



Health Information and Quality Authority

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

INSPECTION OF A CHILDREN'S RESIDENTIAL CENTRE IN THE HEALTH SERVICE EXECUTIVE SOUTH

Inspection Report ID Number: 660

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Centre ID Number: 47

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1. Introduction

The Health Information and Quality Authority carried out an unannounced inspection of a children's residential centre in the Health Service Executive (HSE) South on 22 October 2013. Tom Flanagan (lead inspector) conducted the inspection under Section 69 (2) of the Child Care Act, 1991 as amended by the Child Care (Amendment) Act 2011. The centre was inspected by the Authority on 26 March 2012 and 27 March 2012 (Report ID 529) and a follow up inspection was carried out on 18 October 2012 (Report ID 595). These reports are available on the Authority website www.hiqa.ie.

The centre is located in a large, detached, two-storey house on its own grounds in a rural setting. The centre provides full-time residential care for up to four young people aged between 12 and 18 years from the integrated service area.

This themed inspection on 22 October 2013 examined a selection of the standards in the National Standards for Residential Centres. The standards examined were:

- Management and Staffing
- Planning for children and young people
- Safeguarding and child protection
- Premises and Safety.

1.1 Methodology

The inspector's judgements are based on evidence verified from several sources, gathered through interviews with the acting centre manager, a social care leader and a social care worker and an inspection of the premises. The inspector met with and talked to one of the young people. A telephone interview was conducted with the HSE monitoring officer and two social workers. The findings of the inspection were discussed with the area manager by telephone. Following the inspection a completed questionnaire was received from each of the young people.

The inspector also had access to the following documents:

- The centre's statement of purpose and function
- The centre's policies and procedures
- The centre's register
- The young people's care plans and care files
- Administrative records
- Staff files
- Supervision records
- Training records
- Fire safety documents
- The HSE monitoring officer's report
- Monthly reports to the monitoring officer.

1.2 Acknowledgements

The inspector wishes to acknowledge the cooperation of all those involved in this inspection.

1.3 Management structure

The acting centre manager reported on staffing issues to the regional residential project manager, who, in turn, reported to the area manager. The area manager dealt with major financial expenditure and retained overall responsibility for the management and governance of the centre.

1.4 Data on young people

Listed in order of length of placement

<i>Young Person</i>	<i>Age</i>	<i>Legal Status</i>	<i>Length of Placement</i>	<i>No. of previous placements</i>
1	16	Voluntary	26 months	None
2	17	Voluntary	15 months	1 emergency Foster Care
3	15	Voluntary	3 months	1 Foster Care
4	15	Voluntary	2 months	1 Relative Care 1 Foster Care

2. Summary of Findings

A new management and governance structure had been introduced and an acting centre manager had been appointed since the previous inspection. A structure was in place for line management and supervision meetings. A monitoring officer had been appointed in late 2012 and had visited the centre on a number of occasions in the interim to carry out monitoring visits.

There were four young people living in the centre at the time of inspection and all were attending school on the day. Feedback from the young people about their experience of living in the centre was very positive and they felt safe there. Their placements were suitable for their needs. The centre was homely in appearance and provided a good standard of accommodation and facilities. The staff group were experienced and there was evidence of good direct work with the young people. Each young person had a social worker who was actively involved in implementing their care plan.

Improvement was required in a number of areas. The position of centre manager needed to be made permanent. Greater opportunities needed to be provided for the entire staff group to meet and plan. Early access to psychology services needs to be provided for the young people. Aftercare planning needed to be improved. These and other improvements are listed in the Action Plan at the end of this report.

Practices that met the required standard

The following practices met the required standard: register; notification of significant events; staffing; training and development; administrative files; suitable placements and admissions; contact with families; supervision and visiting of young people and social work role; discharges; safeguarding and child protection; accommodation; and safety.

Register

The centre register was well maintained and contained all the information required by the regulations.

Notification of significant events

A system was in place for the prompt notification of significant events. The inspector viewed the record of significant events and found they were appropriately recorded and dealt with. The monitoring officer told the inspector that notifications of significant events were sent promptly by staff and social workers told the inspector that centre staff contacted them quickly following a significant event.

Staffing

The staff complement of the centre included the acting centre manager, two social care leaders, 10.5 (whole time equivalent) social care workers and a part-time administrator. The majority of staff were experienced and had been working at the centre for several years. Two staff had recently transferred from another residential centre. The centre had adequate levels of staff on duty on the day of inspection. However, the acting centre manager told the inspector that, in recent weeks, agency staff were used to cover for staff on sick leave or long-term leave.

Training and development

The inspector spoke to the social care leader responsible for training and reviewed the training file. There was evidence that training was planned well in advance and a calendar of training was in place. There had been difficulties ensuring that ongoing refresher training in crisis management techniques could be provided for all staff but the acting centre manager told the inspector that this issue had been recently resolved at a regional level and trainers were being made available for this purpose. Training was planned for the coming months in supervision, fire safety, crisis management techniques, manual handling and "Transgender Healthcare".

Administrative files

The centre had an administrator, who worked in the centre 19 hours per week. The inspector reviewed a range of administrative files and records and found that they were well maintained.

Suitable placements and admissions

The acting centre manager told the inspector that the centre was meeting the needs of the young people and social workers confirmed this. There was age appropriate information for the young people which described the centre, what facilities and services would be provided and what was expected of the young person while there. Each of the young people was attending school and all were at school on the day of inspection. They were actively involved in a range of leisure activities outside the centre. The records showed that their health needs were also being addressed. There was considerable evidence in the files that key workers had undertaken direct work with the young people in relation to their assessed needs. In their questionnaires, each young people confirmed that they met with their key workers and talked a lot about a range of issues. Admissions during the previous year were in line with the purpose and function.

Contact with families

Contact between the young people and their families was encouraged and facilitated, where appropriate. Detailed records of the young people's access visits to siblings

and parents and of other contact between them was recorded in the care files. Overnight visits to their families were arranged for the young people when this formed part of their plan of care and the issue of possible reunification of the young people with their families was considered in each case. Records showed that family members attended care planning and review meetings, where appropriate, and the social workers told inspectors that minutes of all these meetings were sent to parents. A young person told the inspector that she/he had contact with siblings several times per week and visits to the family home two days per week. Other young people confirmed in their questionnaires that they had good contact with friends and family.

Supervision and visiting of young people and social work role

Each young person had an allocated social worker. As this was an unannounced inspection, the inspector did not have the opportunity to meet the social workers in person but spoke to two of the social workers by telephone. They told the inspector that they had a good relationship with centre staff, who facilitated their contact with the young people and kept them informed of the young people's progress or any issues that arose. Records of social work visits to the young people were recorded in the files and these showed that the young people were visited approximately every month. The records showed that the social workers were closely involved in the care of the young people and were active in implementing their care plans.

Discharges

Two young people had been admitted and two had been discharged in the previous 12 months. The discharges were planned in line with the young people's care plans.

Safeguarding and child protection

In their questionnaires, the young people said that they felt safe in the centre. The inspector viewed a sample of five staff files, including those of the newly transferred staff and the agency workers. They contained all the relevant documentation required by the regulations. Staff were appropriately qualified and vetted. All staff had received a briefing on Children First (2011) and two staff were due to attend training on 21 November 2013. The agency workers had attended full training on Children First (2011) within the previous year. There was evidence that the centre staff reported child protection concerns to the social work department and that these were acknowledged and investigated by social workers and centre staff made aware of the outcomes.

Accommodation

The centre was of adequate size, it was homely and it was clean. Each of the young people had their own room and they could personalise their rooms by decorating them and attaching photographs and posters on the walls. The centre was beautifully decorated for Halloween and the young people had taken an active part in this. They had also chosen some of the pictures that hung on the walls. There was adequate space and facilities for the number of young people.

Safety

A safety statement, dated 6 January 2013, was in place. A general risk assessment had been carried out in conjunction with this and this outlined the risks identified in the centre and the measures in place to control them. Medicines were stored securely and appropriate records of medication administration were maintained.

Practices that met the required standard in some respect only

The following practices met the required standard in some respects only: management; supervision and support; statutory care plans and statutory care plan reviews; preparation for leaving care and aftercare; children's case and care records; emotional and specialist support; maintenance and repairs; and fire safety.

Management

A new governance structure had been put in place since the previous inspection. The area manager continued to have overall responsibility for the management of the centre and approved all major spending projects. Line management duties in respect of staff rosters, staff issues and the supervision of the centre manager were devolved to a regional residential project manager, who also had an advisory role in relation to the purpose and function of the centre. The inspector viewed minutes of a meeting between the acting centre manager and her line manager.

The inspector interviewed the acting centre manager, who was qualified and experienced. She had worked in the centre as a social care leader for several years and had acted as centre manager in a job-sharing capacity for over two and a half years prior to this. She was clear in her understanding of the plans for each of the young people and was familiar with all aspects of the operation of the centre. The records showed that she met individually with the young people on a regular basis and that she read their files. As the centre has not had a permanent manager for approximately three and a half years, the HSE South should regularise the post of centre manager in order to establish stability for the staff and young people and to maintain a consistent approach to the operation of the centre.

Supervision and support

The inspector viewed a sample of six supervision records. Supervision was provided for the acting centre manager by an external supervisor and took place monthly. Staff were supervised every two months on average and this was clearly recorded. If supervision did not occur, the reasons for this were noted. A new HSE supervision policy was in place but the new policy and associated procedures and documentation had not yet been implemented. The HSE should ensure that its policy on supervision is implemented in full.

The inspector viewed minutes of staff meetings which were held at least monthly during the previous three months and were attended by an average of four staff. A wide range of issues, including the care of the young people, were discussed. The minutes of the most recent meeting recorded a staff request for a full staff meeting. The acting centre manager told the inspector that these were held approximately four times per year. The need for a regular full staff meeting was also raised in the monitoring officer's report. The HSE should review its staffing arrangements to ensure that there are regular opportunities for the entire staff team to meet in relation to ensuring good communication and cooperation between staff and consistency in implementing care plans and maintaining safety.

Statutory care plans and statutory care plan reviews

The inspector viewed the care plans and the statutory care plan review minutes in relation to each of the young people. The young people confirmed in their questionnaires that they had talked to staff about their care plans and attended the care planning review meetings. The statutory care plan reviews were held in accordance with regulations. The care plans for three of the young people were

developed or updated in recent months. However, the care plan on one young person's file had not been updated since 2011 and much had changed in the young person's life in the interim. The HSE South should ensure that the care plans of all young people are updated when required.

Emotional and specialist support

The centre previously had access to a dedicated psychology service, which provided advice and support to the staff team and a timely response in the event that a young person required psychological intervention but this service was no longer available. The care files showed that one young person required a specialised psychology assessment and funding for this was approved by the area manager. However, another young person was referred to psychology services almost a year prior to this inspection and had not yet received a service. The young person was about to leave residential care and may have benefitted from a psychology service had it been provided in a timely manner. The HSE South should ensure that all young people in care have early access to psychology and other specialist services when they require them.

Preparation for leaving care and aftercare

At the beginning of their placement, the young people were asked for their cooperation in such matters as household chores, shopping, helping with the menu, cooking, tidying their room and personal hygiene. The care files contained evidence that extensive work was being carried out with the young people, especially those about to leave the centre, to prepare them for leaving care. There was evidence that an aftercare worker was working with one young person in relation to plans for leaving care. While the care records showed that plans were at an advanced stage for securing accommodation and services following discharge, there was no aftercare plan on file. There was no evidence that another young person, who was over 16 years of age, had been referred to the aftercare service. The HSE South should ensure that all young people who have reached the age of 16 years and meet the criteria for an aftercare service, should be referred to the aftercare service and have an aftercare plan developed in line with the HSE national policy on aftercare.

Children's case and care records

Each young person had secure files which contained all the required documentation. The records were comprehensive and they were well structured and maintained. There was evidence that the key workers offered the young people the opportunity to access the information in their files if they wished to do this. Records were maintained in relation to when the young people read this information. The files contained most of the documents and information that was required. However, the consent for voluntary admission to care forms for three young people had not been updated in relation to the proposed duration of their placements. The HSE South should ensure that the parental consent to voluntary care forms are updated in relation to the proposed duration of the young people's current placements.

Maintenance and repairs

Maintenance requests were recorded in a central log and the dates on which the requests were made and the work was completed were also recorded. The acting centre manager told the inspector that the maintenance department responded very quickly to any urgent requests. Maintenance issues that required attention included peeling paint on radiators in the bathroom and games room, cracks on the wall and flaking paint on the ceiling of the young people's bathroom. The telephone landline

to the centre was not in working order and this posed difficulty for staff who had to rely on mobile phones and, potentially, could cause difficulty for families or other professionals who wished to contact staff or young people. The area manager told the inspector that, as yet, no ongoing programme of maintenance and capital works had been developed for the centre. The HSE South should ensure that:

- a. The current maintenance issues are addressed and
- b. an ongoing programme of maintenance and capital works is developed for the centre to ensure the structural and decorative order of the unit is maintained.

Fire Safety

Fire prevention procedures and fire fighting equipment were in place. Fire doors were checked and repaired in April 2013. The fire alarm received its quarterly service on 24 June 2013 and the fire extinguishers were serviced on 22 May 2013. Fire drills were recorded as having taken place monthly and both staff and young people took part. A system for daily checks on the means of escape was in place but the recording of these was intermittent and there was no record of checks after 9 October 2013. The social care leader with responsibility for training told the inspector that training in fire safety was in the process of being scheduled for later this year. There was written evidence of approval for this training and contact with the HSE fire safety officer regarding its provision. Written confirmation that the centre was in compliance with statutory fire and building regulations was not in place.

The HSE South should ensure that:

- a. Daily checks on the means of escape are carried out and recorded appropriately
- b. A letter regarding compliance with the statutory requirements relating to fire safety and building controls as required by article 12, of the Child Care (Placement of Children in Residential Care) Regulations, 1995 is obtained and forwarded to the Authority.

Practices that did not meet the required standard

There were no practices in this category.

3. Findings

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	✓		
Supervision and support		✓	
Training and development	✓		
Administrative files	✓		

Recommendation:

1. The HSE South should regularise the post of centre manager in order to establish stability for the staff and young people and to maintain a consistent approach to the operation of the centre.
2. The HSE should ensure that its policy on supervision is implemented in full.
3. The HSE should review its staffing arrangements to ensure that there are regular opportunities for the entire staff team to meet in relation to ensuring good communication and cooperation between staff and consistency in implementing care plans and maintaining safety.

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 and social work role	✓		
Emotional and specialist support		✓	
Preparation for leaving care and aftercare		✓	
Discharges	✓		
Children's case and care files		✓	

Recommendations:

4. The HSE South should ensure that the care plans of all young people are updated when required.
5. The HSE South should ensure that all young people in care have early access to psychology and other specialist services when they require them.
6. The HSE South should ensure that all young people who have reached the age of 16 years and meet the criteria for an aftercare service, should be referred to the aftercare service and have an aftercare plan developed in line with the HSE national policy on aftercare.
7. The HSE South should ensure that the parental consent to voluntary care forms are updated in relation to the proposed duration of the young people's current placements.

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	✓		

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:

8. The HSE South should ensure that:
 - a. The current maintenance issues are addressed and
 - b. an ongoing programme of maintenance and capital works is developed for the centre to ensure the structural and decorative order of the unit is maintained.
9. The HSE South should ensure that:
 - a. Daily checks on the means of escape are carried out and recorded appropriately
 - b. A letter regarding compliance with the statutory requirements relating to fire safety and building controls as required by article 12, of the Child Care (Placement of Children in Residential Care) Regulations, 1995 is obtained and forwarded to the Authority.

Summary of recommendations:

1. The HSE South should regularise the post of centre manager in order to establish stability for the staff and young people and to maintain a consistent approach to the operation of the centre.
2. The HSE should ensure that its policy on supervision is implemented in full.
3. The HSE should review its staffing arrangements to ensure that there are regular opportunities for the entire staff team to meet in relation to ensuring good communication and cooperation between staff and consistency in implementing care plans and maintaining safety.
4. The HSE South should ensure that the care plans of all young people are updated when required.
5. The HSE South should ensure that all young people in care have early access to psychology and other specialist services when they require them.
6. The HSE South should ensure that all young people who have reached the age of 16 years and meet the criteria for an aftercare service, should be referred to the aftercare service and have an aftercare plan developed in line with the HSE national policy on aftercare.
7. The HSE South should ensure that the parental consent to voluntary care forms are updated in relation to the proposed duration of the young people's current placements.
8. The HSE South should ensure that:
 - a. The current maintenance issues are addressed and
 - b. an ongoing programme of maintenance and capital works is developed for the centre to ensure the structural and decorative order of the unit is maintained.
9. The HSE South should ensure that:
 - a. Daily checks on the means of escape are carried out and recorded appropriately
 - b. a letter regarding compliance with the statutory requirements relating to fire safety and building controls as required by article 12, of the Child Care (Placement of Children in Residential Care) Regulations, 1995 is obtained and forwarded to the Authority.



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ACTION PLAN

Regulation Directorate Action Plan for Inspection No. 660

Centre ID: 47
HSE Area: HSE South

No.	Recommendation	Action to be taken	Person Responsible	Implementation Date
1	The HSE South should regularise the post of centre manager in order to establish stability for the staff and young people and to maintain a consistent approach to the operation of the centre.	A process has been agreed and has commenced to regularise the manager's post.	Service Director	31 January 2014 (Provisional)
2	The HSE should ensure that its policy on supervision is implemented in full.	The process to achieve implementation in full is being carried out.	Social Care Manager	11 December 2013
3	The HSE should review its staffing arrangements to ensure that there are regular opportunities for the entire staff team to meet in relation to ensuring good communication and cooperation between staff and consistency in implementing care plans and maintaining safety.	This has been reviewed recently. Due to staffing levels and needs, it is not feasible to permit the entire staff team to meet on a regular basis. There are measures in place to maximise attendance and feedback e.g. the minutes of meetings are mandatory reading to those who cannot attend. This is monitored by the Social Care Manager. There is the facility for people to raise matters through the agenda in their absence or in Supervision. Recommendation to be kept under review.	Social Care Manager	To be reviewed March 2014

Regulation Directorate Action Plan for Inspection No. 660

Centre ID: 47
HSE Area: HSE South

No.	Recommendation	Action to be taken	Person Responsible	Implementation Date
4	The HSE South should ensure that the care plans of all young people are updated when required.	The social work department will be informed of same.	Principal Social Workers	6 January 2014
5	The HSE South should ensure that all young people in care have early access to psychology and other specialist services when they require them.	The area manager is preparing a business case for a dedicated full time WTE psychologist post	Area Manager	March 2014
6	The HSE South should ensure that all young people who have reached the age of 16 years and meet the criteria for an aftercare service, should be referred to the aftercare service and have an aftercare plan developed in line with the HSE national policy on aftercare.	The social work department and the aftercare coordinator will be informed of same.	Principal Social Workers and After Care Coordinator	6 January 2014

Regulation Directorate Action Plan for Inspection No. 660

Centre ID: 47
HSE Area: HSE South

No.	Recommendation	Action to be taken	Person Responsible	Implementation Date
7	The HSE South should ensure that the parental consent to voluntary care forms are updated in relation to the proposed duration of the young people's current placements.	The Principal Social Workers will inform the social work department of the need to comply with the recommendation.	Principal Social Workers	31 January 2014
8	The HSE South should ensure that: <ul style="list-style-type: none"> a. The current maintenance issues are addressed and b. an ongoing programme of maintenance and capital works is developed for the centre to ensure the structural and decorative order of the unit is maintained. 	Area Manager to liaise with the Senior Manager for Estates/Technical Services (HSE) to ensure a prompt system to effectively deal with maintenance, capital works and decorative order for Residential Childcare Services is in place.	Area Manager and Estates Manager (HSE)	March 2014
9	The HSE South should ensure that: <ul style="list-style-type: none"> a. Daily checks on the means of escape are carried out and recorded appropriately b. a letter regarding compliance with the statutory requirements relating to fire safety and building controls as required by article 12, of the Child Care (Placement of Children in Residential Care) Regulations, 1995 is obtained and forwarded to the Authority. 	<ul style="list-style-type: none"> a. The team have commenced daily checks. b. This matter was being addressed prior to inspection. 	<p>Social Care Manager</p> <p>A\Regional Fire Safety Officer and Social Care Manager</p>	<p>Completed 23 October 2013</p> <p>5 December 2013 (Completed and submitted to the Authority prior to publication)</p>