had been 33 incidents of unauthorised absences in the last six months prior to inspection. All relevant people had been informed in line with HSE policy. There were two occasions when one young person stayed out overnight. Most of these absences were of short duration, averaging slightly over one hour but given the nature of the vulnerability of these young people inspectors recommend this is reviewed by the HSE South. The young people told inspectors that as a consequence of bullying behaviour they would leave the unit at times without permission because they could not cope with this behaviour, thus exposing themselves to further unsafe situations. Staff had systemically attempted to address this serious problem in many ways and all bullying incidents were notified as a significant event and reported as a child protection issue. However, their interventions were not effective and at the time of inspection, bullying had become chronic. Inspectors recommend a review of the unit's responses to bullying behaviour amongst young people with a view to developing an effective strategy to end this negative behaviour.

Behaviour management

Inspectors found that by and large the young people were well cared for and that staff related well to them. The staff team told inspectors that a consistency in the team approach, a good relationship with the young people, and an understanding of them and their families were the key factors in managing behaviour. There was an emphasis on giving the young people the opportunity to develop positive relations which assisted them in learning skills of sharing, negotiating and cooperation.
Inspectors found that this approach was evidentially and commendably working during the last inspection and to a large extent it continued to work for two of the young people. However, Inspectors found that there was an overemphasis on this relational aspect in managing behaviour and it was not working in one case. The staff team needed to be more assertive, using good authority, more appropriate to an adult-child relationship.
Some of the young people's behaviour both internal and external to the centre was of a criminal nature appropriately attracting the attention of the gardai. There were other times when behavioural difficulties of a non criminal nature led to staff calling the gardai in an attempt to manage behavioural difficulties. All the staff team had been trained in TCI in all its aspects up to and including physical restraint. There were no physical restraints in the year prior to the inspection. However, given the challenging behaviour of some young people that placed themselves and others at risk, inspectors recommend a review of the practice of no physical restraint in the unit. Inspectors also recommend a review of garda contact in consultation with social workers.
While staff told inspectors that they had experienced difficulties and at times were under considerable pressure, inspectors observed positive interactions between them and the young people. However, further development and support in responding to challenging behaviour was needed.
A health and safety audit had recently been completed and inspectors recommend completion of all outstanding requirements.

Premises and maintenance
The young people did not like the location of the unit. They found it stigmatizing. One young person when asked what he would change said he would change the location of the unit from hospital grounds to "a proper house with a mantelpiece over the fireplace". Another young person said he would like to repair the basketball court currently in disrepair situated at the back of the unit.
If the unit is to remain on hospital grounds there needs to be more emphasis on privacy. The unit manager and the young people told inspectors that people visiting the hospital frequently parked their cars in the back yard of the unit. Young people told inspectors they were subject to curiosity as to what they are doing living in hospital grounds. Inspectors witnessed members of the public calling to the unit assuming it was the hospital reception area. In the short term inspectors recommend the front entrance and the back yard is made more secure by erecting a fence. In the long term the unit is not in a suitable setting and inspectors recommend the HSE commence planning for an alternative location.

Practices that did not meet the required standard.

There were no practices that did not meet the required standards.

2. Findings

2.1 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.

	Practice met the required standard	*Practice met the required standard in some respects only*	*Practice did not meet the required standard*
Purpose and function	√		

2.2 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.

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

Recommendations:

1. The HSE South should ensure that the external line manager clarify with the staff team that the primary function of formal supervision is accountability.

2. The HSE south should ensure that there is sufficient management available all year and risk assess any applications for discretionary leave giving priority to the contingences of the unit.

2.3 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 service executive to monitor statutory and non-statutory children's residential centres.

	Practice met the required standard	*Practice met the required standard in some respects only*	*Practice did not meet the required standard*
Monitoring	√		

2.4 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.

	Practice met the required standard	*Practice met the required standard in some respects only*	*Practice did not meet the required standard*
Consultation	√		
Complaints		√	
Access to information	√		

2.5 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.

	Practice met the required standard	*Practice met the required standard in some respects only*	*Practice did not meet the required standard*
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:

3. The HSE South should conduct a review of the reason for a delay of one year subsequent to the placement of one young person in making professional reports available to the Unit and ensure that the remaining reports are made available as a matter of priority.

4. The HSE South should ensure that all social workers read centre files from time to time

5. The HSE South should review the placement of one young person.

2.6 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.

	Practice met the required standard	*Practice met the required standard in some respects only*	*Practice did not meet the required standard*
Individual care in group living	√		
Provision of food and cooking facilities	√		
Race, culture, religion, gender and disability	√		
Managing behaviour		√	
Restraint		√	
Absence without authority		√	

Recommendations:

6. The HSE South should ensure that external and internal management

- review all absences without authority.
- review the implementation all aspects of Therapeutic Crisis Intervention.
- review their protocol in relation to garda contact at the centre.

2.7 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.

	Practice met the required standard	*Practice met the required standard in some respects only*	*Practice did not meet the required standard*
Safeguarding and child protection		√	

Recommendations:

7. The HSE South should ensure that young people in the centre are safe and strengthen the staff's management of the behaviour of one young person.

8. The HSE South should review some aspects of behaviour management in the unit including bullying among young people.

2.8 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.

	Practice met the required standard	*Practice met the required standard in some respects only*	*Practice did not meet the required standard*
Education	√		

2.9 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.

	Practice met the required standard	*Practice met the required standard in some respects only*	*Practice did not meet the required standard*
Health	√		

2.10 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.

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

Recommendations:

9. The HSE South should ensure completion of all outstanding requirements of a recent health and safety audit.

10. THE HSE South should ensure that the front entrance and the back yard is made more secure and efforts are made to revitalise the basket ball pitch on the back ground owned by the unit.

11. The HSE South should commence planning an alternative location for this unit.

3. Summary of recommendations

1. The HSE South should ensure that the external line manager clarify with the staff team that the primary function of formal supervision is accountability.

2. The HSE South should ensure that there is sufficient management available all year and risk assess any applications for discretionary leave giving priority to the contingences of the unit.

3. The HSE South should conduct a review of the reason for a delay of one year subsequent to the placement of one young person in making professional reports available to the Unit and ensure that the remaining reports are made available as a matter of priority.

4. The HSE South should ensure that all social workers read centre files from time to time

5. The HSE South should review the placement of one young person.

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    - review all absences without authority.
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