



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

**Social Services
Inspectorate**

A

CHILDREN'S RESIDENTIAL CENTRE

IN THE

HSE DUBLIN NORTH EAST AREA

Final

INSPECTION REPORT ID NUMBER: 310

Fieldwork Date: 19th – 20th May 2009

Publication Date: 12th June 2009

SSI Inspection Period: 11

Centre ID Number: 24

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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), Dublin North East Area (DNE) under Section 69 (2) of the Child Care Act 1991. Bronagh Gibson (lead inspector) and Orla Murphy (co-inspector) carried out the inspection over a two day period from the 19th to the 20th of May, 2009.

The centre provided residential care for up to three young people aged between twelve and eighteen years. The centre was a bungalow, located in a small mature estate on the outskirts of a town in North County Dublin. There were two young people living in the centre during the inspection fieldwork. One of them was a mother, and the baby was also living in the centre. There had been one admission and one discharge in the year prior to inspection.

Overall, inspectors found that the young people in the centre were receiving good care. The centre had a cohesive and motivated staff team and an enthusiastic centre manager. Inspectors found that centre practices ensured that most of the standards were well met and that there were no practices that did not meet the required standard.

1.1 Acknowledgements

Inspectors were well received in the centre and wish to thank the young people, and acknowledge staff members and other professionals for their co-operation during this inspection.

1.2 Methodology

The judgements of inspectors in this inspection are based on an analysis of findings verified from more than one source of evidence gathered through observation of practice, examination of records and documentation, an inspection of accommodation, an interview with one young person, two social workers, the centre manager, three child care workers, the HSE monitoring officer and the alternative care manager.

The following documents were available to inspectors during this inspection:

- A questionnaires completed by two young people
- Questionnaires completed by two social workers
- The centre's statement of purpose and function
- The centre's policies and procedures
- Young people's care plans and care files
- Census forms on staff
- Census forms on young people
- Personnel files
- Administrative records
- HSE monitoring officer report
- Previous SSI inspection report
- The centre's health and safety documents.

1.3 Management structure

The centre manager reported to the alternative care manager, who in turn reported to the general manager and local health office manager (LHM).

1.4 Data on young people

On the first day of fieldwork the following young people were residing in the centre:

Listed in order of length of placement

Young Person	Age	Legal Status	Length of Placement	No. of previous placements
# 1	16.5 years	Full care order	10.10 years	One foster care
#2	17.10 years	Full care order	11 months	One residential care
#3	Three months	N/A	Three months	N/A

2. Summary of Findings

The centre had previously been inspected by the SSI in 2006, and inspectors found that many of the standards were well met. The areas of practice that required improvement were the centre register, fire safety and young people being absent and at risk. There were no practices that did not meet the required standard in this inspection.

Practices that met the required standard

Management

This standard was well met. The centre was managed by a qualified and experienced manager. Inspectors found good evidence of the centre manager ensuring effective practice, signed off on documents/records generated by the centre staff, supervised the staff team, and had made every effort to ensure that the HSE monitoring officer's recommendations, and previous SSI recommendations were implemented. Inspectors found that the centre manager was respected by the staff team and professionals external to the centre. The centre manager was line managed by the alternative care manager who visited the centre regularly. Inspectors found that systems in place in the centre ensured staff and the centre manager were accountable for their work with the young people.

Supervision and support

This standard was met. Supervision was held within the timescales established in the centre policies, was well recorded and stored in a secure cabinet. From centre records, inspectors found that supervision focussed on work with young people, centre policies and procedures and training. Inspectors found that it provided a framework for staff to be accountable for their work.

Training and development

This standard was met. Records showed that the centre undertook training and development that was focussed on the needs of the young people. Team meetings were used effectively in the provision of training on areas such as attachment and centre procedures.

Monitoring

This standard was well met. The HSE monitoring officer visited the centre regularly and one young person told inspectors that he/she knew who he was. The HSE monitoring officer had produced a comprehensive self-audit of the centre under the national standards. Most of the recommendations from the HSE monitoring officer's report had been implemented and several were ongoing.

Children's rights

This standard was met. Inspectors found that centre policies and practices ensured the rights of young people were promoted. The centre had a discreet library for young people in which they could access information about their rights, and it contained copies of the national standards. The young people in the centre told inspectors they knew their rights, including who they could/would complain to if they had an issue. Both reported being respected by the centre staff. The young people had received information from the Irish Association of Young People in Care.

There was a booklet that provided information on the centre. Young people's meetings were held weekly, and inspectors saw good evidence of them being consulted about centre routines, rules and practices. Outcomes of requests by the young people in that forum were well documented.

Inspectors found that complaints were dealt with in keeping with centre policies and best practice. The staff had received training just prior to inspection on the centre's complaints policy.

Suitable placements and admissions

This standard was met. The young person who had been resident in the centre for over 10 years told inspectors that this continued to be the most suitable placement for him/her and external professionals agreed with this view. The other young person had been admitted 10 months prior to inspection, and inspectors found her to be appropriately placed. The centre found out that this young person was pregnant a month after she was admitted, and had dealt with this situation effectively. Staff had received training on attachment which they incorporated into practices to support the young mother attach with the baby. This was ongoing. The centre had also restructured the living areas to ensure that the young person and her baby, and the other young person had privacy.

Care Planning and reviews

This standard was met. Both young people had up to date care plans on file that reflected the current placements and their needs. Care plan reviews were held within the statutory timescales, and more frequently if needed.

Contact with families

This standard was met. The centre held good records of contact with families. Both young people told inspectors that they were satisfied with their family access. One young person had access restricted (determined within the statutory review process) due to risks involved, and inspectors found that where the young person did not adhere to the restrictions, risk assessments had been carried out, and visits had been notified to the relevant parties.

Social work role

This standard was met. Inspectors found that social workers received and responded appropriately to notifications of significant events. Both young people had up to date care plans on file, had social histories on file and records of immunisations. Social workers visited regularly and met with the young people privately if the young person wished. Social workers read the young people's care files from time to time.

Emotional and specialist support

This standard was met. Inspectors found that the centre had sourced specialist supports in education for one young person (special needs assistant). One young person was assessed as having a reactive attachment disorder, and received ongoing support from a psychologist, who also worked with the team on a consultative basis. There was evidence of educational assessments on file for one young person, and the centre staff reported to inspectors that specialist support was available when required. Inspectors found that the staff team provided emotional support to both young people. Professionals involved with one young person, reported improvements in his/her behaviour and interactions.

Children's care records

This standard was well met. The centre had developed a recording system that was accessible young people and inspectors. Care files were divided into sections, which were clearly marked and well maintained. A system of cross referencing made access to reports referred to in various sections of the files easy to find.. The centre had introduced several books which recorded visits to the young people, family access, individual work and the administration of medication. These provided accountability for the work being done with the young people and centre practices generally. Files were kept in a safe area of the centre. Each young person's file had a confidential section. (See also administrative files).

Provision of food and cooking facilities

This standard was met. One young person interviewed told inspectors that food was plentiful and varied. The kitchen was well stocked with healthy and nutritious food. The kitchen was accessible to the young people, and the eating habits of one young person were monitored due to his dietary needs.

Race, culture, religion, gender and disability

This standard was met. Care plans identified the religion of the young people. Every effort was made to encourage young people to attend religious ceremonies, and one young person had attended a blessing of his mother's grave.

Managing behaviour

This standard was met. Inspectors found that the centre had managed behaviours by the young people on an individual basis and used sanctions in a proportionate and

appropriate way. Risk assessments were used to determine potential and immediate risks.

Restraint

This standard was met. There had been no restraints in the centre in the year prior to inspection. All staff were trained and refreshed in the method of Therapeutic Crisis Intervention (TCI), and were aware of the centre policies in relation to the use of physical restraint.

Safeguarding

This standard was met. The centre had a safeguarding policy. Staff interviewed were aware of this policy and had a good understanding of what safeguarding meant. The young people told inspectors that they had an adult external to the centre with whom they could talk if they had a problem or a complaint. They both reported feeling safe in the centre. (See absences and notification of significant events)

Child protection

This standard was met. The centre had a child protection policy. There had been one child protection notification in the year prior to inspection and this was found by inspectors to have been notified in accordance with Children First: National Guidelines on the Protection of Children. Inspectors found that social work had responded to this notification promptly and appropriately, and that a child protection case conference had been held. Inspectors found that child protection concerns that were ongoing were being managed by both the centre and the social worker involved, and that a plan had been developed to monitor them (see absences and notification of significant events).

Education

This standard was met. Inspectors found that the educational needs of one young person were being met, and that they attended school regularly. The other young person had completed their junior certificate examination and had not gone on to further education. This young person was 17 years old. The centre staff were continuing to encourage this young person to get further training. Centre records had an education section that held good information on the young people's education and exam results.

Health

This standard was met. Both of the young people had a named GP. They could choose a GP of their choice. The young person who had had a baby had regular contact with the local public health nurse (PHN). This PHN contributed to care plan reviews for the young person.

The centre had a comprehensive set of programmes related to health matters that it offered to the young people and several staff had been trained in teenage sexual health.

Accommodation

This standard was met. The centre was a four bed-roomed bungalow situated in a small residential estate. It had a large driveway in the front with plenty of off street parking. It had a good sized back garden. The young people had their own bedroom and the living areas had been re-allocated to ensure that the young person with the

baby had plenty of space, and that the other young person had some privacy. The centre had a homely atmosphere, was clean and brightly painted.

Practices that met the required standard in some respects only

Purpose and Function

This standard was partly met. The centre had a statement of purpose and function that did not clearly state the duration of placements offered by the centre, and it did not list the key policies of the centre. Inspectors recommend that the HSE (DNE) ensures that the centre's statement of purpose and function states how long a young person may stay in the centre and lists key policies in the centre.

Register

This standard was partly met. The centre register was structured in a way that captured all of the information required by regulations. Inspectors found that the baby born to one of the residents was not recorded on the register. Inspectors recommend that the HSE (DNE) ensures that the baby of one of the centre's residents is placed on the centre register.

Notification of significant events

This standard was partly met. The centre had a clear system for the notification of significant events, and inspectors found that all significant events in the year prior to inspection had been notified in accordance with centre policy.

One young person had given birth to a baby in the year prior to inspection. This young person had been absent and at risk from the centre whilst accompanied by the baby on several occasions. This young person had also been absent and at risk having left the baby in the care of centre staff. Notifications of significant events had been made in relation to the young person, and not the baby, although the concerns for the baby had been noted in the text of these reports. Despite this, the social worker had responded appropriately to concerns related to the baby. Inspectors recommend that the centre manager and social worker develop a procedure for reporting significant events for the baby separate to those of the baby's mother.

Staffing and vetting

This standard was mostly met. Inspectors found that the centre was staffed by a predominantly long-standing and experienced staff team. Several staff had joined the team in the two years prior to inspection, and staff interviewed told inspectors that this had been a positive experience for the team. The centre had twelve staff: a centre manager, a deputy manager, two team leader posts and eight social care worker posts. The deputy manager was in an acting position, as was one of the team leaders. Despite this, inspectors found this to be a stable and cohesive team. Inspectors found that staff employed in the two years prior to inspection were appropriately vetted.

There were some deficiencies in the qualifications of the staff team, and every effort was being made to rectify this. Three staff were in the process of becoming qualified. A strategy was being developed to support the remaining unqualified staff to get qualified. Inspectors recommend that efforts to get the remaining unqualified staff qualified continue.

Due to the number of staff in education, agency staff were employed by the centre to cover vacant shifts. Although this increased the number of shifts allocated to agency staff, inspector found that the centre endeavoured to use the same agency workers in order to provide a stable environment for the young people and the team. Agency staff received an induction to the centre. Inspectors found that the centre manager had satisfied himself that the agency workers had been appropriately vetted.

Administrative files

This standard was mostly met. The centre had good systems of communication and recording, which inspectors found ensured good communication and information gathering in the centre. There was a good system of cross referencing across records. Records were kept up to date and stored in secure areas of the centre. Inspectors found that there was some replication across centre records which added to the volume, and suggest that the system be reviewed to reduce its volume. Inspectors found that staff interviewed were unfamiliar with policies related to computer generated information and recommend that the HSE (DNE) ensures that the centre has a policy on computer generated information that is in keeping with legislation.

Preparation for leaving care and aftercare

This standard was mostly met. Inspectors found that both of the young people in the centre had had an aftercare needs assessment completed. They had both been referred for an aftercare worker. The centre had access to two after care houses in the local vicinity. Inspectors also found that care plans provided actions to be taken in respect of aftercare planning.

The centre had an individual work folder in which they recorded the individual work carried out with the young people in preparation for discharge and aftercare. This provided inspectors with good evidence of work such as budgeting, use of public transport, food shopping and preparation, and setting up a bank account being done with the young people.

One young person was due to leave the centre after turning 18 in June 2009. She had been provided with several options, including a placement in a mother and baby unit, but had refused these, preferring to go home. This young person had been referred to the aftercare service in the region and a request had been made for a family support worker to be allocated. Considering the risks and concerns identified by social work and other professionals in relation to this young person's return home, and her capacity to care for a young baby safely, inspectors recommend that the HSE (DNE) ensures that a plan is written, which names individuals who will provide support services to this young person and her baby, with their roles and responsibilities clearly identified, before this young person returns home.

Absence without authority

This standard was partly met. One young person had been absent 83 times from the centre in the year prior to inspection. The centre had a classification system in relation to absences that allowed the staff identify if the young person was absent without permission or absent and at risk. Only those absences that were classified as an absence and at risk were notified to the Gardai. All absences were found by inspectors to have been notified in accordance with the centre policy.

Centre records showed that the 83 absences by one young person were classified as absent at risk. The centre had worked in partnership with the social worker and the family in relation to managing and notifying these absences. The absences ranged from one hour to 37 hours. The young person was at their family home during many of these absences, and this was deemed a risk by the professionals involved. Inspectors recommend that a system of reviewing persistent absences at risk is developed by the centre manager and alternative care manager, in order to ensure they are notified as child protection concerns if necessary.

Maintenance and repairs

This standard was partly met. The centre had a maintenance log that recorded maintenance requests and the time within which they were completed. The centre manager and staff interviewed told inspectors that emergency repairs were dealt with promptly, and that ordinary everyday maintenance needs were not. There was an ongoing problem with the ventilation system in the area that held the washing machine and dryer. Other areas of maintenance requirements identified by the centre's health and safety audit remained undone. There were areas in the house where fire extinguishers had been removed and the wall had not been repaired and painted. The house required some redecoration throughout. Inspectors recommend that the HSE (DNE) ensures that the centre is maintained to a good standard, and that outstanding maintenance needs are attended to.

Safety

This standard was partly met. The centre had a health and safety statement that was signed by all centre staff. The centre had a member of staff designated as the health and safety representative. A health and safety audit had been carried out in January 2009. Those hazards that could be addressed by the centre manager and staff were. Those that were not addressed came under the remit of the HSE maintenance department, and although they were reported by the centre manager to maintenance, they remained undone (see maintenance).

Fire safety

This standard was partly met. The centre had a fire register that was up to date. Fire drills were carried out at regular intervals in the year prior to inspection. One staff member was the designated fire safety representative. Several fire extinguishers in the centre had been serviced (according to the centre records) but this was not recorded by the company involved on the equipment itself.

The centre did not have written confirmation from a qualified architect or certified engineer stating the centre was compliant with the regulations and standard 10.19. To meet this standard, the HSE (DNE) must ensure that all fire fighting equipment indicates when it was last serviced, and that the centre receives written confirmation from a qualified architect or certified engineer stating the centre was compliant with standard 10.19.

Practices that did not meet the required standard

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

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. Inspectors recommend that the HSE (DNE) should ensure that the centre's statement of purpose and function states how long a young person may stay in the centre and lists key policies in the centre.

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 (DNE) should ensure that the baby of one of the residents is placed on the centre register.
3. The HHSE (DNE) should ensure that the centre manager and social worker develop a procedure for reporting significant events for the baby separate to those of the baby's mother.
4. The HSE (DNE) should ensure that the centre has a policy on computer generated information that is in keeping with legislation and good practice.

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		√	
Discharges	√		
Aftercare	√		
Children's case and care files			

Recommendation:

- The HSE (DNE) should ensure that a plan is written, which names individuals who will provide support services to this young person and her baby, with their roles and responsibilities clearly identified, before this young person returns home.

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 (DNE) should ensure that a system of reviewing persistent absences at risk is developed by the centre manager and alternative care manager, in order to ensure they are notified as child protection concerns when necessary.

7. Safeguarding and Child Protection

Standard

Attention is paid to keeping young people in the centre safe, through conscious steps designed to ensure a regime and ethos that promotes a culture of openness and accountability.

	<i>Practice met the required standard</i>	<i>Practice met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Safeguarding and child protection	√		

8. Education

Standard

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

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

9. Health

Standard

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

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

10. Premises and Safety

Standard

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

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

Recommendations:

7. The HSE (DNE) should ensure that the centre is maintained to a good standard, and that outstanding maintenance needs are attended to.
8. The HSE (DNE) should ensure that all fire fighting equipment indicates when it was last serviced and that the centre receives written confirmation from a qualified architect or certified engineer stating the centre was compliant with standard 10.19.

4. Summary of recommendations

1. The HSE (DNE) should ensure that the centre's statement of purpose and function states how long a young person may stay in the centre and lists key policies in the centre.
2. The HSE (DNE) should ensure that the baby of one of the residents is placed on the centre register.
3. The HHSE (DNE) should ensure that the centre manager and social worker develop a procedure for reporting significant events for the baby separate to those of the baby's mother.
4. The HSE (DNE) should ensure that the centre has a policy on computer generated information that is in keeping with legislation.
5. The HSE (DNE) should ensure that a plan is written, which names individuals who will provide support services to this young person and her baby, with their roles and responsibilities clearly identified, before this young person returns home.
6. The HSE (DNE) should ensure that a system of reviewing persistent absences at risk is developed by the centre manager and alternative care manager, in order to ensure they are notified as child protection concerns when necessary.
7. The HSE (DNE) should ensure that the centre is maintained to a good standard, and that outstanding maintenance needs are attended to.
8. The HSE (DNE) should ensure that all fire fighting equipment indicates when it was last serviced and that the centre receives written confirmation from a qualified architect or certified engineer stating the centre was compliant with standard 10.19.