Inspection of a children's residential centre in the HSE Mid Leinster, 28-29 March 2012

Health Information and Quality Authority

An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte

INSPECTION OF A CHILDREN'S RESIDENTIAL CENTRE

IN HSE DUBLIN MID-LEINSTER

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1. Introduction

The Health Information and Quality Authority (the Authority), Social Services Inspectorate (SSI), carried out an announced inspection of a children's residential centre in the Health Service Executive (HSE) Dublin Mid Leinster (DML) Area. Kieran O'Connor (lead inspector), Maeve O'Sullivan and Helen Donovan (co-inspectors) conducted the inspection under *Section 69 (2) of the Child Care Act 1991* on the 28 March 2012 and 29 March 2012.

The centre was located in a homely two storey detached house, situated in a quiet residential area close to a large town. The statement of purpose and function, which was reflected in practice, stated that the centre provided medium-to-long term care for five children and young people, boys and girls, aged between 13 and 17 years of age. It had a self-contained, semi-independent living apartment situated on the grounds of the centre.

The centre had been inspected by the Social Services Inspectorate in 2009 (ID number 312) and follow-up inspections occurred in October 2010 (ID number 424) and July 2011 (ID number 481) respectively. During the most recent follow-up inspection in July 2011, inspectors found that recommendations were met in relation to purpose and function, education, aftercare, social work and premises. Recommendations were met in part regarding monitoring, emotional and specialist support, and addressing the spiritual needs of young people. A recommendation was not met regarding care planning in relation to the provision of a foster family for one child.

The main finding from this inspection was that the overall standard and quality of care was very good. An experienced and committed team of staff provided a sense of homeliness to the centre. There was a warm and relaxed atmosphere that closely resembled good quality family life. Most of the standards were met. The standard that was partly met concerned planning and suitability of placement for one young person. This is a key recommendation that will need to be addressed. At the time of the inspection there were three young girls between the ages of 14 and 17 living in the centre.

A Health Service Executive Dublin Mid Leinster (HSE DML) admissions panel made decisions about admission, in consultation with the centre manager and the residential co-ordinator.

The staff and young people in this centre had experienced many changes in the preceding year, with two centres amalgamating into one. The process was well managed and facilitated by an experienced manager. The inspectors commend the management and staff for the positive and proactive manner with which they guided the change process, and for ensuring that it resulted in a high quality of care being 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: direct observation of interactions between staff and young people, a review of records, an inspection of accommodation, interviews with three young people, one parent, the centre manager, the deputy manager, four child care workers, three social workers, one team leader and the residential services co-ordinator.
The inspectors had access to the following documents during the inspection:

- The centre's register
- The centre's statement of purpose and function
- The centre's policies and procedures
- The young people's care plans and care records
- Census forms on staff
- Census forms on the young people
- Personnel files
- Administrative records
- Questionnaires completed by one young person and three social workers
- Details of physical restraints in the past year
- Details of unauthorised absences in the past year
- Letter from a specialist
- Fire records
- SSI Inspection Reports (Inspection Report ID number 312, 424, 418 respectively)

1.2 Acknowledgements

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

1.3 Management structure

The management structure included the Centre Manager who reported to the HSE DML Residential Care Coordinator who in turn reported to the Regional Coordinator of Children's Residential Services. The Regional Coordinator reported the Local Health Officer (LHO).

1.4 Data on young people

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

Listed in order of length of placement

Young Person	*Age*	*Legal Status*	*Length of Placement*	*No. of previous placements*
#1	14	Voluntary Care	Six years, six months	One Foster Care placement
#2	14	Full Care Order	Four months	Two Foster Care placements One High Support Unit placement One Residential Placement
#3	17	Interim Care Order	Six months	None

2. Summary of Findings

Practices that met the required standard

Purpose and function
This standard was met. The centre's purpose and function stated that it provided medium to long term care for five children and young people, boys and girls aged between 13 and 17 years of age on admission. Inspectors found that staff interviewed understood the purpose and function of the centre and the day-to-day operations of the centre reflected this.

Inspectors found that two of the young people currently in the centre were appropriately placed given their individual needs at the time of placement. While the inspectors were satisfied that the third young person was receiving a very good standard of care, given her young age, inspectors felt that this young person should be placed in foster care. In relation to the acquisition of a foster family for this young person, although efforts had been made, this recommendation had not been met at the time of this inspection.

Care of young people
This standard was met. The young people received a very good standard of child centred care. Their individual health needs were well met. The young people told inspectors that they liked the staff and were positive about the care they received. Inspectors observed warm and respectful interactions between the young people and the staff. All of the young people interviewed told inspectors that they would speak to staff members if they had any concerns or worries.

Inspectors observed that staff were highly attentive in their interactions with the young people and listened to and valued the young people, recognising and celebrating their achievements as well as acknowledging their needs.

There were written policies on all aspects of care and inspectors found these were largely reflected in practice. From a review of care files and conversations with the young people, inspectors found good quality key working sessions on areas such as sexual health and life story work. Interviews with staff demonstrated that they had in-depth knowledge of the young people and their needs.

The three young people enjoyed constructive leisure activities such as soccer and football, and other activities and clubs that promoted social inclusion. One young person talked of her ambition to pursue a career in the area of sports education and this was positively reinforced by staff. Staff encouraged the young people to maintain contact with their friends who often called to the centre.

Each young person told inspectors that they liked the food, were given choices on the weekly menu and were facilitated to make snacks where needed. One young person said: "We always make sure we have plenty of food". Another young person told inspectors that she was able to watch her choice of television programmes as there were two televisions in the centre to facilitate this.

Race, culture, religion, gender and disability
This standard was met. Two of the young people had specific developmental needs. Staff were cognisant of this and had adapted their communication and skills transfer to respond appropriately and facilitate life-long learning.
A written policy on spirituality had been developed since the last inspection. The document provides support and encourages the young person to explore aspects of their spirituality and religion. Inspectors commend the manager and staff on the development of this thoughtful and child centred policy.

Management
This standard was met. The centre was managed by a qualified and experienced Manager who had a very good knowledge and understanding of the young people. The manager was assisted by the Deputy Manager who also demonstrated in-depth knowledge of the young people.

Over the past seven months, two centres, (a residential care centre and a high support centre) had been amalgamated with the current children's residential centre. Some staff and young people from both these units had moved to the current residential care centre. This move resulted in many changes for both young people and staff including changes in rosters and work practices. Management styles were complementary and as a team they formed a guiding coalition in managing the change created by the amalgamation of the three centres.

There was evidence of good internal and external line management systems in place. Communication practices regarding transfer of key information to all relevant parties regarding each young person were very good.

Staff interviewed also told inspectors that the process of transition and change was well managed by the Centre Manager, and that challenges and differences were addressed in a timely and effective manner. In general, staff were positive about the Centre Manager's style of management and the professional and understanding manner with which she had managed the change process. Inspectors were told by a parent of one young person and external professionals that the Centre Manager was

well respected, provided leadership and direction, and was accessible to the young people and the staff. One young person said she would go to the Centre Manager if she had a problem or was worried about something.

There was a high level of contact with the Residential Care Coordinator, who line-managed the centre. She was well briefed on all aspects of centre practice, and also had a very good knowledge of the three young people.

Staffing
This standard was met. There were eighteen full time members of staff including the Centre Manager, Deputy Manager and one relief staff member. There were adequate levels of experienced qualified staff. The staff team had worked in residential care for between five and twenty years. The inspectors found the staff team were committed and focused on the task of supporting the young people. Staff interviewed by inspectors had acknowledged and reflected on the challenges and opportunities that arose due to the amalgamation of two different centres and the learning that has evolved to inform current best practice.

Staff Supervision and support
A system of formal supervision had been put in place by the current Centre Manager. The Centre Manager met with staff for individual supervision every six weeks. The records of supervision reviewed by the inspectors reflected high quality supervision. The Centre Manager in turn received formal supervision every two months from her line manager.
The Centre Manager facilitated staff meetings fortnightly and the minutes of these meetings were of a high quality and had a child centred focus.

Monitoring
This standard was met.
The Monitoring Officer for this centre currently manages a caseload of 32 centres.
The Monitoring Officer made herself available for consultation on a regular basis to the Centre Manager and staff and this was valued by the centre. She had visited the centre in the year prior to inspection and interviewed the Centre Manager and some of the staff team. The Monitoring Officer also reviewed centre files and had spoken with the young people as part of the monitoring visit.

Training and development
The inspectors reviewed an up-to-date training file with particular reference to training in *Children First, National Guidelines for the Protection and Welfare of Children and Therapeutic Crisis Intervention (TCI)* and *First Aid.* The Centre Manager and the Regional Residential Services Coordinator outlined the staff induction process for new staff that highlighted the importance of staff being kept up-to-date on key issues relating to the young people and their care.

Notification of significant events
There was an up-to-date significant events log maintained by the residential centre. The inspectors observed that significant events were appropriately responded to and notified to the relevant parties promptly.

Administrative Files
Inspectors reviewed files and documentation. The content and organisation of care files, log books and other records was of a high standard. All required records and

registers were appropriately documented and up-to-date. Overall there was a coherent filing system in the centre. They were organised in a way that facilitated ease of access for effective management and accountability.

Managing behaviour
Inspectors found there were good interpersonal and respectful relationships between the staff and the young people. The staff team managed behaviour through listening to the young people and promoting positive values such as a sense of fairness and respect for others. Sanctions were infrequent and proportional as evidenced by a review of the consequences log. There was a creative and thoughtful approach in the way the positive and negative consequences were managed.
There were no physical restraints in the year prior to the inspection.

The centre had an Unauthorised Absence Policy in place. There had been seven incidents of unauthorised absence in the year prior to inspection involving one young person. The centre used the HSE-Garda Síochána protocol for reporting young people missing and measuring levels of risk associated with these instances. Most of the absences were of short duration, averaging two hours. However one absence occurred for an overnight duration. The young person was staying in a friend's house and the staff made regular contact with her. All events were well managed and risk assessed by staff. All relevant stakeholders were informed in a timely manner and in line with HSE policy.

Register
There was a complete and up-to-date register specifying all the information required by the regulations. Three young people had lived in the centre in the past seven months.

Children's Rights
This standard was met. Communication between staff and young people was open and respectful. Inspectors observed that the young people were consulted regularly and were encouraged to make choices about all aspects of their lives. In the course of the inspection, each young person showed the inspectors their bedroom which had been decorated with posters, memorabilia and photographs that were significant to the young person.
Meetings with young persons were held regularly and they were supported in discussing issues that were important to them.

The Centre Manager had very good contact with the young people's schools and when a sensitive issue arose that could potentially have caused a lot of needless distress for one young person, the Centre Manager dealt with the matter in consultation with the school in a swift, sensitive and effective manner.

Each young person was given a wide choice of leisure activities and encouraged and supported to participate in activities that were of interest to them. Inspectors found that key workers advocated proactively promoting the wishes and best interests of the young people. This is very good practice.

Complaints
The centre had an effective complaints procedure in place. Each of the three young people stated that they were aware of how to make a complaint. Individually, young

people told inspectors they could talk to either the manager or a member of staff if they had any worries or concerns.
The inspectors found evidence that complaints and issues raised by the young people were addressed promptly and respectfully and the right of the young person to make a complaint was actively promoted. All the centre staff interviewed by inspectors were aware of the complaints procedure and of the right of the young people to make a complaint.

Access to information
Each young person was informed of their right to access relevant information and guided to exercise this right. All young people confirmed that they were aware they could access their case files. One young person had read her log book in the year prior to inspection.

Preparation for leaving care
All staff interviewed demonstrated a heightened awareness of the importance of preparing the young person for leaving care. Preparation for leaving care was being planned in the case of one young person.

Safeguarding and child protection
This standard was met. The inspectors were satisfied that staff in the centre interviewed displayed an awareness of safeguarding and child protection. They also had a heightened awareness of the need for the application of appropriate boundaries, and this was evidenced in the consequences log which encouraged the young people to keep themselves safe. All staff had received training in *Children First: National Guidance for the Protection and Welfare of Children.* The inspectors observed the effective and timely management of a child protection incident during the inspection. All three young people told the inspectors that they felt safe in the centre.

Education
The standard on education was well met. One young person told inspectors she had completed her Junior Certificate Exams and had achieved very good results. All three young people were encouraged and supported by staff to participate in educational activities appropriate to their individual ability, interests and aspirations. This was evident from the information provided by the young people themselves. Two young people told inspectors that they were interested in pursuing a career in sport and law enforcement respectively.

The staff team were committed to supporting each young person to remain in the school they attended prior to living in the centre. They also ensured that the young people could attend recreational and sports activities that were important to them. This was evidenced by the time spent driving to school locations quite far from the centre. All staff interviewed were well informed about the achievements of each young person both in school and after school.

Health
The standard on health was met. The young people looked healthy and well. Each young person was registered with a general practitioner and linked in with specialist services relevant to her individual needs. Detailed records of assessments and follow up care were maintained. The inspectors found that the staff team were proactive

and responsive regarding the identification, monitoring, and management of the holistic healthcare needs of each young person.
One young girl has an identified healthcare need that requires ongoing monitoring and effective management with an identified risk of potentially requiring emergency medical intervention. Inspectors found that the knowledge and care provided by all staff interviewed regarding this young person was commendable.

Inspectors found that there were excellent documentation and communication processes, in particular follow-up communication between the centre and other services to ensure ongoing safe and effective medical care for this young person. There was also evidence of clear and easily understood instructions regarding what to do in an emergency situation.

Premises and environment
The standard on premises and safety was met. The centre was located in a small cul-de-sac. Inside, the centre was nicely decorated and created a pleasant and homely atmosphere. The design and layout of the residential centre supported opportunities for young people to have both private time and to engage with others. Young people told inspectors of different occasions when family and friends visited them in the centre. Inspectors were provided with a copy of the centre's Safety report. The centre had valid up-to-date insurance. The relatively recent upgrade work carried out on the kitchen and bathrooms was of a high standard.

In the course of the inspection, the inspectors observed the kitchen to be a hub of activity. The kitchen was warm, clean and cheerfully decorated and there were often delicious smells of cooking and baking emanating from there. The young people were happy to provide a tour of the house and appeared knowledgeable about every aspect of the house. There were photographs, birthday cards and certificates of achievements prominently displayed in the sitting room. Personal touches such as a bowl of fruit, nice toiletries, and clean towels were also evident throughout and contributed to a homely atmosphere.

Maintenance and repairs
As stated, there had been significant improvements in relation to the kitchen and bathroom areas following recommendations of previous inspections. The Centre Manager reported that maintenance requirements are addressed promptly. Overall the centre was well maintained.

Safety
The HSE and the previous centre manager had undertaken a Risk Assessment of the children's residential care centre in February 2011. This was due to be undertaken again in March 2012. The centre had three staff trained in risk assessment, two safety representatives and one fire safety officer.
All but three staff were trained in first aid. Safety practices were apparent specifically regarding the safe storage of medicines, keys and household items which were secured in locked cabinets.

Fire safety
The HSE DML had written confirmation from a certified engineer that all requirements in relation to fire safety and building control have been complied with as required by standard 10.19. The fire register is well maintained by one of the centre's health and safety officers. Fire drills occur twice yearly or when a young

person commences living in the centre, and are recorded in the fire safety book. The fire alarm and fire extinguishers were checked and were up-to-date.

Practices that met the required standard in some respect only

Vetting
Inspectors reviewed a sample of personnel files. Inspectors found that each file contained the required three references. However in relation to Garda vetting, inspectors found a generic letter from the HSE Human Resource section stating that they had received the required Garda clearance. This is insufficient. The inspectors recommend that the Centre Manager should satisfy herself directly that all staff are Garda vetted.

Social work and care planning
The standard had been met in part. Each social worker demonstrated a very good understanding of the individual young people and their needs. They had very good relationships with the young people. All three young people were visited by their individual social worker on a regular basis. The social workers told inspectors that there was very good communication between themselves and the centre staff. They confirmed that they were kept well informed of all complaints and significant events. The social workers told inspectors that they read centre records relating to the young people on a regular basis. The inspectors observed a very good level of inter-professional work and inter-agency cooperation between the centre staff and the three social workers. Inspectors were told that the social work service had significantly improved for one young person since the last inspection. The proactive nature of response by an individual social worker was commented on positively by one young person's parent. The parent told the inspectors that she found the social worker very responsive and helpful.

Inspectors found the three young people had care plans which were regularly reviewed within the statutory timescales. Care plans were of a high standard, they were professionally written, comprehensive and easily cross referable.

Inspectors had recommended that the acquisition of a foster placement for one young person be given the highest priority in each of the last four inspection reports. At this inspection, inspectors were seriously concerned that a foster care placement had not been secured. A process is underway to obtain respite foster care for this young person. However, although the respite foster care assessment had commenced it was not completed one year later.
Inspectors recommend because of the young age of this child, that a care plan review is undertaken every two months and obtaining a foster care placement for this child is given the highest priority.
Inspectors recommend that pending long term foster care placement, assessment of the current respite foster carer applicant is completed as a matter of urgency.

A second young person who was progressing well especially regarding her educational objectives at the centre was approaching 18 and there were concerns about her regarding planning for leaving care. The Centre Manager, staff team and social worker did not consider her sufficiently prepared to leave the centre.

Inspectors judged that given the current needs of this particular young person, it was an unrealistic expectation that she would be ready for independent living by the age of 18 years.

Inspectors advise that the *Child Care Act 1991* states that the HSE may provide aftercare. The use of the word may give the HSE positive permission to provide an aftercare service. Any discretionary power applies only to the young person in relation to availing of an aftercare service and not the HSE in providing it.

The then Minister for Children and Youth Affairs issued correspondence to the HSE in June 2010 regarding the provision of after care to young people following legal clarification on the *Child Care Act 1991*. The correspondence stated the following: *"in order to remove any doubts in this regard and in accordance Section 45(4) of the 1991 Act the HSE are directed to formulate and implement appropriate administrative procedures and guidance for implementing said duty".*

The directive goes on to state that the HSE should have regard to the recommendations of the Ryan Report implementation plan which states that the provision of aftercare by the HSE should form an integral part of care delivery for children who have once been in the care of the state. It should not be seen as a discretionary service or a once off event that occurs on a young person's 18th birthday.

Inspectors recommend that all options, including remaining in the centre, are explored in the next care plan review.

Contact with families
This standard was met in part. Where appropriate, contact with families was encouraged and facilitated. The inspectors met with one parent who confirmed that she was kept well informed on all issues related to her child's care and development, and was proactively provided with assistance to facilitate regular contact. The parent informed the inspectors that she was always made feel very welcome at the centre. The inspectors found that staff were sensitive and proactive in relation to the young person's contact with their family. However, staff interviewed informed inspectors that the level of contact that one young person had with her siblings was insufficient.

Inspectors recommend that the HSE DML ensure that an annual plan for access for this young person and her siblings is developed as a matter of urgency.

Emotional and specialist support
Staff and social workers demonstrated an awareness of the psychological and emotional needs of the young people. Arrangements were in place to ensure access to assessments, consultancy, or counselling as required by the young person.

Written feedback from one external professional highlighted the high level of support and cooperation that she and the young person she was working with had received from staff in the centre.

One young person had been attending a Speech & Language Therapy service. Staff reported to the inspectors that this service had been discontinued, but there was lack of clarity as to whether further therapy was required or not. There was no Speech & language Therapy report on file for this young person.

Inspectors recommend that the Speech and Language report should be obtained to ensure enhanced communication development for one young person and to support future care planning for her.

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.

	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. 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	√		

Recommendation:

1. The Centre Manager should satisfy herself that the HSE Garda Vetting process has been followed for each member of staff.

3. Monitoring

Standard
The HSE, 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.

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

	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	√		

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

Recommendations:

2. The HSE should ensure that a care plan recommendation for placement in foster care for one child is given the highest priority as recommended in four previous reports.

3. The HSE should ensure that assessment of the current respite foster care applicant is completed as a matter of urgency.

4. The HSE DML should ensure that an annual plan for access with one young person and her siblings is developed as a matter of urgency.

5. The HSE DML, in consultation with one young person should ensure that all placement options, including remaining in the centre are explored with her in the next care plan review.

6. The HSE DML should request the Speech and Language report for one young person, to ensure enhanced communication development and to support future care planning.

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	√		

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	√		

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	√		

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	√		

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	√		

Summary of Recommendations:

1. The Centre Manager should satisfy herself that the HSE Garda Vetting process has been followed for each member of staff.

2. The HSE DML should ensure that a care plan recommendation for placement in foster care for one child is given the highest priority as recommended in four previous reports.

3. The HSE DML should ensure that assessment of the current respite foster care applicant is completed as a matter of urgency.

4. The HSE DML should ensure that an annual plan for access with one young person and her siblings is developed as a matter of urgency.

5. The HSE DML, in consultation with one young person should ensure that all placement options, including remaining in the centre are explored with her in the next care plan review.

6. The HSE DML should request the Speech and Language report for one young person, to ensure enhanced communication development and to support future care planning.

Action Plan for Inspection No. 532

Centre ID: 57
HSE Area: HSE DML

No.	Recommendation	Action to be taken	Person Responsible	Implementation Date
1	The Centre Manager should satisfy herself that the HSE Garda Vetting process has been followed for each member of staff.	Regional Coordinator has been in contact with the Garda Vetting Office and has received a response outlining the fact that they are seeking clarification from the Data Protection Commissioner and will forward response when received.(Email on same forwarded on 27.07.12.).	Regional Coordinator Service Manager	27.07.12. Awaiting further response.
2	The HSE DML should ensure that a care plan recommendation for placement in foster care for one child is given the highest priority as recommended in four previous reports.	This work has been ongoing and prioritised for a number of years; the fostering team have specifically identified and assessed a number of fostering applicants with this child in mind. Contact has also been made on a number of occasions with the private fostering agencies for the purpose of identifying a placement. In 2011/2012 2 potential carers have been assessed for this child. One carer (as mentioned above) is being recommended as a carer for the child (for respite and holidays etc) It has not been possible to secure a long term foster placement for this child; consideration is now focused on child remaining in residential centre long term. Parent's wishes are also for child to remain in centre.	SWTL for child. Fostering SWTL.	31.12.12.

Action Plan for Inspection No. 532

Centre ID: 57
HSE Area: HSE DML

No.	Recommendation	Action to be taken	Person Responsible	Implementation Date
3	The HSE DML should ensure that an assessment of the current respite foster care applicant is completed as a matter of urgency.	This assessment is completed with just one reference outstanding; on receipt of this, assessment can be submitted to fostering committee.	Fostering Team Leader	Assessment completed, fostering team pursuing 1 reference that is outstanding-this is coming from an external source. Fostering assessment along with child's documentation (which is in order) will be submitted for approval for fostering committee on receipt of reference.

Action Plan for Inspection No. 532

Centre ID: 57
HSE Area: HSE DML

No.	Recommendation	Action to be taken	Person Responsible	Implementation Date
4	The HSE DML should ensure that an annual plan for access with one young person and their siblings is developed as a matter of urgency.	Access plan now in place with 6 monthly reviews.	SW	06.07.12.
5	The HSE DML, in consultation with one young person should ensure that all placement options, including remaining in the centre are explored with them in the next care plan review.	The option of the child remaining long term is being considered by the SW team and parallel planning is taking place regarding this i.e pursuing a foster placement and also exploring centre as long term option.Issues such as the child's need to attend very frequent medical appointments, current frequent access with the child's parents,the need to remain in same school are all factors being considered in making this decision.	SWTL and SW	31.12.12.
6	The HSE DML should request the Speech and Language report for one young person, to ensure enhanced communication development and to support future care planning.	SLT report was received on 14th June 2012.The child is making good progress in SLT.	SLT Department and SW Department.	Report received.