



Report of an inspection of a Designated Centre for Disabilities (Children).

Issued by the Chief Inspector

Name of designated centre:	Beach Lodge
Name of provider:	Terra Glen Residential Care Services Limited
Address of centre:	Wexford
Type of inspection:	Announced
Date of inspection:	11 October 2023
Centre ID:	OSV-0007933
Fieldwork ID:	MON-0032257

About the designated centre

The following information has been submitted by the registered provider and describes the service they provide.

This centre provides full time residential care for a maximum of four young people between the ages of six and 18 years of age. This centre is a large detached house set in private grounds on the outskirts of Enniscorthy. All of the young people who live here have their own bedroom and access to communal areas such as kitchen-diner, conservatory and two living rooms. Staff within Beach Lodge support the young people who present with intellectual disabilities, autism, epilepsy, mental health and other complex needs. The staff team promote and encourage social inclusion and integration within the community. Young people are supported by a staff team comprising of social care workers and health care assistants.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	4
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This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 (as amended). To prepare for this inspection the inspector of social services (**hereafter referred to as inspectors**) reviewed all information about this centre. This included any previous inspection findings, registration information, information submitted by the provider or person in charge and other unsolicited information since the last inspection.

As part of our inspection, where possible, we:

- speak with residents and the people who visit them to find out their experience of the service,
- talk with staff and management to find out how they plan, deliver and monitor the care and support services that are provided to people who live in the centre,
- observe practice and daily life to see if it reflects what people tell us,
- review documents to see if appropriate records are kept and that they reflect practice and what people tell us.

In order to summarise our inspection findings and to describe how well a service is doing, we group and report on the regulations under two dimensions of:

1. Capacity and capability of the service:

This section describes the leadership and management of the centre and how effective it is in ensuring that a good quality and safe service is being provided. It outlines how people who work in the centre are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service.

2. Quality and safety of the service:

This section describes the care and support people receive and if it was of a good quality and ensured people were safe. It includes information about the care and supports available for people and the environment in which they live.

A full list of all regulations and the dimension they are reported under can be seen in Appendix 1.

This inspection was carried out during the following times:

Date	Times of Inspection	Inspector	Role
Wednesday 11 October 2023	10:15hrs to 17:45hrs	Tanya Brady	Lead

What residents told us and what inspectors observed

This was an announced inspection completed to monitor compliance against Regulations and standards, in addition to informing a decision regarding the renewal of registration for this designated centre.

This centre provides a home for a maximum of four children at any one time. The centre is at full capacity and three children were in school at the start of inspection with one young person present in the centre over the course of the day. The inspector had the opportunity to meet and spend time with all four children over the course of inspection. Over the day the inspector also had the opportunity to review documentation, speak to the staff and local management team and to review the premises.

The inspector met with one young person in the morning who came to the staff in the office to request staff help in charging their electronic tablet. Later in the morning the young person asked the inspector to see their room. They explained that they had changed room since the inspector was last in the centre and had been decorating. They had put posters on their bed that they particularly liked and explained they were deciding which to hang up. Later in the day this young person was observed engaging with a peer and giving them a gift of a poster that they had thought their peer would like. The two young people were observed to be happy during this interaction and to chat about where the picture came from and one young person stated they were very happy that their peer had been thinking of them.

Over the course of the day one young person in the centre was supported by staff to go out to bowling, an activity they had requested. When they completed this the staff supporting them phoned ahead of their return to let other staff know it was time to get lunch ready. This ensured that the young person did not have to wait for too long on return before their food was ready. Staff explained the importance of routine and how they worked to ensure tasks were completed in the house while the young people were out in school or at activities. This ensured they were in a position to focus their time on playing and supporting the children and young people when they were in the house.

The inspector met with two children on their return from school in the early afternoon. The staff team had snacks available and the children's specific communication and choice making systems were observed available and on the kitchen table. Both of the children sat together to have a snack and to relax on their return. The staff members explained that they were going to go shopping as one of the children had indicated they would like a particular item to eat later. As it was a wet day the children did not get an opportunity to play in the garden and so were going to the supermarket with the staff instead. Later they were observed in the kitchen happy with the items they had bought and freely moving throughout the

house laughing and playing with staff.

The final young person met the inspector on their return from school. They came to speak to the inspector in the office and explained that they had been told about the inspection and knew why the inspector was in their home. This young person stated that they loved the house and liked spending time with their peers. They explained that they did not mind the age gaps between them and two of their peers who were much younger and that they liked to play with them. They also reported that they liked having time on their own or with an older peer and that the smaller sitting room gave them a space to chill out.

Some of the children in this centre have complex communication presentations and the inspector observed a variety of symbol based systems on display in the centre and being used by the staff and the children. All children present acknowledged the inspector's presence with brief glances and the use of directed eye-gaze towards the inspector when they were spoken to or when the inspector commented on their actions in play. The staff modelled play activities to support participation in play, staff were observed engaging with the children in the house, for example in jumping or tickling games. Equally some of the young people presented with verbal language and they were supported by staff using shorter sentences and clear vocabulary. Symbol supported or easy-to-read documents were also used to support understanding of written material.

The staff team presented as knowledgeable in relation to the individual needs of the children. They outlined different supports required and how they ensured these were used such as symbol based communication systems, or physical prompting and guidance systems. Members of the staff team who met with the inspector had worked in the centre for a number of years and were familiar with the children and their need for consistency and routine alongside ensuring that they had fun.

As this was an announced inspection questionnaires were sent to the centre in advance to obtain a full picture of what living in the centre was like. These had been completed by the children and young people either independently or with the support of representatives and were also based on observations and discussions with the staff team. The questionnaires outlined a happy home for the children with comments such as 'x loves spending time in the garden and playing on the swing and trampoline, 'x is very happy and content in the choices offered' and 'I love the house, I love my bedroom and I love going on my laptop'. Further there were comments indicating that the children felt supported and happy with their staff team, for example ' they are all very nice and kind to me' or 'I want no changes at all'.

The questionnaires and discussions with the staff team outlined the busy lives led by the children and young people with a wide selection of toys and play experiences available in addition to time spent going swimming, for walks, to the cinema, playing football , going shopping or enjoying takeaways. The children and young people all mentioned the importance to them of having choice at mealtimes and opportunities to be independent in some food preparation with comments such as ' X participates in the food shopping and can then pick favourite snacks and food' or ' x really

enjoys making self a cup of tea' and finally 'I love everything, just not mushrooms'.

The quality of care and support provided to the children and young people was observed to be good. In the next two sections of the report, the findings of this inspection will be presented in relation to the governance and management arrangements and how they impacted on the quality and safety of service being delivered.

Capacity and capability

The inspection was facilitated by the centre person in charge and also by a team leader who was involved in the running and operation of the service. A senior manager also involved in the running of the centre and its operation was available and spent time with the inspector. The inspector found, that overall care was provided to a high standard with the provider having clear systems in place to identify where improvement or change may be required and implementing works to bring improvement.

The person in charge and the team leader who facilitated the inspection were found to have an in-depth knowledge of the individual care needs of the young people and children, including where external appointed agencies were involved in the oversight and review of their care. The person in charge was in a full time role and they held responsibility for the day-to-day operation and oversight of care in this and one other centre operated by the provider. They were supported in their role by a deputy manager and two team leaders who were full-time in this centre and who had detailed knowledge of young people and children's needs and social histories and it was clear that the aim of the person in charge and the other managers was to promote the welfare and well being of those who used this service.

Staff who met with the inspector had a good understanding of the needs of the children and young people and also of the procedures which promoted their safety, welfare and well being. Staff members outlined the prescribed response in regards to the reporting mechanisms for any areas of concern which they may have. In addition, a sample of staff training records were reviewed which indicated that staff were up-to-date with their training needs and they had attended training in areas such as children first, safeguarding and also behaviours of concern.

As mentioned above, the person in charge and the team leader who was present on the day, had detailed knowledge of the service and also of each individuals' needs. The person in charge and team leader were greeted warmly by each young person and child who were eager to engage with them during their day. The young people were observed moving freely throughout their home and in and out of the staff office to engage with both staff and the management team equally. It was clear that managers had good oversight of many care practices and the provider had

completed all required audits and reviews which indicated when there were issues which required review.

Registration Regulation 5: Application for registration or renewal of registration

The provider had submitted a complete application with all required documentation to renew the registration of this designated centre. This was reviewed in advance of the inspection, a small number of items required resubmission however, the provider had responded in a prompt manner to requests.

Judgment: Compliant

Regulation 15: Staffing

The provider ensured that a core staff team was present in the centre that was consistent and in line with the statement of purpose and the assessed needs of the children and young people. The staff team was found to be fully resourced with no current vacancies. The provider additionally ensured continuity of care and support for the children and young people through their use of a small number of regular relief staff who completed additional shifts to cover planned and unplanned leave.

There were planned and actual rosters in place and they were reviewed by the inspector and found to be well maintained. There was an on-call roster in place that was covered by members of the providers management team including person in charge and this was available to all staff.

The inspector reviewed a sample of staff personnel files and found them to be up-to-date and contained all information as required in Schedule 2.

Judgment: Compliant

Regulation 16: Training and staff development

The staff team access to and uptake of training and refresher training was found to be consistently high. They were completing training identified as mandatory by the provider, and a number of trainings in line with the assessed needs of the young people and children. All staff had completed training in a human rights based approach to support them in their practice. The provider had developed a system that allowed them to accurately track staff training requirements and this was being

implemented through all centres operated by them.

There were systems in place to ensure that staff were in receipt of regular formal supervision, to ensure that they were supported and aware of their roles and responsibilities. The inspector reviewed a sample of these and found they were completed as outlined in the provider's policy. Where required supplemental supervision following an event or incident was also completed and a record maintained. The provider and person in charge used a system of 'check and challenge' to support them in their oversight of the quality of care and support provided. The person in charge had a schedule for supervision over the course of the year in place.

Judgment: Compliant

Regulation 22: Insurance

The provider had ensured that the children and young people were protected by the presence of a contract of insurance for the centre.

Judgment: Compliant

Regulation 23: Governance and management

The provider had ensured that there was a management structure in place with clearly identified lines of authority and accountability. There was a person in charge of the centre who also had responsibility for one other centre. They were supported by a senior manager who held the role of person participating in management for this centre and by a deputy manager and two team leaders within this centre. The staff team were clear on who they reported to and who was available to speak to should they have a concern.

The provider had completed an annual review of the quality and safety of care and support in addition to six monthly unannounced visits of the centre as required by the Regulations. There was evidence that the children, and their representatives had been consulted as part of this process. Young people's views were gathered annually and there was evidence that feedback provided as part of this process was followed up on by the person in charge and the provider. For example where a child's external representative provided feedback on not having access to a bath in the premises the provider immediately sourced a solution for use within the centre. Action plans arose from the findings of the provider's reviews and the inspector found that progress of these actions was being made and monitored by the person in charge and the provider.

The person in charge and senior manager met formally on a monthly basis and informally more frequently to ensure that key performance measures for the centre were being met and actions being progressed. The deputy manager and the person in charge also met on a regular basis and there were written action plans arising from these as part of the oversight systems in place. Weekly governance reports were completed by the person in charge and reviewed and responded to by the person participating in management.

There were staff meetings occurring which allowed for systems of communication within the staff team, in addition managers meetings were held to review matters that pertained to centres operated by the provider and to share learning across centres.

The person in charge completed regular audits and it was evident that a number of improvements such as painting, decorating or targeted staff support for activities had been completed as a result of these.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

The provider ensured that all children and young people in this centre had contracts in place with the registered provider that detailed the service and facilities to be provided.

Since the last inspection of this centre there had been new admissions and in all instances the provider and person in charge followed their admissions process. These changes had been openly discussed with the children and young people already living in the centre and those due to move in, at a level that best supported their understanding of the situation in advance. The moves into the centre were found to have been positive for all who lived here.

The process included pre-admission assessments and the development of risk assessments, in addition to consideration given to compatibility. There were considerable age differences between two young people and two children, and this had been considered in advance, for example in the provision of two sitting rooms and in the provision of staffing resources based on these assessments.

Judgment: Compliant

Regulation 3: Statement of purpose

This is an important governance document that outlines the service to be provided in the centre. The most recent version was submitted to the Chief Inspector as part of the renewal of registration application and had been reviewed by the inspector in advance. Minor changes were required which had been completed before the inspection was complete. The statement of purpose contained all information as required by Schedule 1 and was found to accurately reflect the service provided in the centre.

Judgment: Compliant

Regulation 31: Notification of incidents

The provider and person in charge had a system in place for the recording, management and review of incidents in the centre. The inspector reviewed the record of incidents and found that the person in charge had notified the Chief Inspector of all incidents as required by the Regulation. These notifications had been completed in the required format and within the specified timeframe.

Judgment: Compliant

Regulation 4: Written policies and procedures

The registered provider had ensured that they had all policies as required by the Regulation in place to guide practice in the centre. The current policies were made available to staff and the inspector observed these being accessed and referred to by staff and by students on placement in the centre. All policies were reviewed by the provider as required. Procedures in place to guide the safe and effective delivery of care and support were reflective of guidance in the provider's policies.

Judgment: Compliant

Quality and safety

The inspector found that children and young people were supported to have fun, increase their independence skills and to attend education and that the service provided promoted their welfare and well-being. The children and young people from observation and report appeared happy living in this centre and the provider had employed a staff team who had a kind approach in regards to the provision of care. The inspector observed that the person in charge and staff team responded

respectfully to the children at all times and were caring and familiar with their individual needs.

Children and young people were supported to access play and activities suitable to their age, developmental abilities and needs in addition to outings in the local community arranged. For all of the young people and children the provider had supported them in accessing education. Consideration was given to children's dietary needs and snacks and meals were regularly offered and freely available.

Children and young people were protected by the policies, procedures and practices in place in relation to safeguarding and protection in the centre. Staff had completed training and were found to be knowledgeable in relation to their roles and responsibilities should there be an allegation or suspicion of abuse.

Regulation 10: Communication

The person in charge and the staff team were working to ensure that the complex communication needs of some of the children were considered throughout the day and in their home. The inspector found for example, on review of documentation that health and social care professional guidance, such as speech and language therapy had been sought.

Throughout documentation related to the children and young people, there was an emphasis on how best to support them to understand information and this included the best guidance to gaining informed consent. Children and young people had communication support plans as part of a document called 'about me' which detailed how to support their understanding or to guide when expressing themselves. Every effort was made to ensure that the young people and children could receive information at a level that was developmentally appropriate and in a way that they could understand. Staff were aware of communication supports required and were noted to actively use them and to be responsive and kind.

Visual scheduling or symbol supported step-by-step guidance was observed to support children in completion of routine tasks as part of independence skills, for example washing their face in the shower. In one sitting room accessible near the remote control was a television picture system so that the children could request support in adapting volume or selecting what to watch. Where the children or young people were not in a position to meet with family or friends on a regular basis the person in charge supported them in the preparation of letters and notes or photographs that were posted. These were important to ensure that relationships where possible were maintained in a positive manner.

The centre had access to the Internet and young people had areas where they could engage with technology such as electronic tablets or smart phones. For young people this also included access to social media on their personal computers.

Developmentally appropriate filters were applied and the young people engaged in education and support on dealing with information that may present on the Internet.

Judgment: Compliant

Regulation 13: General welfare and development

The young people and children's educational needs were well supported in this centre and all were supported to attend school. The children and young people were reported to enjoy school and there were regular systems of communication between school staff and centre staff to ensure a consistent approach to supporting their learning. Where one young person had recently started school they were now attending a number of days a week with evidence that they had been involved in decisions on what days and what subjects they engaged in.

Where external appointed agencies were involved in the oversight and review of the care and support provided to the children and young people, the person in charge had ensured that they were supported by appropriate advocates. The inspector reviewed meeting minutes that outlined the systems of oversight for all supports in place and systems for future planning for the children and young people.

Each of the children and young people in the centre met weekly to positively discuss matters that impacted on how their home was run. In addition the children and young people had regular one to one conversations with key workers and the person in charge had a schedule of topics for inclusion in these conversations that ensured young people were fully informed about their rights and about matters that impacted them.

There were ample facilities for children and young people to play and relax with suitable outdoor safe play areas and comfortable communal and private rooms in place. The garden and hard paved areas had been made safe and secure to support the children in having more independent access to toys and to protect them from risks such as the road outside the gate. One young person told the inspector that they had access to a bicycle in the centre and used the drive and paved areas to practice cycling. They explained that they had fallen off recently but this would not stop them from trying. They reported that there was a second bicycle that they hoped staff would use to come with them outside the centre when they were better at cycling.

The children and young people were supported in developing a consistent daily routine and in learning the routines associated with everyday tasks such as sitting at the table for meals or going grocery shopping, in addition to having time for independent play. They were supported to go to amenities in their local community and one young person enjoyed a playing sport with another enjoying trips to the

library and opportunities to explore their local community.

Judgment: Compliant

Regulation 17: Premises

This centre comprises a large detached house set in its own grounds on the outskirts of a town in Co. Wexford. The centre is registered for four and is at full capacity.

Overall the centre is laid out to meet the needs of the young people and children who live here. There are two spacious living areas one that also contains sensory equipment for all to engage with. The main living room is open to a sun-room and there is also a large kitchen-dining room. Upstairs all children and young people have their own bedrooms with one of these en-suite. Each of the bedrooms were decorated and furnished in a manner that reflect the interests of the children and young people. One young person explained to the inspector how they decided to decorate their room and another young person explained why they had decided to place items that were important to them in specific locations within their room.

The garden contained large areas of lawn with mature trees and shrubs and there were as already stated paved areas also. There was an area with play equipment adjacent to the sun-room door including a swing, climbing and balance equipment and a sensory wall. The house presented as warm and homely and the inspector observed the young people and children's art work and photographs on display throughout. Each young person and child had an identified cupboard in the kitchen that had their name and/or photograph on the front and they were observed going to these to independently take out preferred snacks or personalised crockery during the inspection.

There was a weekly health and safety and environmental audit completed and actions were identified arising from these. There were systems in place to log areas where maintenance and repairs were required and evidence that minor works are completed on an on-going basis including painting and decoration.

Judgment: Compliant

Regulation 20: Information for residents

The provider had a resident's guide in place that contained all information as required by the Regulation. This was on display in the centre and available to all young people and children. It had also been produced in an easy-to-read version and in a symbol supported version to ensure that the information was accessible to

each child and young person.

Judgment: Compliant

Regulation 25: Temporary absence, transition and discharge of residents

As stated already in the report under Regulation 24 there had been changes to the young people and children living in this centre since the previous inspection. The provider and person in charge had ensured that discharges had occurred in line with their policies and procedures.

The inspector reviewed a number of documents and meeting minutes in addition to transition and discharge plans. The inspector found that following significant consultation, a decision had been made with one young person to move to a new home operated by the provider which would better suit their individual needs. Clear person centred planning was evident in the transition and subsequent discharge plans.

Additionally the inspector reviewed the processes in place to support the young people in the centre in preparation for the transition into adulthood. There was evidence of multidisciplinary meetings and identification of steps that were to be taken with referrals to advocacy to support the individual young people through this process. Life skills that may be relevant for the new living arrangements were being identified and gently incorporated into everyday tasks in this centre.

Judgment: Compliant

Regulation 26: Risk management procedures

The provider had a risk management policy that contained all areas as required by the Regulation. The provider had ensured that risk management systems were in place in the centre. A risk register was in place which was regularly reviewed and had recently been updated. Plans were in place to appropriately respond to adverse incidents including loss of power, loss of water or flooding. A centre emergency plan was also available which was detailed and kept up-to-date. The provider had up-to-date centre specific safety statements in place and clear protocols to manage events such as unexplained absence from the centre.

A system was in place for the recording of any accidents or incidents in the centre and adverse incidents were responded to appropriately. All children and young people had individualised risk assessments and risk management plans in place. Risk assessments were associated with restrictive practices and personal plans in addition to the development of risk assessments aligned to the young person and children's

safety assessments. There was evidence that risks were reviewed and amended or closed as required and that new risks were opened.

Each individualised risk assessment considered whether control measures in place were effective and also considered the staff support required to ensure control measures could be effective. Clear review dates were identified and had to date been adhered to.

Judgment: Compliant

Regulation 28: Fire precautions

The provider had ensured there was suitable fire equipment in place and systems to ensure it was serviced as required. There were adequate means of escape including sufficient emergency lighting. All equipment and fire safety systems were being regularly serviced. There was a procedure for the safe evacuation of young people, children and staff, which was displayed.

Each child and young person had a personal emergency evacuation plan (PEEP) which was clear in relation to any supports they may require. Understanding of these was promoted by the use of social stories and a symbol supported version of the PEEP was also present. Staff had completed fire safety awareness training, and dates are identified for refresher training for those who required it. Daily, weekly and monthly checks and audits were in place with these audited and reviewed by the deputy manager and person in charge.

Fire drills were occurring regularly in the centre and being completed at different times. These were occurring in line with the provider's policy including one with the minimum number of staff and maximum number of children were present. The inspector spoke to one young person about fire drills and they explained that they knew where to go and that they used headphones as the noise of the alarm was too loud.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

The provider had systems in place for the receipt, storage and administration of medications. The inspector found that medication practices in this centre were good and that this area of care was held to a good standard at all times.

The provider had clear guidance in place for staff who completed daily counts and audits of medicines. There was a system for ensuring that staff were not interrupted

in the office while auditing to reduce the risk of errors.

The children and young people had up-to-date prescriptions or a kardex in place and there were accurate records maintained of administration of medicines. Should a medicine dose be refused there was clear guidance for staff on how to record this and who to contact to discuss the next steps.

Where the children or young people had 'as required' (PRN) medication prescribed and these were clearly identified with clear and direct protocols in place for their use. Risk assessments were completed for medicines that may be required in locations external to the centre such as the use of an asthma inhaler in a school environment.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

Each child or young person had an assessment of need and personal plan in place. From those reviewed, the young people and children's needs and abilities were clear. Assessments and plans were being regularly reviewed and updated. The provider and person in charge had ensured that all personal plans included goals, hopes and dreams in addition to their likes and dislikes. All plans were reviewed on an annual basis and areas that were important to them formed the central part of these reviews.

All young people and children had a document in place called 'About me' and this clearly identified not just goals and strengths but also the supports that may be required to achieve these and the associated plans that would need to be referred to including communication plans. All goals were reviewed on a monthly basis and linked with other plans where indicated. There was evidence that consultation with the young person or child about their goals and plans was occurring and guidance for staff on recording how they knew if a young person or child was enjoying an activity or not and whether visuals or gestures were used to support consultation.

The children and young people were supported to set goals that had meaning for them, for instance, for one young person this was making videos with their teddy bears, for another this was going to an indoor climbing venue. Goals also were set that had an impact on the young person or child's health and welfare such as using a fork, brushing their teeth or going to the dental hygienist. One young person told the inspector that they liked their goals and that they did not want to change them because they were interesting.

Judgment: Compliant

Regulation 7: Positive behavioural support

The provider and person in charge had ensured that there were robust behavioural support arrangements in place. Behavioural support assessments and plans were reviewed by the inspector and found these gave a clear account of the arrangements to support a child or young person in regards to their needs with behaviour that challenges. They were found to be regularly reviewed and amended to reflect the young person or child's current presentation. Plans contained guidance as indicated from other health and social care professionals such as occupational therapy or psychology or medical professionals such as psychiatry.

Staff who met with the inspector understood these recommendations and they clearly described how best to create an environment which reduced the likelihood of behaviours that challenge occurring. They also outlined how they responded when behaviours of concern were present. This was of particular importance given the significant age difference between the young people and the children who lived in this centre and their different needs and vulnerabilities.

There were a number of restrictive practices in place in the centre which were assessed for and implemented in line with national policy and best practice. The staff team had received training to manage behaviour that challenges and this had included specific training on restrictive practices in use in the centre. The provider ensured that all restrictive practices were reviewed quarterly in their restrictive practice committee attended by all persons in charge and the provider.

Judgment: Compliant

Regulation 8: Protection

The provider had ensured there were robust safeguarding measures in place for the day-to-day care of children and young people in this centre. The staff members who met with the inspector had a good working knowledge of safeguarding measures, and all had received training in the area. The area of intimate care was also well supported. Clear and direct personal and intimate care plans reviewed by the inspector also aimed to promote the children and young peoples' individual independence. These plans were linked to communication plans and to positive behaviour support plans.

There were support plans based on recent assessments in place. These included safety assessments for the children and young people in their home, in the community and while engaged in learning, all of the plans promoted health and well being while ensuring the children and young people were protected. There were social media monitoring tools and Internet safety systems in place. There was clear guidance for staff on the recording and response to incidents or accidents and

systems for recording minor injuries.

Where young people were in receipt of disability allowance the provider had supported them in establishing payment to a personal financial account. The inspector found that there were systems to review or audit receipts or to review cash balances in addition to reconcile or review bank statements. The inspector found that the young people in this centre were appropriately safeguarded by financial oversight practices in place.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 (as amended) and the regulations considered on this inspection were:

Regulation Title	Judgment
Capacity and capability	
Registration Regulation 5: Application for registration or renewal of registration	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 22: Insurance	Compliant
Regulation 23: Governance and management	Compliant
Regulation 24: Admissions and contract for the provision of services	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 31: Notification of incidents	Compliant
Regulation 4: Written policies and procedures	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 20: Information for residents	Compliant
Regulation 25: Temporary absence, transition and discharge of residents	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant