

# Lenus: Research Repository



## A children's residential centre in the HSE South

Item Type	Report
Authors	Health Information and Quality Authority (HIQA), Social Services Inspectorate (SSI)
Publisher	Health Information and Quality Authority (HIQA)
Download date	2026-05-20 22:28:53
Link to Item	<a href="https://hdl.handle.net/10147/84976">https://hdl.handle.net/10147/84976</a>



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cálíocht Sláinte

**Social Services  
Inspectorate**

**A**

**CHILDREN'S RESIDENTIAL CENTRE**

**IN THE**

**HSE South**

***INSPECTION REPORT ID NUMBER: 287***

**Publication Date: 14<sup>th</sup> April 2009**

**Inspection Date: 27<sup>th</sup> – 28<sup>th</sup> January 2009**

**SSI Inspection Period: 11**

**Centre ID Number: 44**

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](http://www.hiqa.ie)

# **Contents**

## **1. Analysis of findings**

Introduction

*1.1 Methodology*

*1.2 Acknowledgements*

*1.3 Management structure*

*1.4 Data on young people*

## **2. Findings**

## **3. Summary of recommendations**

# 1. Findings

## Introduction

The Health Information and Quality Authority Social Services Inspectorate carried out an unannounced inspection of a children's residential centre in the Health Service Executive South (HSE South) Area. Kieran O'Connor (lead inspector) and Patrick Bergin (co-inspector) conducted the inspection under *Section 69 (2) of the Child Care Act 1991* from the 27<sup>th</sup> to the 29<sup>th</sup> of January 2009.

The centre was located in an attractive two storey detached house, situated on a main road close to the city. It was one of three residential facilities in the Local Health Office (LHO) area, one of which was a high support unit. Its statement of purpose and function, which was reflected in practice, stated it provided respite, shared care, emergency, short to medium care for five children or young people, boys and girls, normally aged between 12 and 18 years of age. However it does accept children as young as 8 years for short term placement. This requires review. Wherever possible, children under 12 years of age need to be placed in foster care.

The centre had a semi-independent living bedroom situated upstairs in the centre for young people at the stage of leaving care.

A HSE South admissions panel in consultation with the centre manager made decisions about admission except in emergencies. At the time of the inspection there were four young people, one girl and three boys aged between 14 and 16 years living there. Two of these young people were in shared care, one with another residential centre where he attended school, and one with his family.

The centre was last inspected by the Inspectorate in 2006 and recommendations arising out of this had been met.

The main finding from this inspection was that the overall standard of care was very good and there was a domestic normality about the way the centre was run. The inspectors recommended the need for an update of centre policies and procedures, the allocation of a social worker to a child and increased formal staff and management supervision. The previous inspection commended the good standard of care in this centre and it is noteworthy that inspectors found the same good quality of primary care on this occasion. There was a warm and relaxed homely atmosphere in the centre. While this report outlines a number of recommendations inspectors commend the management and staff for the quality of care provided to the young people in the centre.

## 1.1 Methodology

Inspector's judgements are based on evidence of findings verified from several sources including interviews, direct observation of interactions between staff and children and a review of records. Interviews were conducted with four young people, the centre manager, four social care leaders, two care workers, a social work team leader, two social workers, the monitoring officer and the child care manager (who line managed the centre) and had telephone interviews with two parents and a local general practitioner, inspectors undertook a review of accommodation.

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

- 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
- The young people's care files
- Administrative records

## 1.2 Acknowledgements

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

## 1.3 Management structure

The centre manager reported to the HSE South child care manager who in turn reported to the acting general care manager for the local health office who held regional responsibility for residential child care.

## 1.4 Data on young people

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

<i>Young Person</i>	<i>Age</i>	<i>Legal Status</i>	<i>Length of Placement</i>	<i>No. of previous placements</i>
#1 boy	16	Voluntary care	9 months	None
#2 girl	14	Sect 12 Care order	2 weeks	1 residential placement 1 foster placement
#3 boy*	15	Voluntary care	18 months	1 residential placement 1 foster placement
#4 boy	14	Voluntary care	18 months	none

\*Shared care with another centre

## ***Practices that met the required standard***

### *Primary care*

The children in the centre received a good standard of primary care and their health needs were well met.

There were written policies on all aspects of the care of young people and inspectors found these were largely reflected in practice. However, these policies had not been reviewed since 2000 and in some cases care practices in the centre were of a higher standard than was reflected in centre policies. Inspectors recommend an update of centre policies and procedures.

The young people themselves were positive about the care they received. They said they were happy living in the centre. The young people loved the fact that the centre was indistinguishable from any other house in the neighbourhood. One young person, when asked what changes he would like to make to the centre replied "nothing, I like it here, it's a nice house, and my key worker always stands up for me". Another young person told inspectors that although she would prefer to be at home "the staff do their best to make you feel at home". Inspectors observed that the staff related to the young people in a sensitive, patient, cheerful and relaxed manner. The young people also told inspectors they liked living with each other and got on well with each other most of the time. In their review of centre files and conversations with the young people, inspectors found that there was frequent and high quality key working sessions with the young people, covering areas such as sexual health and anger management and independent living. The young people were very involved in leisure activities such as rugby, hurling, swimming and drama and music. All the young people spoke well of the food in the centre. The standard on primary care was met.

### *Management and staffing*

The centre had a qualified and experienced manager. She was assisted by a social care leader with responsibility. Inspectors found that their management styles complemented each other. The manager provided leadership and direction, and was accessible to both the young people and staff. Inspectors formed the view that the manager and deputy manager were respected by both the staff and young people. They were well informed on all aspects of day-to-day care practices and on the needs of the individual young people. Inspectors found that the centre was generally well managed. At the time of inspection external management reporting arrangements were in transition. Up to the recent past the centre manager reported to the general manager. However, the child care manager had recently acquired line management responsibility of the centre.

There were 13 full time posts including the manager. At the time of inspection there were 10.5 members on the staff team and a relief panel of three well known to the young people. There was also a part time staff who helped the staff team with domestic tasks. Inspectors found a dedicated, enthusiastic and cohesive team, the majority of whom were qualified, committed to providing a good service to the young people in their care. This was a very experienced stable team with an average of 12 years child care practice behind them. Professionals external to the centre spoke of the dedication and resilience of the staff team, their partnership approach to their work and valued the service they provided.

Inspectors found that staff morale was generally high. However some of the staff team told inspectors that at times they felt they were insufficiently consulted about aspects of care practice and this affected staff morale to some extent. The centre had the occasional services of a staff facilitator and inspectors advise that this could also be a forum for further discussion on staff empowerment and reflective practice.

#### *Other Supports.*

Staff meetings occurred on a fortnightly basis. These were well attended and often used as an education and training forum in addition to reviewing the needs of the young people in their care. The HSE had a policy of supporting staff to obtain required qualifications and at the time of inspection one of the staff team was attending college. Staff had received training in Children First the National Guidelines for the Protection and Welfare of Children, Therapeutic Crisis Intervention (TCI), Occupational First Aid and other topics relevant to their work. All newly appointed staff received formal induction.

There was only one male member of staff and three of the young people mentioned this when asked what changes they would make to the centre. Inspectors urge the HSE South to continue in their efforts to recruit male members of staff to ensure gender balance and to provide opportunity to model appropriate male/female relationships.

#### *Monitoring*

The centre had been visited by the monitoring officer on four occasions in the past year. He met with the young people and staff and inspected against selected standards. He published a report with recommendations in November 2008. All recommendations have been fully met. He reads and signs off on care files. He received notification of all significant events. The monitoring officer made himself available to the manager and staff by phone on a monthly basis for consultation. He was also involved in some staff training. All the staff interviewed by inspectors found him supportive and his advice valuable.

#### *Education*

The management and staff team showed a high level of commitment to meeting the young people's educational needs, and placed a high value on education as a vehicle for enhancing self-esteem and future life chances. All the young people were either attending school or training. The standard on education was well met.

#### *Health and specialist services*

The standard on health was met. All the children had a general practitioner and a choice of male or female doctor. The staff were well aware of the health needs of the children. However, medical records need to be more ordered. Food in the centre was varied and nutritious. All the young people had a medical report on file with the exception of one person newly arrived and inspectors recommend that this is obtained as soon as possible. Inspectors further advise that medical histories should be included on file where feasible. The centre accessed other medical specialists as required.

#### *Family contact*

The centre had a policy of encouraging family contact. Two of the young people were in a shared care arrangement with the centre and their families. Both parents told inspectors that they were always listened to and their opinions respected by centre staff. They told inspectors that they believed that the centre worked in partnership with them. One other parent would like to visit the centre. The standard on family contact was met.

### *Behaviour management*

Inspectors found that the young people were well cared for and that staff related particularly well to them. There was a high level of cooperation and an air of affection and fun. 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 was the key factor in managing behaviour. This was done through listening to the young people and promoting positive values such as a sense of fairness and respect for others. All the young people had an individual crisis management plan. In the recent past the centre team staff were concerned that one young person left the centre at times without permission. They were aware that she really loved sitting by the fire side as had been her custom while living at home before she came into care. Having a fireside chat had become part of her care plan and consequently there was a significant reduction in her absences from the centre without permission. This is very good creative care practice and skilful management of behaviour. There had been no physical restraints in the year prior to inspection. There was a strong emphasis on the therapeutic aspects of TCI and it was implemented thoughtfully.

There had been one incident of unauthorised absence in the year prior to inspection. All relevant people had been informed including the gardai in line with HSE policy. This will be further discussed in the child safety section.

### *Aftercare planning*

Preparation for leaving care and after care was good. All discharges in the year prior to inspection were planned.

Each young person had their own room which was personalised with family pictures and posters.

### ***Practices that met the required standard in some respect only***

Inspectors found that standards were partially met in relation to purpose and function, staff supervision, some aspects of social work and children's rights, administrative records, and some aspects of maintenance.

#### *Purpose and function and Admissions*

The centre's purpose and function was mainly met. Its statement of purpose and function stated it provided for emergency, respite, shared care, short to medium care for five children and young people, boys and girls, normally aged between 12 and 18 years of age. It also accepted children as young as 8 for short term placement. Inspectors advise that only in exceptional circumstances should children under twelve years of age be placed in residential care rather than foster care.

In the year prior to inspection there were nine admissions. Inspectors found that 8 were emergency admissions. The average length of placement was 16 weeks. At the time of inspection there was one young person residing in the centre for over a year and a half. There was a high dependence on the centre manager to act as a lone gatekeeper in the assessment of the suitability and risk mix of the children in the centre. Inspectors recommend in future this responsibility is shared and the manager in conjunction with the child care manager makes decisions about emergency referrals with the child care manager. Non emergency referrals were assessed by an admissions and discharge committee.

Inspectors were told by HSE senior managers that the centres purpose and function was being reviewed. Inspectors recommend an amendment of the age profile in the purpose and function review.

#### *Staff supervision*

The centre had a policy on formal supervision. Generally formal supervision was seen by the staff team as supportive and a vehicle for accountability. However it had fallen into abeyance in some cases. Some social care leaders with formal supervision responsibilities of the staff team did not have line management responsibility therefore supervision was taking place outside the context of direct accountability. The centre manager received clinical supervision from a professional supervisor outside the employment of the HSE South but financed by the HSE. This is welcomed but insufficient. Inspectors recommend training in supervision for all social care leaders who supervise staff and that formal supervision recommences for all the staff team.

#### *Social work and care planning*

The children had social workers who visited them frequently and regularly and knew them very well. There was a good level of inter-professional work and inter-agency cooperation between the centre and social workers. The social workers told inspectors that communication was very good and they were notified of all significant events. They also received a monthly report on each child from the centre. This is very good practice. The young people valued social work contact and told inspectors that they listen to them.

One young person had a supervising social worker at the initial stages of his placement. However, the social worker subsequently resigned and at the time of inspection had not been replaced. A social work team leader was available in the event of any difficulties. The acquisition of foster parents had been part of his care plan but because of the lack of a supervising social worker this had not occurred and consequently there was an element of drift in his placement. This is unacceptable. Inspectors recommend the appointment of a supervising social worker as a matter of priority. Social workers read centre files from time to time.

The other young people were appropriately placed in the centre, had care plans and were regularly reviewed.

#### *Children's Rights*

The standard on children's rights was mainly met. Young people were informed of their rights on admission and received a young people's booklet outlining these 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. The young people and the staff team were aware that they could read their daily log books. Most of the staff team were aware of the children's right to information about themselves held on their care files. However, some staff and young people believed they did not have a right to access their care file until they were 18 years of age. Inspectors recommend training for centre staff on this aspect of children's rights. Inspectors recommend a more pro-active approach to access to records, where the young people's right to access information about themselves is promoted and facilitated.

The young people were consulted in relation to care plans and reviews. They were very involved in decisions about school and training courses. They were also involved in drawing up a daily menu and could choose their own clothes. One young person did not like produce from a particular supermarket and even this was respected.

Young people had their own team meetings prior to staff meetings where they raised issues of concern to them. However inspectors found more recent meetings had become wish lists for clothes and outings rather than a discussion on aspects of living together in the centre. Inspectors recommend a review of purpose of the children's meeting.

The centre had a well developed complaints procedure that worked well in practice. There was one formal complaint in the past year that was dealt with in a satisfactory manner that satisfied the young person. Young people said they could talk to the manager or their key worker or social worker if they were worried about anything.

#### *Child safety and protection*

The staff team displayed a good degree of awareness of child safety and protection issues internal to the centre; however during interviews with inspectors some staff were unclear about the role of professionals external to the centre. There was some confusion about when a complaint is a safeguarding issue. Inspectors recommend further training in Children First. All the young people told inspectors they felt safe in the centre.

Inspectors were concerned to find that there was no trace of a young person who had gone missing from the centre five months before the inspection. This young person had come into the care of the HSE following her identification by the gardai as being in a high risk situation, both from her personal safety and welfare and from activities of a criminal nature. Inspectors are satisfied the centre and the HSE took all reasonable measures to keep her safe and to try and find her, but given that she went missing three weeks following her placement, question the suitability of this centre as a safe place given the particular circumstances of her situation. Inspectors recommend a review of her case to support safe placement for young people in her situation in the future.

#### *Vetting*

Inspectors were told that all of the staff team at the centre had received garda clearance. However, there was no personnel file available for two of the staff team. Inspectors recommend that the files are found or replaced.

There were no references available for four of the staff team at the time of the inspection fieldwork. One of the staff team employed in the centre in the past year did not have a third reference. Inspectors recommend that the required three references are obtained for any staff employed two years prior to inspection. Inspectors will review all personnel files in the follow up inspection within 3 months of the publication of this report.

### *Administrative files*

The content and organisation of care files was generally good, and organised in a way that facilitated ease of access for effective management and accountability. The centre manager was unsure where staff supervision records were stored as some social care leaders with formal supervisory responsibility stored the records in their homes. This is unsatisfactory practice and must not continue. The lack of access to a computer, photocopier or fax facility and storage space for staff files caused some administrative difficulties in the management of the centre. The centre needed to develop a more coherent filing system, securely maintained.

### *Register*

The centre had a register specifying all the information required by the regulations, except the child's gender. Inspectors recommend that the register is amended to reflect this requirement.

### *Premises*

The premises was very suitable as a residential children's home as it looked identical to other homes in the area. However it needed to be modernised. Overall the centre needed:

- Internal and external repainting
- New carpets
- Structural repair in some parts of the house
- The back garden was used as a car parking area at times and this seriously damaged the football playing area. This practice needed to end
- Renovated kitchen

### ***Practices that did not meet the required standard***

The standard in relation to fire safety was not met.

#### ***Fire safety***

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

## 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.

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

#### Recommendations:

1. The HSE South should review the centre's purpose and function in relation to the age of children on admission.
2. The HSE South should update centre policies and procedures.

### 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.

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

**Recommendations:**

3. The HSE South should ensure that the missing personnel files are found or replaced.
4. The HSE South should ensure that the required three references are obtained for any staff employed two years prior to inspection. The centre needed to develop a more coherent filing system, and a secure storage space for staff supervision files.
5. The HSE South should review the centre records system and ensure that the register includes all information required by regulations.
6. The HSE should ensure that the manager and staff receive regular formal supervision.

**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 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	√		

**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.

	<i>Practice met the required standard</i>	<i>Practice met the required standard in some respects only</i>	<i>Practice did not meet the required standard</i>
Consultation	√		
Complaints	√		
Access to information		√	

**Recommendation:**

7. The HSE South should ensure that centre staff receive refresher training on children's right to information about themselves.

**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.**

	<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:**

8. The HSE South should ensure that a care plan recommendation for foster care for one young person is given the highest priority.
9. The HSE should ensure that a social worker is appointed for one young person as a matter of priority.

## 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.

	<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	√		

## 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.

	<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	√		

### Recommendation:

- The HSE South should conduct a review of one person's case to support safe placement for young people in her situation in the future.

## 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.**

	<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	√		

## 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.**

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

### Recommendation:

11. The HSE South should ensure that one young person has a medical examination.

## 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.

	<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:

12. The HSE South should ensure that the centre is provided with:
  - Internal and external repainting
  - New carpets
  - Structural repair to some parts of the house
  - Alternative car parking space
  - New kitchen
  
13. The HSE should ensure that the centre obtains written confirmation from a qualified architect that all statutory requirements relating to fire safety and building control have been complied with as required by standard 10.19.

## **4. Summary of recommendations**

- 1. The HSE South should review the centre's purpose and function in relation to the age of children on admission.**
- 2. The HSE South should update centre policies and procedures.**
- 3. The HSE South should ensure that the missing personnel files are found or replaced.**
- 4. The HSE South should ensure that the required three references are obtained for any staff employed two years prior to inspection. The centre needed to develop a more coherent filing system, and a secure storage space for staff supervision files.**
- 5. The HSE SOUTH should review the centre records system and ensure that the register includes all information required by regulations.**
- 6. The HSE should ensure that the manager and staff receive regular formal supervision.**
- 7. The HSE South should ensure that centre staff receive refresher training on children's right to information about themselves.**
- 8. The HSE South should ensure that a care plan recommendation for foster care for one young person is given the highest priority.**
- 9. The HSE should ensure that a social worker is appointed for one young person as a matter of priority.**
- 10. The HSE South should conduct a review of one person's case to support safe placement for young people in her situation in the future.**
- 11. The HSE South should ensure that one young person has a medical examination.**
- 12. The HSE South should ensure that the centre is provided with:**
  - Internal and external repainting**
  - New carpets**
  - Structural repair to some parts of the house**
  - Alternative car parking space**
  - New kitchen**
- 13. The HSE should ensure that the centre obtains written confirmation from a qualified architect that all statutory requirements relating to fire safety and building control have been complied with as required by standard 10.19.**