



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

# Report of a Designated Centre Special Care Unit

Name of designated centre:	Coovagh House Special Care Unit
Name of provider:	The Child and Family Agency
Address of centre:	Limerick
Type of inspection:	Unannounced
Date of inspection:	13 – 14 March 2023
Centre ID:	OSV- 0004219
Fieldwork ID	MON-0039298

## About the designated centre

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

Our aim is to provide a safe, secure and therapeutic environment where young people learn to reduce their risk-taking behaviours while developing their wellbeing. We aim to enable and support the young person to return to a less secure placement as soon as possible, based on the individual needs of that young person.

The objective is to provide a high quality standard of young person centred care to young people who are detained under a High Court Special Care Order. This is supported through the use of a model of care which ensures young people live in a comfortable, clean and safe environment. This environment promotes the wellbeing, health, education, rights and independence of the young people in Coovagh House and assists in reducing their risk-taking behaviour and to return them to a non-secure environment as soon as possible.

The rights of all children and young people in Coovagh House are respected, protected and fulfilled, their voices are heard and they are supported to realise their maximum potential and develop their hope. Taking into account the nature of the environment in special care and the individual needs of each young person, every effort will be made to reduce restrictive practices in terms of care practices and accommodation.

Coovagh House caters for young people who present with risk taking behaviours including but not limited to being unable to keep themselves safe and protected, exploitation by adults/peers, drug and alcohol misuse (excluding dependence), non-school attendance, violence and aggression. The above behaviour is deemed as posing a real and substantial risk of harm to their life, health, safety, development or welfare and has been assessed as not being able to be managed in a non-secure environment.

**The following information outlines some additional data of this centre.**

Number of children on the date of inspection:	2
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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 Welfare of Children in Special Care Units) Regulations 2017, and the Health Act 2007 (Registration of Designated Centres) (Special Care Units) 2017. To prepare for this inspection the inspectors of social services (**hereafter referred to as inspectors**) reviewed all information about this centre. This included any previous inspection findings, registration information and information submitted by the provider or person in charge since the last inspection.

As part of our inspection, where possible, we:

- speak with children and the people who visit them to find out their experience of the service,
- talk to staff and management to find out how they plan, deliver and monitor the care and support services that are provided to children 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:

### **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 children 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
13 March 2023	09:00hrs to 17:30hrs	Lorraine O Reilly	Lead inspector
	0930hrs to 17:30hrs	Rachel Kane	Support inspector
	1030hrs to 17:30hrs	Mary Lillis	Support inspector
14 March 2023	08:00hrs to 15:30hrs	Lorraine O Reilly	Lead inspector
	08:00hrs to 15:30hrs	Rachel Kane	Support inspector
	08:00hrs to 15:30hrs	Mary Lillis	Support inspector
29 March 2023	08:00hrs to 16:00hrs	Niall Whelton	Support inspector (desktop review)

**What children told us and what inspectors observed**

This inspection was an unannounced inspection to review the outstanding works completed within the centre in March 2023. With these works completed, the provider had advised that they intended to submit an application to vary to return the unit to being a four-bedded special care unit. An application by the provider was received to reduce bed capacity to two beds since June 2022 due to high-risk non-compliances with several regulations and the provider had work to complete to make it safe for more residents. The unit acknowledged this was required at that time to provide safe care to the children. Several actions were taken by the registered provider in the form of compliance plans and all actions were completed at the time of this inspection. There were two children in the unit at the time of this inspection.

During this inspection, inspectors observed and met with children while being shown around the unit. Inspectors also spoke with a family member, staff and managers, two social workers and two guardians ad litem (a guardian ad litem refers to an individual appointed by the court to represent the best interests of a child in legal proceedings). Their views, and the observations of inspectors’ onsite are presented in this section of the report, to provide an insight into children’s experience of living in the unit at that time.

Children spoke openly around staff and they were listened and responded to in a meaningful and thoughtful way. There were high levels of supervision of children in the unit. With bed numbers within the unit being reduced to two, several staff were available to children. This was highlighted as something which required careful consideration when planning to increase capacity to four beds as this would have a direct impact on the level of staff availability to the current children.

From walking through the unit, inspectors saw children having meals and they told inspectors the food was "good". Children were involved in meal planning each week and their suggestions were taken on board by the chef. Children were also provided access to the kitchen at different times to cook with staff.

Children's right to safeguarding against abuse and neglect was upheld within the unit. From speaking with staff and also reviewing records, staff were aware of their role in protecting children and took children's views seriously when they reported any concerns.

Children's right to education, leisure, activities were promoted, and they were encouraged to engage in activities and outings. Children's files detailed their programme of care which recorded various activities which were planned on a weekly basis.

The accommodation and premises had improved since the previous inspection in October 2022. The provider had completed a number of actions to address outstanding repairs and improve the quality of the building. On a walk around of the premises, inspectors saw that previous damage to the property had been repaired. The unit employed an external contractor to oversee the necessary works. Although there had been some delays outside the control of the unit, all of the works had been completed with fixtures such as windows and fire doors being replaced since the last inspection. This improved the quality of the physical building and meant it was more comfortable for children to reside in.

The unit was presented as more homely with the works completed. Children could now open their windows for fresh air as this had not been possible until the new windows were installed. There were various pieces of artwork on display throughout the building with some being completed by children who had resided there. There were plants and flowers throughout the corridors and common areas. Living spaces were colourful, bright and welcoming with murals in the various areas of the unit.

The unit's sports and leisure facilities for children were of a good standard and were regularly used and valued by children. There was a second building on site which had a gym, sensory room and lounge area. It was noted in children's records that they used the gym on a regular basis. The lounge area could be used for family access or for children to use as an alternative space to their main living area.

Managers recognised the vulnerability of children and sought to ensure their environment was safe. Some television sets were 'boxed in' within activity rooms used by the two children. This detracted from the homely feel which staff had been actively trying to create. When staff were asked about this, they said the boxes around the televisions could easily be removed if deemed safe enough to do

so. However, the use of the television boxes in certain areas was in contrast to other living spaces, where both children had access to televisions which were not boxed in. This showed inconsistency in terms of restrictions and was an area for improvement.

Feedback from external professionals and family was positive. Inspectors were told that children were kept safe in the unit, staff were supportive and met children's needs. While external professionals noted the good quality care provided to children, there was concern about moving children out from the special care unit and that there were delays in securing onward placements for children.

Securing onward placements for children required improvement. This was identified as an issue by the children residing in the unit, staff, management and external professionals. It was a significant issue for children who remained in the special care unit for longer than required. Children also expressed concern about other children moving into the centre as staff had kept them informed of the plans to increase the capacity to provide care for two more children. There was a national plan in place at the time of the inspection to develop other less-restricted living environments within the community for children to move in to when they were ready to do so.

### **Capacity and capability**

Overall, this inspection found that the service had maintained the improvements to governance and management systems in place since the last inspection. The provider was compliant with the 11 regulations assessed in this inspection.

The provider had strong reporting systems in place with clearly defined management structures. There had been a change to the management structure since the most recent inspection in October 2022. A social care manager had started in their role in January 2023. This was a new role and they were delegated the oversight of day-to-day activities with the unit. There was a written record of the recently allocated designated duties to confirm these arrangements. When speaking with staff, some were unaware of which manager should be approached for various aspects of service delivery. Inspectors told management about this and they agreed to discuss this at team meetings to ensure all staff were clear about who they should be reporting issues to. Staff also told inspectors about how they can approach any manager should any issues arise and therefore it did not impact on children's safety.

There was adequate staffing in place to deliver a safe service and meet the children's needs residing in the unit. At the time of the last inspection, a review of staff files found gaps in the information required by the regulations. This had since been addressed by the director and the person in charge of the service who

provided assurances that these gaps on files had been adequately addressed. All staff were qualified and had completed their mandatory training, which was up to date.

The level of mentoring, support and supervision was of a good standard. The frequency of supervision was in line with policy. Induction materials were of good quality and comprehensive in their approach. For example, an induction checklist completed with all new staff recorded information such as contact details, dates training was completed, the shadowing of more experienced workers when being inducted into their new roles and arrangements for supervision. There were no students or trainees in the SCU at the time of the inspection.

Management had good oversight of the new supervision processes in place. Regular management meetings set the agenda topics for staff supervision and included areas such as safeguarding and staff support. The management team continued audits to oversee the frequency and quality of supervision and to determine what themes were being discussed and what issues were arising.

The oversight and auditing processes in relation to the management of incidents, complaints and allegations concerning children in the unit continued to be effective and they had been reviewed by the management team in the six months prior to the inspection. Mechanisms were put in place to ensure management were made aware of any incidents in a timely manner. Daily debriefs continued to occur at the beginning of each shift to ensure that all staff were aware about all of the appropriate information about incidents, complaints and allegations that had occurred from the previous shift. These debriefs were also sent to management on a daily basis and this meant that incidents could be acted upon in a timely manner.

The management team had provided assurances that all significant events were reviewed twice per week by the person-in-charge and the social care manager. However, a review of incidents by inspectors showed that some significant events during the week prior to the inspection had not been reviewed by management. This was brought to the attention of management during the inspection and assurances were provided that these would be reviewed as a priority. Management advised that although they were not formally reviewed as noted above, they were aware of them due to the daily debriefs as well as regular communication with staff.

Child protection and welfare concerns were managed in line with the requirements of Children First: National Guidance for the Protection and Welfare of Children (2017). Management held quarterly safeguarding briefings to ensure staff were aware of their obligations. A review of the unit's safeguarding register showed there were six concerns in 2023 and one remained open at the time of the inspection. All were managed appropriately with good oversight, in a timely

manner and in line with the unit's policy. Staff were aware of their safeguarding duties and all staff had up to date safeguarding training.

The oversight and management of the requirements to notify HIQA of incidents in the unit was good. There was oversight of incidents in the unit and it provided assurances with regards to required actions being taken to promote the safety and well-being of the children residing in the unit. Since the last inspection, the vast majority of incidents were notified in a timely way. Upon inspector's review of significant events, one event which should have been notified as an absconson had not been submitted. This was brought to the attention of the director and person in charge who provided assurances that this would be submitted retrospectively. This was completed after the inspection.

At the time of this inspection, the unit had revised their statement of purpose with the view to returning to a four-bedded unit. Inspectors discussed with management what the plan would be regarding increasing the number of children who could reside at the unit. They acknowledged that this needed to be carefully planned and the impact upon the current residents would be taken into consideration. They told inspectors that to prioritise children's safety, interactions between the children would need to be carefully considered and risk-assessed.

Monitoring and reporting systems required by the regulations were in place. These included unannounced visits by or on behalf of the provider and periodic reviews of the safety and quality of the service were in place. Management were well-informed of the quality and safety of the service, and this increased management's capacity to prioritise tasks for the improvement of the service.

#### Regulation 5: Statement of purpose

The statement of purpose included the information as required by the regulations. The registered provider reviewed and revised their statement of purpose in line with their application to vary to provide care for four children. There was also a statement of purpose available to children in an age-appropriate format.

Judgment: Compliant

#### Regulation 14: Staff members and others working in the Special Care Unit

The provider had appropriate staffing to provide for the number and needs of the children living in the unit. Management had taken required action to address some gaps in records from a previous inspection. Supervision was in line with national policy requirements and audits were in place to oversee frequency and quality of supervision.

Judgment: Compliant



#### Regulation 24: Governance and management

The provider had systems of review in place to monitor the quality and safety of the service. Management structures were defined and there were good systems of oversight within the unit. Although a formal review of all incidents did not happen in line with what management had told inspectors, they were aware of them due to oversight mechanisms in place and they prioritised children's safety.

Judgment: Compliant

#### Regulation 27: Notification of incidents

Measures were in place to ensure that notifications to the Chief Inspector were completed. These were mostly reported to HIQA in a timely manner and the person in charge retrospectively submitted one notification with regard to an absconsion from care.

Judgment: Compliant

#### Quality and safety

The quality and safety of care provided in the designated unit remained at a good standard. Inspectors found that children were well-cared for and the welfare and safety of children was promoted and protected. There was a decrease in incidents of high risk behaviours. Works were completed in terms of the accommodation and fire safety measures to bring the unit into compliance with regards to these regulations.

Children were provided with individual programmes of care to meet their specific needs and goals. Children's records were appropriately detailed, up to date and presented a picture of their individual needs. Records clearly stated how children's needs were being met, progress that was made as well as any issues arising that required further support. The level of detail in children's placement support plans required improvement to adequately reflect the level of work being undertaken with children and this was highlighted with management during the inspection.

Information about children's individual plans was shared within staff meetings, multidisciplinary (MDT) forums and monthly child-in-care reviews. The children's individual plans were reviewed on a monthly basis by the members of the care team. Children had access to the assessment consultation therapy service (ACTS) who provided children with support specific to their individual care needs. Records of the meetings were kept and discussions centred about what was important to children. The ACTS team also provided support to staff and managers about engaging with children as well as developing consistent approaches to underpin the delivery of care.

Children were encouraged to contribute their views about living in the unit in weekly house meetings which occurred with children on an individual basis. Inspectors saw that items discussed by children were shared at staff meetings and discussions were actioned with outcomes recorded. For example, when a child discussed pocket money, this was agreed to and the decision was recorded in house meeting minutes as well as on the child's file.

Children's placement support plans provided a clear picture of children's needs and risks. They had a strong focus on supporting children to keep active and promote their personal interests. There was an increase in weekly activities since the last inspection and this was a positive change. Children's menu options and food choices were routinely considered in weekly discussions.

The number of incidents involving behaviour that challenge had decreased significantly since the last inspection. Managers continued to review all incidents of physical restraint within the unit and had taken actions to ensure learning could be taken from each incident. For example, actions following the review of incidents included meetings with staff and providing additional training. The unit had increased the number of trainers who could provide additional training from one to three members of staff. This meant that training was more easily accessible and there were more staff available to provide training when required.

The accommodation was in better condition overall since the last inspection. The building had been re-painted and walls had been repaired. The planned programme of work which was designed to reduce infrastructural damage and provide solutions to challenges within the premises was completed the week before the inspection. Management were knowledgeable about the programme of work and daily checks of the premises occurred until the works were completed. Improvements were implemented with the input of a team of technical advisers who had issued a certificate of substantial completion. When inspectors clarified if any works were outstanding, confirmation was received that the works had been fully completed.

Inspectors found the oversight and management of fire safety had improved. Management systems had been implemented to sustain this oversight and it was a delegated duty to a social care manager to monitor and oversee fire safety arrangements. This meant that fire safety records were signed off in a timely manner with no gaps identified by inspectors upon review of records. At the time of the inspection, inspectors noted one child had yet to complete a fire safety drill since the works had finished the week before the inspection. This was brought to the attention of management and a fire drill was completed the same day. The assessed evacuation requirements of each young person were documented in a personal emergency evacuation plan (PEEP) and these had been recently updated. Newly installed systems included the provision of an additional fire compartment

boundary and the replacement of fire compartment doors, with a more robust door type. There was also an improved system of connecting these doors to the fire detection and alarm system.

Actions required with regard to the accommodation from the last inspection had been taken. For example, there was a lock to an exit door which was difficult to open and this door had been replaced. Additional emergency lighting was in place. Inspectors observed a deficit to the maintenance of the laundry door, with a section of the heat and smoke seals missing. This was immediately addressed by management. The new floor plans were on display prior to inspectors leaving the unit which reflected the updated fire compartment strategy.

#### Regulation 7: Programme of care

Children had individual programmes of special care in place for children. These included all required components such as care plans, placement plans, placement support plans, education plans and psychiatric plans when required. All members of the care team were consulted as required.

Judgment: Compliant

#### Regulation 9 (5) (6): Education, individual needs, religion, ethnicity, culture and language

There were arrangements in place to ensure children's access to educational facilities and supports. Children participated and contributed to decisions about their care and support. Inspectors observed staff being respectful of children, their individual needs and treated them with dignity.

Judgment: Compliant

#### Regulation 11: Positive behavioural support

Inspectors reviewed records of incidents and significant events for children and found good quality care and support of children during times of escalated or challenging behaviour. The use of any restrictive practice was clearly risk-assessed in line with policy.

Judgment: Compliant

#### Regulation 12: Protection

Safeguarding measures were in place within the unit. There was good oversight of safeguarding and staff reported child protection allegations and concerns in line with national policy.

Judgment: Compliant

**Regulation 17: Accommodation**

There were appropriate indoor and outdoor recreational facilities available to children. The premises was clean, maintained and appropriately decorated. There was adequate space and light. The ventilation within the unit including children's bedrooms had improved, allowing fresh air to circulate the building.

Judgment: Compliant

**Regulation 25: Risk management**

The registered provider had effective arrangement for the identification, management and ongoing review of risk. Measures put in place by management such as daily debriefs had enhanced the oversight of risks.

Judgment: Compliant

**Regulation 26: Fire precautions**

There were adequate precautions against the risk of fire. There were newly installed fire doors within fire compartment boundaries and fire drills were completed with staff and children. Procedures to be followed in the event of fire were displayed in a places in the special care unit which reflected the newly developed plans following the completion of works within the unit.

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 Welfare of Children in Special Care Units) Regulations 2017, and the Health Act 2007 (Registration of Designated Centres) (Special Care Units) 2017 and the regulations considered on this inspection were:

Regulation Title	Judgment
<b>Capacity and capability</b>	
Regulation 5: Statement of purpose	Compliant
Regulation 14: Staff members and others working in the Special Care Unit	Compliant
Regulation 24: Governance and management	Compliant
Regulation 27: Notification of incidents	Compliant
<b>Quality and safety</b>	
Regulation 7: Programme of care	Compliant
Regulation 9: Education, individual needs, religion, ethnicity, culture and language	Compliant
Regulation 11: Positive behavioural support	Compliant
Regulation 12: Protection	Compliant
Regulation 17: Accommodation	Compliant
Regulation 25: Risk management	Compliant
Regulation 26: Fire precautions	Compliant