



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

# **Draft National Standards for Residential Centres for People with Disabilities**

Consultation Document  
October 2012

*Safer Better Care*

## About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is the independent Authority established to drive continuous improvement in Ireland's health and personal social care services, monitor the safety and quality of these services and promote person-centred care for the benefit of the public.

The Authority's mandate to date extends across the quality and safety of the public, private (within its social care function) and voluntary sectors. Reporting to the Minister for Health and the Minister for Children and Youth Affairs, the Health Information and Quality Authority has statutory responsibility for:

- **Setting Standards for Health and Social Services** – Developing person-centred standards, based on evidence and best international practice, for those health and social care services in Ireland that by law are required to be regulated by the Authority.
- **Social Services Inspectorate** – Registering and inspecting residential centres for dependent people and inspecting children detention schools, foster care services and child protection services.
- **Monitoring Healthcare Quality and Safety** – Monitoring the quality and safety of health and personal social care services and investigating as necessary serious concerns about the health and welfare of people who use these services.
- **Health Technology Assessment** – Ensuring the best outcome for people who use our health services and best use of resources by evaluating the clinical and cost effectiveness of drugs, equipment, diagnostic techniques and health promotion activities.
- **Health Information** – Advising on the efficient and secure collection and sharing of health information, evaluating information resources and publishing information about the delivery and performance of Ireland's health and social care services.

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## 1. Introduction

People with disabilities, both adults and children, have the right to be safe, to receive good care and support and to have access to the services they need in order to enable them to lead a fulfilling life. This basic right is fundamental to their wellbeing and healthy development. A systematic approach is required to provide high quality, safe and effective care to people with varying abilities and this involves good leadership, skilled and experienced staff and the effective management of resources so that the person is always at the centre of everything that is done.

The Health Information and Quality Authority (the Authority) recognises the importance of increasing the quality and safety of care and support for people with disabilities, who are living away from their families in residential care.

The Authority is the statutory body established under the Health Act 2007 with responsibility for setting standards for health and social care services, and ensuring that the standards are being met. The Authority is responsible for the registration and inspection of 'designated centres', that is, residential services for older people and people with disabilities.

The Health Act requires that all 'designated centres' are registered and inspected. A designated centre is defined in Part 1, Section 2 of the Health Act as an institution at which residential services are provided by the Health Service Executive (HSE) or other service providers. It includes, therefore, those designated centres run by public, private and voluntary organisations. The regulation of all residential care centres ensures equity of treatment across the whole sector and supports the aim of delivering consistent standards of service to children and adults regardless of the provider of the service.

When the Authority begins the registration and inspection of designated centres for people with disabilities, in accordance with the Health Act 2007 this will include designated centres for both children and adults. The registration and inspection of designated centres is an ongoing process, to ensure that services are compliant with regulations and standards, and most importantly deliver high quality, safe and effective care and support for both children and adults with disabilities.

These outcome-based Standards represent a revision of the previously published *Draft National Quality Standards: Residential Centres for People with Disabilities*, which were for centres providing residential care to adults only, and the *Draft National Quality Standards for Residential and Foster Care Services for Children and Young People*. They provide a framework for the development of person-centred residential care for all people with disabilities. They also provide the framework to assess whether residential centres are providing high quality, safe and effective care for the adults and children who live there.

Children and adults who live in residential centres should enjoy a good quality of life and live in a place that feels like home, one that upholds their personal dignity and respects their privacy. They should have a range of opportunities to make relationships, participate in the community within the service and in the wider community and engage in life enhancing activities, including those that involve a degree of risk. This requires, among other things, that they are supported by staff with whom they can communicate easily, who respect their individuality, dignity and privacy and who are sensitive to their aspirations and needs.

Centres should be aware of the unique social and developmental needs of adults and children, and their different requirements as they grow, develop and mature from childhood into adulthood.

The Standards set out in this document seek to encompass all residential centres which provide residential care and/or residential respite care<sup>±</sup> for children and adults with disabilities.

The Standards are set out in two separate sections:

- **Section 1: Draft National Standards – for Children with Disabilities**
- **Section 2: Draft National Standards – for Adults with Disabilities.**

Each section outlines the specific Standards for adults and children which aim to enhance the potential of people living in residential care. The Standards focus on outcomes which empower people with disabilities at the different stages of their lives to participate in, and contribute to, activities which help them to realise their full potential.

These include:

- respecting their autonomy, privacy and dignity and promoting their rights
- facilitating them to exercise personal choice in their daily lives
- safeguarding and protecting them from abuse
- providing them with accessible information and assessment to ensure appropriate support services are made available.

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<sup>±</sup> Residential respite services are addressed in this Draft Standards document. However, further clarification is being sought from the Department of Health as to whether these services come under the remit of a 'designated centre', as defined in the Health Act 2007.

## **2. Principles informing the Draft National Standards for Children with Disabilities**

The Draft National Standards for Children with Disabilities are based on the key principles outlined below which guide residential centres on how best to provide a safe and effective service for children.

The principles are to:

1. Provide the care and support to promote age-appropriate independence and an excellent quality of life for children.
2. Promote a child-centred and age-appropriate approach to service provision that meets the needs of each child.
3. Safeguard and protect each child.
4. Listen to the child's voice and uphold and promote the equal rights of children with disabilities.
5. Promote and improve the health and development of each child.
6. Promote integration within the community and the development of social networks.
7. Provide effective governance arrangements with clear leadership, management and lines of accountability.
8. Plan and use resources effectively.
9. Deliver responsive and consistent services based on evidence and good practice.

## **3. Principles informing the Draft National Standards for Adults with Disabilities**

The Draft National Standards for Adults with Disabilities are based on the key principles outlined below which guide residential centres on how best to provide a safe and effective service to adults with disabilities.

The principles are to:

1. Provide the care and support to promote independence and an excellent quality of life for people living in the centre.
2. Promote a person-centred approach to service provision that meets the needs of each person.
3. Safeguard and protect each person.
4. Uphold and promote the equal rights of adults with disabilities.
5. Promote and improve the health and development of each person.
6. Promote integration within the community and the development of social networks.
7. Provide effective governance arrangements with clear leadership, management and lines of accountability.
8. Plan and use resources effectively.
9. Deliver responsive and consistent services based on evidence and good practice.

## 4. Scope of the Draft National Standards

These Draft National Standards apply to residential centres across all sectors in Ireland, whether they are operated by public, private or voluntary bodies or organisations. The Standards are intended to apply to all of the diverse and complex residential settings where people with disabilities live.

These include:

- institutions – large settings that typically provide accommodation for 10 or more people
- clustered housing – housing that is traditionally associated with an institution. The accommodation is dispersed away from the main institutional building, but clustered within its environs
- supported community living – housing within an ordinary neighbourhood which provides accommodation and is designed to meet the needs and wishes of people with disabilities living there.

Within any of these settings, people may have their permanent home. Alternatively, they may receive respite services on a regular recurring basis, or on an occasional, ad hoc, or one-off basis. Service providers providing residential services and/or residential respite services will comply with these Standards and provide an equivalent level of quality across residential care and residential respite care.

## 5. Themes in the Draft National Standards

The Authority has devised a framework for developing standards which was developed following a review of international and national evidence, engagement with international and national experts and applying the Authority's knowledge and experience of the Irish health and social care context.

Based on this framework, the themes covered by the Draft National Standards relate to the dimensions of quality and safety and to the dimensions of capacity and capability (see Figure 1 on page 10). The quality and safety themes described in these Draft National Standards are:

- **Person-centred services/Child-centred services** – how residential centres place adults and children at the centre of what they do.
- **Effective services** – how residential centres deliver best outcomes and a good quality of life for adults and children, using best available evidence and information.
- **Safe services** – how residential centres protect adults and children and promote their welfare. Safe services also avoid, prevent and minimise harm and learn from things when they go wrong.



- **Health and development** – how residential centres identify and promote optimum health and development for adults and children.

Delivering improvements within these quality themes depends on services having capability and capacity in four key areas, as outlined in the following themes:

- **Leadership, governance and management** – the arrangements put in place by a residential centre for accountability, decision making, risk management as well as meeting their strategic, statutory and financial obligations.
- **Use of resources** – using resources effectively and efficiently to deliver best achievable outcomes for adults and children for the money and resources used.
- **Workforce** – planning, recruiting, managing and organising staff with the necessary numbers, skills and competencies.
- **Use of information** – actively using information as a resource for planning, delivering, monitoring, managing and improving care.

**Figure 1. Themes in the Draft National Standards**



The Standards are outcome-based. This means each Standard provides a specific outcome for the service to meet, which is described in the 'standard statement'. The **standard statement** describes the high-level outcome required to deliver quality residential services and residential respite services for adults and children.

The **features** under each standard statement give examples of what the residential centre may consider in order to meet the standard and achieve the required outcome. The list of features provided under each standard statement heading is not an exhaustive list and the residential centre may meet the requirements of the standards in different ways.

Some of the Standards will be reflected in regulations. Regulations differ from Standards. They are based on primary legislation and are designed to give effect to it. A regulation details what the legislation intends.

All residential centres must be registered to operate within the law. In order to be registered, the residential centre must comply with the regulations. If the centre is not in compliance with the regulations it may fail to achieve registration status or it may lose the registration status.

In the case of those Standards which are not regulatory Standards, or Standards linked to regulations, failure to comply will not in themselves lead to failure to be registered or loss of registration, but they are designed to encourage continuous improvement.

The Authority will monitor the compliance of each residential centre with the Health Act 2007, the Regulations that will be developed and these Standards when finalised and approved.

## 6. Consultation

This document presents for public consultation the proposed *Draft National Standards for Residential Centres for People with Disabilities* for a period of five weeks. The Authority will consider and review all submissions received during the consultation process.

Following this process the Authority will finalise the *National Standards for Residential Centres for People with Disabilities*.

Different versions of the Standards will also be produced when the *Draft National Standards for Residential Centres for People with Disabilities* are approved.

The closing date for receipt of submissions is **Wednesday 21 November 2012**.

### How to make a submission

A number of consultation questions have been prepared for your consideration when reviewing the Standards. These questions are grouped together in the consultation feedback form. They are not intended, in any way, to limit feedback and any other comments are welcome.

There are three ways to tell us what you think:

- Your comments can be submitted by downloading and completing the consultation feedback form available from [www.hiqa.ie](http://www.hiqa.ie) and emailing your completed forms to [consultation@hiqa.ie](mailto:consultation@hiqa.ie).
- You can print off a copy of the feedback form from our website and post it to us at:

Health Information and Quality Authority  
Draft National Standards for Residential Services for People with Disabilities  
George's Court, George's Lane  
Smithfield  
Dublin 7

- For further information or if you have any questions you can talk to the consultation team by calling (01) 8147634.

### **How we will use your comments**

Following the consultation, the Authority will analyse the submissions and make further amendments to the document.

## **7. Next steps**

Following the consultation process, the feedback received on the *Draft National Standards* will be reviewed and the Standards will be revised prior to submitting them to the Board of the Authority for approval.

Following this, the final Standards will then be submitted for approval to the Minister for Health and the Minister for Children and Youth Affairs.

Once approved, the Authority will begin the registration and inspection of designated centres for people with disabilities against the regulations and Standards. Each residential centre for people with disabilities will be expected to provide evidence of compliance with the Standards.

## **8. Terminology used in the Standards**

### **Children**

The term 'children' is used to cover everyone under the age of 18 years.

### **Person**

Throughout the section on standards for adults the term 'person' is used to refer to an individual adult with a disability.

### **People with disabilities**

In the adults' section where more than one person with a disability is being referred to the term 'people' or 'people with disabilities' is used.

# Draft National Standards – for Children with Disabilities



## Summary of Standards for Children with Disabilities

### Theme 1: Child-centred Services

Standard 1:1	The rights and diversity of each child are respected and promoted.
Standard 1:2	The privacy and dignity of each child are respected.
Standard 1:3	Each child exercises choice and experiences care and support in everyday life.
Standard 1:4	Each child develops and maintains relationships and links with family and the community.
Standard 1:5	Each child has access to information, provided in an accessible format that takes account of their communication needs.
Standard 1:6	Each child participates in decision making, has access to an advocate and consent is obtained in accordance with legislation and current best practice guidelines.
Standard 1:7	Each child's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.

### Theme 2: Effective Services

Standard 2:1	Each child has a personal plan which details their needs and outlines the supports required to maximise their personal development.
Standard 2:2	The residential centre is homely and accessible and promotes the privacy, dignity and safety of each child.
Standard 2:3	Each child's admission and discharge is determined on the basis of fair and transparent criteria.
Standard 2:4	Children are actively supported in the transition from childhood to adulthood and are sufficiently prepared for and involved in the transfer to adult services.
Standard 2:5	Each child receives high quality, effective respite services.

### Theme 3: Safe Services

Standard 3:1	Each child is protected from abuse and neglect and their safety and welfare is promoted.
Standard 3:2	Each child experiences care that assists them to manage their behaviour and supports their emotional wellbeing.
Standard 3:3	Children are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.
Standard 3:4	Adverse events and incidents are managed and reviewed in a timely manner and outcomes inform practice at all levels.



#### Theme 4: Health and Development

Standard 4:1	The health and development of each child is promoted and improved.
Standard 4:2	Each child receives a health assessment and is given appropriate support to meet any identified need.
Standard 4:3	Each child's health is supported by the residential centre's policies and procedures for medication management.
Standard 4:4	Educational opportunities are provided to each child to maximise their individual strengths and abilities.

#### Theme 5: Leadership, Governance and Management

Standard 5:1	The residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each child and promote their welfare.
Standard 5:2	The residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability.
Standard 5:3	The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.
Standard 5:4	The residential centre has appropriate service level agreements, contracts and/or other similar arrangements in place with the funding body or bodies.

#### Theme 6: Use of Resources

Standard 6:1	The use of available resources is planned and managed to provide effective residential care to children.
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#### Theme 7: Workforce

Standard 7:1	Safe and effective recruitment practices are in place to recruit staff.
Standard 7:2	Staff have the required competencies to manage and deliver effective services to children.
Standard 7:3	Staff are supported and supervised to carry out their duties to promote and protect the care and welfare of children.
Standard 7:4	Training is provided to staff to improve the outcomes for children.

#### Theme 8: Use of Information

Standard 8:1	Information is used to plan and deliver safe and effective residential care and support.
Standard 8:2	Secure record-keeping and file-management systems are in place to provide a safe and effective service.

## Theme 1: Child-centred Services

Residential services for children with disabilities promote a child-centred approach to service provision and consider the 'whole child' in the context of their family, school, friends and local community. As children grow up, their needs change. Flexible services respond to children's individual needs, age, stage of development and social circumstances and coordinate the service around the needs of children and their families. Services working with children promote a child-centred approach through recognising children's rights, including their right to be listened to and to participate in decisions made about them, taking into account their age and maturity.

A child-centred approach to service provision is one where services are planned and delivered with the active involvement of the child and developed around their particular characteristics and needs. Children in residential care are often separated from their families so it is essential that they experience quality care and support when living away from home. Children's lives are about play, recreation and education. Services should understand the world from the perspective of the child, and provide the appropriate social, psychological and health supports to promote the child's welfare and quality of life. Services also support children with disabilities for the transition to adulthood and adult services.

Child-centred services promote the optimum participation of children and listen to what children have to say. Where children have difficulties in communicating their wishes or making informed decisions, they have access to an advocate to represent their views and act in their best interests.



## Standard 1.1

**The rights and diversity of each child are respected and promoted.**

### **Features to meet the requirements of this standard include:**

- 1.1.1 The rights of children with disabilities as enshrined in the UN Convention on the Rights of People with Disabilities, UN Convention on the Rights of the Child, and in Irish law are promoted and protected.
- 1.1.2 Children are informed of their rights and supported in exercising their rights.
- 1.1.3 Children are treated with dignity and respect, their equality is promoted and the residential centre respects their age, gender, sexual orientation, disability, race, religious beliefs and membership of an ethnic group or Traveller community.
- 1.1.4 The views of children are listened to with care and respect. Their views are taken into account in all decisions about their lives and care in accordance with their age, ability, stage of development and individual needs.
- 1.1.5 Children are facilitated in accessing advocacy services, legal representation and court personnel, where appropriate. They are well informed, supported and receive information about their rights.

## Standard 1.2

**The privacy and dignity of each child are respected.**

### **Features to meet the requirements of this standard include:**

- 1.2.1 Privacy and dignity is respected through maintaining appropriate boundaries, in line with the provision of safety and security.
- 1.2.2 Children have age-appropriate opportunities to be alone, as long as they are safe. Any limits to the privacy of each child are clearly explained.
- 1.2.3 Personal care is provided in a sensitive manner to uphold the privacy and dignity of each child.
- 1.2.4 Personal possessions are respected. The importance of particular items of significance is recognised and any personal belongings are retained.
- 1.2.5 Staff working in residential centres respect the privacy and dignity of children.

## Standard 1.3

### Each child exercises choice and experiences care and support in everyday life.

#### Features to meet the requirements of this standard include:

- 1.3.1 Children are supported to exercise choice across a range of daily activities.
- 1.3.2 Children have opportunities to participate in and contribute to their daily lives in an age and developmentally appropriate manner.
- 1.3.3 Children have opportunities for new experiences, to discover and develop their talents and to acquire the skills needed for adulthood and independence.
- 1.3.4 Daily routines in the residential centre reflect those that children might experience in everyday life and are varied to accommodate their needs and interests.
- 1.3.5 Children's preferences are taken into account and given due consideration.
- 1.3.6 Social, religious and cultural beliefs and values are respected and valued in the everyday activities of the residential centre.
- 1.3.7 Dietary requirements and cultural and religious beliefs are taken into account in relation to mealtimes and food provided.
- 1.3.8 Special occasions and personal achievements are marked and celebrated.
- 1.3.9 Children have opportunities for play, recreation, travel and leisure.
- 1.3.10 Children are provided with opportunities to develop social and life skills and are encouraged and facilitated to develop hobbies and interests.
- 1.3.11 There are clear limits and boundaries that provide children with a safe base from which to explore their world and to take developmentally, age-appropriate risks.
- 1.3.12 Children receive a reasonable amount of pocket money, as appropriate to their age.
- 1.3.13 Staff understand the particular challenges experienced by children with disabilities and suitable arrangements are made to facilitate and encourage their autonomy and independence.

## Standard 1.4

### Each child develops and maintains relationships and links with family and the community.

#### Features to meet the requirements of this standard include:

- 1.4.1 The positive attachments children make before admission are promoted and maintained.
- 1.4.2 Children are encouraged to develop relationships with their peers with due regard to their age, capacity and protection.
- 1.4.3 Families and friends are welcomed by staff. Family members visit, participate in and are regularly involved in key events in the child's life.
- 1.4.4 Children's families participate in their care, unless there are clearly documented reasons why this cannot happen, subject to regular review.
- 1.4.5 Children are facilitated and encouraged to integrate into their communities. The centre is proactive in identifying and facilitating initiatives for participation in the wider community, developing friendships and involvement in local social, educational and community networks.

## Standard 1.5

**Each child has access to information, provided in an accessible format that takes account of their communication needs.**

### **Features to meet the requirements of this standard include:**

- 1.5.1 All information is in a format and medium that is appropriate to children's information and communication needs.
- 1.5.2 Assistance and support are provided to access information, to communicate with others through a variety of media, and to make contact with family, friends and other services.
- 1.5.3 Children are provided with an age-appropriate, accessible copy of these Standards and time is spent by the staff in explaining the standards to each child.
- 1.5.4 Children have access to an advocate to facilitate communication and information sharing.
- 1.5.5 Children are kept informed of and consulted about ongoing developments in the residential centre.
- 1.5.6 Personal information is shared in the best interests of the child and in line with legislative requirements.
- 1.5.7 Parental consent is obtained prior to sharing any sensitive information with children.

## Standard 1.6

**Each child participates in decision making, has access to an advocate and consent is obtained in accordance with legislation and current best practice guidelines.**

### Features to meet the requirements of this standard include:

- 1.6.1 Children have opportunities to participate in, and contribute to, daily life, in an age and developmentally appropriate manner.
- 1.6.2 Children are consulted about, and participate in, decisions about the care they receive and their views are actively and regularly sought by the residential centre.
- 1.6.3 Children are listened to with care and respect. Their views are taken into account in all decisions, in accordance with their age, ability and stage of development.
- 1.6.4 Children have access to an advocate to represent their views and facilitate decision making.
- 1.6.5 Advocates encourage and support children to express their views and, when appropriate, represent these views on behalf of children they represent.
- 1.6.6 Informed consent is obtained prior to any medical treatment or intervention, participation in research projects and the provision of personalised information to a third party. The procedure for obtaining consent is consistent with legislation, Health Service Executive (HSE) directives, the policy of the registered provider and any guidance issued by professional and regulatory bodies.
- 1.6.7 Where a child is legally capable of consenting to surgical, medical or dental treatment without parental involvement or consent<sup>¥</sup>, the child is encouraged to communicate with and involve their parents or guardians.
- 1.6.8 Staff understand the particular support needs of children with disabilities and facilitate an optimal level of consultation and participation.

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<sup>¥</sup> At time of going to press, section 23(1) of the Non-Fatal Offences Against the Person Act 1997 provides that persons over the age of 16 years can consent to surgical, medical or dental treatment without their parents' consent. Although beyond the scope of these Standards, centres are encouraged to be cognisant of this and any other legislation governing consent.

## Standard 1.7

**Each child's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.**

### **Features to meet the requirements of this standard include:**

- 1.7.1 Information on the complaints procedure is available and explained to children and their families, in an accessible and age-appropriate format.
- 1.7.2 Children are encouraged and supported to express any concerns safely and are reassured that there are no adverse consequences for raising an issue of concern, whether informally or through the formal complaints procedure.
- 1.7.3 Children have access to an advocate when making a complaint or concern.
- 1.7.4 There is a culture of openness and transparency that welcomes feedback, the raising of concerns and the making of suggestions and complaints. These are seen as a valuable source of information and are used to make improvements in the service provided.
- 1.7.5 Concerns are addressed immediately at local level and, where appropriate, without recourse to the formal complaints procedure.
- 1.7.6 There is a procedure for making formal complaints. This procedure is consistent with relevant legislation and regulations, HSE protocols and takes account of best practice guidelines. Children are given information about how to take complaints outside of the residential centre for resolution.
- 1.7.7 Staff are trained to understand behaviour that indicates an issue of concern or complaint that children with disabilities cannot communicate by other means. Such messages receive the same positive response as issues of concern and complaints raised by other means.

## Theme 2: Effective Services

Effective services ensure that the proper support mechanisms are in place to enable children with disabilities to lead a fulfilling life and develop into adulthood. Personal planning is central to supporting children in residential care and details the child's goals, needs and preferences and what supports need to be put in place by the service to ensure each child maximises his/her personal development. Each child's personal plan will change as circumstances and/or need for support changes.

Admission and discharge procedures for residential centres uphold the rights of children with disabilities and do not discriminate on admission or discharge. Children living in residential care receive optimum care and support and an equivalent level of service provision.

For many children living away from their families, the residential centre is their home. Each residential centre has its own special features and layout depending on the building and the needs of the children who live there. The design and layout of the physical environment helps to make sure that children can enjoy living in accessible, safe, comfortable and homely surroundings. Centres where children live invoke a sense of play, education and recreation and foster positive development of children.

Residential respite services are provided to children on a short- or long-term basis. An effective service endeavours to ensure that children who reside in the centre on a short-term basis receive equivalent care to those who live there long term.



## Standard 2.1

**Each child has a personal plan which details their needs and outlines the supports required to maximise their personal development.**

### Features to meet the requirements of this standard include:

- 2.1.1 The residential centre prepares a comprehensive personal plan for each child, in consultation with children and their families, and the multidisciplinary team. Personal plans are prepared before children come to live in the residential centre, or as soon as practicable after admission.
- 2.1.2 Children have a copy of their personal plan in an accessible format, in line with their age and stage of development.
- 2.1.3 Each child's personal plan is formally reviewed annually or more frequently if there is a change in needs or circumstances. The review of the personal plan is multidisciplinary and is conducted in a manner that ensures the maximum participation of children, their family and key worker.
- 2.1.4 The review of the personal plan assesses its effectiveness, takes into account changes in circumstances and new developments, and names those responsible for pursuing objectives in the plan within agreed timescales. The review process is recorded and the rationale for any changes is documented.
- 2.1.5 Where children decline to engage in the planning process, the person in charge ensures that arrangements are made to address their needs as identified in the assessment, and their aspirations and wishes insofar as these can be ascertained. A record is kept of all attempts to engage with children and their representatives in the planning process.
- 2.1.6 The person in charge appoints a key worker, whose primary responsibilities are to assist the child in developing their personal plan and to oversee its implementation. Other key professionals participate in the planning process as requested.

2.1.7 The content of each child's personal plan includes but is not limited to the:

- aims and objectives of the placement
- role of the family and the support services to be provided
- assessed needs and aspirations of the child including social, health and educational needs
- steps to be taken to maintain and enhance positive attachments, relationships and membership of the community
- roles and responsibilities of all individuals involved in the child's care and/or treatment.

## Standard 2.2

**The residential centre is homely and accessible and promotes the privacy, dignity and safety of each child.**

### Features to meet the requirements of this standard include:

- 2.2.1 The living environment is adapted to support children with disabilities. The premises are equipped, where required, with assistive technology, aids and appliances, including accessible information and communications technology, to promote the full capabilities of children living in the centre.
- 2.2.2 The living environment is stimulating and provides opportunities for rest, play and recreation.
- 2.2.3 The residential centre adheres to best practice in achieving and promoting accessibility. It regularly reviews its accessibility with reference to the service's stated purpose and function and carries out any required alterations to ensure it is accessible to all.
- 2.2.4 Where children share a campus or premises with adults, accommodation is provided separately.
- 2.2.5 Bedrooms are decorated in accordance with the child's wishes and in an age-appropriate manner.
- 2.2.6 All bedrooms are equipped with adequate and secure storage for personal belongings and furniture.
- 2.2.7 Children participate in choosing equipment and furniture for the residential centre.
- 2.2.8 Furnishings and facilities are homely and meet the needs of children with disabilities.
- 2.2.9 Baths, showers and toilets are of a sufficient number and standard and are adapted to meet the needs of children with disabilities.
- 2.2.10 Food preparation and dining areas and facilities are clean and suited to their purpose.

- 2.2.11 Access to appropriate and accessible indoor and outdoor recreational areas is provided in the centre. Outdoor spaces, which are part of the premises, are safe, secure and well maintained.
- 2.2.12 There is a policy on the use of closed circuit television (CCTV) that is informed by relevant legislation. Where CCTV systems are used, they do not intrude on privacy.
- 2.2.13 The physical environment is kept in good structural and decorative repair. Clear records of major repairs, capital works and maintenance works are kept.
- 2.2.14 The residential centre is maintained to a high standard of hygiene and is adequately lit, heated and ventilated.
- 2.2.15 The residential centre complies with the requirements of fire safety legislation, relevant building regulations and health and safety legislation. There is a safety statement in place.
- 2.2.16 The building and contents are insured and there is a valid insurance certificate or written confirmation of insurance cover.
- 2.2.17 All vehicles used to transport children with disabilities are roadworthy, regularly serviced, insured, equipped with appropriate safety equipment and driven by persons who are properly licensed and trained.
- 2.2.18 All equipment is purchased to appropriate and accessible standards and is maintained and operated in line with manufacturer's instructions and good practice.
- 2.2.19 There are procedures in place for the management of risks to health and safety.

## Standard 2.3

**Each child's admission and discharge is determined on the basis of fair and transparent criteria.**

### Features to meet the requirements of this standard include:

- 2.3.1 There is a written policy on admission, transition and leaving the residential centre that takes account of the rights of children with disabilities and is consistent with these Standards.
- 2.3.2 Admission and discharge to the residential centre is timely, determined on the basis of fair and transparent criteria and placements are based on written agreements with the registered provider.
- 2.3.3 The admission of children to the centre takes account of the needs and wishes of those already living in the residential centre.
- 2.3.4 Children are given the opportunity to visit the residential centre before they make a decision to stay there.
- 2.3.5 Opportunities are provided to children and their families to meet with a member of staff prior to admission, to discuss what the transition into the residential centre will mean and to discuss the application for admission.
- 2.3.6 Children are informed about key aspects of the services provided prior to their admission. In the case of emergency admissions, this is done as soon as possible after admission.
- 2.3.7 Following an emergency admission, children and their families are given time and information to help them plan for their future.
- 2.3.8 A contract with the registered provider, in an accessible format, is signed by the child's family or their representatives.
- 2.3.9 Children experience certainty, stability and wellbeing while residing in the residential centre.
- 2.3.10 The arrangements for the transition of any child to a new child care setting are carried out in consultation with children and their families and they occur in a timely manner with planned supports in place.

## Standard 2.4

**Children are actively supported in the transition from childhood to adulthood and are sufficiently prepared for and involved in the transfer to adult services.**

### **Features to meet the requirements of this standard include:**

- 2.4.1 Each child is helped to prepare for adulthood and has opportunities to learn life skills, to take developmentally appropriate risks and assume increasing levels of responsibility as they grow older.
- 2.4.2 Each child is prepared for transition to adult services and any transition to adult services is carried out in consultation with children and their families.
- 2.4.3 Transitions to adult services occur in a timely manner with planned supports in place.
- 2.4.4 Transitions to adult services ensure continuity in education and take account of training and employment needs, where appropriate.

## Standard 2.5

**Each child receives high quality, effective respite services.**

### **Features to meet the requirements of this standard include:**

- 2.5.1 Service providers providing respite services comply with the Standards and provide an equivalent level of service provision for children who require both short- and long-term respite stays.
- 2.5.2 Respite services are delivered in a way that promotes the participation of children in everyday activities.
- 2.5.3 Respite services have positive benefits for children giving them the opportunity to have enjoyable experiences and promote opportunities for play, leisure and recreation.
- 2.5.4 Respite services are designed so that each child is able to receive optimum care and support, as close to home as possible.
- 2.5.5 There is continuity between the care delivered to children in different settings and this is supported by systems for sharing relevant information in a timely way.

## Theme 3: Safe Services

Services promote the safety of children through the assessment of risk, learning from adverse events and the implementation of policies and procedures designed to protect children with disabilities. Children are in need of additional support to learn how to be safe as they develop and prepare for adulthood. Services need to recognise the particular vulnerability of children with disabilities and prioritise their safety and protection in the residential centre.

Safe services protect children from abuse and neglect and follow policy and procedure as outlined in *Children First: National Guidance for the Protection and Welfare of Children* (2011) when reporting any concerns of abuse and or neglect to the relevant authorities. Where children display behaviour that may indicate that they are putting their own safety and welfare and/or that of other children at risk, therapeutic interventions may be required to protect them. Written policies and procedures detail the strict conditions under which a restrictive procedure is assessed and used, staff are fully trained in all therapeutic interventions and all instances of use are recorded in the child's personal plan and their use is monitored on an ongoing basis.

Safe residential centres services are open, transparent and accountable. Learning from adverse events and serious incidents is shared internally with staff. The residential centre reports on adverse events and serious incidents in accordance with legislation, regulations and national policy.



## Standard 3.1

**Each child is protected from abuse and neglect and their safety and welfare is promoted.**

### Features to meet the requirements of this standard include:

- 3.1.1 There are policies and procedures for ensuring that children are protected from all forms of abuse and neglect, in line with Children First.
- 3.1.2 Risk assessment and management policies and procedures are in place for dealing with situations where safety may be compromised. The approach to risk management supports responsible risk taking that is appropriate to each child's age and capacity, as a means to enhancing their quality of life, competence and social skills.
- 3.1.3 Children are assisted and supported to develop the knowledge, self-awareness, understanding and skills needed for self-care and protection. Areas of vulnerability are identified and individual safeguards put in place.
- 3.1.4 All information and advice given to help children to care for and protect themselves is sensitive to age, gender and type of disability.
- 3.1.5 Staff work in partnership with children and families to promote the safety and wellbeing of children.
- 3.1.6 Children who require assistance with personal and intimate care are monitored to ensure that they are safeguarded.
- 3.1.7 Where there has been an allegation of abuse or neglect against a child, policies and procedures as outlined in Children First are followed.
- 3.1.8 Where a concern arises for a child's safety, the person in charge takes all reasonable and proportionate interim measures to protect them pending the outcome of any assessment or investigation.
- 3.1.9 There are clearly defined procedures, understood by all, for the resolution of allegations of abuse by staff that prioritises the safety of children and ensure that those against whom such allegations are made are treated fairly.
- 3.1.10 There is a designated person to act as a liaison with outside agencies and a resource person for staff members, carers or volunteers who have child protection concerns. The designated person is responsible for reporting allegations or suspicions of abuse and neglect to the HSE or to An Garda Síochána in accordance with national guidance.

## Standard 3.2

**Each child experiences care that assists them to manage their behaviour and supports their emotional wellbeing.**

### Features to meet the requirements of this standard include:

- 3.2.1 The residential centre has a written policy on the provision of emotional, behavioural and therapeutic support to children that promotes a positive approach to behaviour management and how specialist and therapeutic interventions are to be implemented.
- 3.2.2 Communications are clear, appropriate and positive to help children understand their own behaviour and how to behave in a manner that is respectful of the rights of others and supports their own growth and development.
- 3.2.3 Specialist and/or therapeutic interventions are implemented in accordance with national policy and guidelines and with the informed consent of children and their families or persons acting on their behalf.
- 3.2.4 Children are consulted with and given an explanation regarding all rules, boundaries and the effects of inappropriate behaviour, in a manner consistent with their age and stage of development.
- 3.2.5 There is a positive approach to behaviour management that is tailored to meet the needs of each child and is appropriate to their age, stage of development and disability.
- 3.2.6 Where a child has ongoing difficulty in managing their behaviour, an appropriate intervention plan is agreed and implemented, in line with evidence-based practice guidelines. The intervention is reviewed as part of the personal planning and review process.
- 3.2.7 Staff in the residential centre are:
  - trained in the provision of emotional, behavioural and therapeutic support to children
  - trained to deal with issues of disrupted attachment, neglect and abuse and how this can impact on the behaviour of children
  - to understand and to respond to behaviour or communication difficulties that may indicate an issue of concern
  - given all relevant information required to assist them in supporting children to manage their behaviour.

3.2.8 Staff have access to specialist advice and appropriate support when looking after children who present with behaviour that is difficult to manage. Such support includes:

- interventions designed to promote good communication
- guidelines for appropriate responses to particular situations
- access to advice/consultation outside of normal working hours.

3.2.9 The residential centre regularly monitors and audits the centre's approach to the management of behaviour, as outlined in the service's policy.

## Standard 3.3

**Children are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.**

### Features to meet the requirements of this standard include:

- 3.3.1 Residential centres limit the use of restrictive procedures and these procedures are only used as an emergency intervention, after having been assessed as being required, in line with the residential centre's policy.
- 3.3.2 Each residential centre has a policy for dealing with situations that involve a risk to safety. It takes account of, and is formulated in strict adherence to, international human rights instruments, legislation, regulation, national policy and evidence-based practice guidelines.
- 3.3.3 There is a written policy on physical intervention, restraint and all use of physical intervention and restraint is in accordance with the policy.
- 3.3.4 The policy reflects evidence-based practice in relation to the use of all forms of physical intervention and restraint.
- 3.3.5 A requirement to adhere to the residential centre's policy on dealing with situations that involve a risk to safety is included in the code of conduct for professional staff of residential centres.
- 3.3.6 Each instance of the use of a restrictive procedure, insofar as possible, is properly sanctioned in advance by persons at an appropriate level of management and all uses of restraint are notified to the relevant personnel.
- 3.3.7 All incidents of restrictive procedures are reported and reviewed by senior management in the residential centre.
- 3.3.8 The use of physical intervention and restraint is recorded in the child's personal plan and each use is monitored on an ongoing basis.
- 3.3.9 A debrief is carried out following the use of a restrictive procedure with each child, their family and/or advocate and relevant staff members to review the use of the intervention on the child and record the learning.

3.3.10 Staff in the residential centre are:

- trained in the use of restraint techniques and only use approved and agreed techniques
- trained in conciliation and de-escalation to reduce the likelihood of violence and the need for physical intervention and restraint.

3.3.11 The residential centre regularly monitors and audits the centre's approach to the restrictive procedures, as outlined in the service's policy.

## Standard 3.4

**Adverse events and incidents are managed and reviewed in a timely manner and outcomes inform practice at all levels.**

### Features to meet the requirements of this Standard include:

- 3.4.1 There are policies and procedures for the management, review and evaluation of adverse events and incidents.
- 3.4.2 Adverse events and incidents are notified to the Health Information and Quality Authority in the required format and within the specified timeframe in accordance with the regulations.
- 3.4.3 The residential centre ensures the prompt and effective dissemination of the recommendations and learning from the management and review of adverse events and incidents.
- 3.4.4 The learning from the evaluation of all adverse events and incident reviews is communicated in the residential centre. The lessons learned are used to inform the development of best practice and improve service provision.
- 3.4.5 Serious incidents\* relating to children are notified to the Health Information and Quality Authority in the required format and within the specified timeframe.

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\* Serious incidents include deaths. A full definition of serious incidents is given in the Glossary of Terms at the end of this document.

## Theme 4: Health and Development

Prioritising the health and development of children is essential for growth, positive social relationships and community integration. Health, educational development, physical and cognitive attainment, social and emotional development and relationships with family and community are all important factors in a child's development.

Services should constantly look for ways and opportunities to enhance the health and development of children. Good health and development can be achieved by improving the quality of children's lives through the provision of accessible services based on need, early intervention and by narrowing the gap in education and health outcomes for children with disabilities.

Many children with disabilities take medications to support and improve their health conditions. A large number of children are able to manage and take their medications independently. Others require some form of assistance or support.

Medication management covers a number of tasks including assessing, prescribing, dispensing, administering, reviewing and assisting children with their medications. Residential centres have an overall responsibility to ensure that children receive effective and safe support to manage their medications when such assistance is required. Policies and procedures, which outline the parameters of the assistance that can be provided, should be in place to support this.

It is important that children, their families and residential services all work together to promote and improve child wellbeing. Residential centres can enhance the care and support children receive and improve overall quality of life for children living away from home.

## Standard 4.1

**The health and development of each child is promoted and improved.**

### **Features to meet the requirements of this Standard include:**

- 4.1.1 Services develop and deliver initiatives to promote health and development, in line with the centre's objectives and in consultation with children.
- 4.1.2 Services cooperate with other service providers and other statutory and non-statutory agencies to promote the health and development of children.
- 4.1.3 Children have timely access to screening, early detection and the full range of health and welfare services in the community.



## Standard 4.2

**Each child receives a health assessment and is given appropriate support to meet any identified need.**

### Features to meet the requirements of this standard include:

- 4.2.1 Children have access to a general practitioner (GP) or suitably qualified medical practitioner.
- 4.2.2 Children receive a timely, comprehensive multidisciplinary assessment of their health needs, which is regularly updated and reviewed.
- 4.2.3 The multidisciplinary assessment is based on consultation with the child and their family. Assessment goals are shared, and regularly reviewed and revised.
- 4.2.4 If the assessment indicates that the child's needs cannot be met within the scope of the residential centre, the child and their family are consulted to make the necessary arrangements for a transfer to an appropriate service.
- 4.2.5 Where children require a mental health service or other allied health professional service, it is provided in an appropriate setting that involves the least disruption to their daily life and maximises the opportunities for continuity of treatment.
- 4.2.6 The person in charge promotes good communication between the health and social care professionals involved in the support and treatment of children. The assessment and planning processes are used to bring direction, coordination and coherence where children undergo multiple and diverse health and social care interventions.
- 4.2.7 Independent assessments of need are facilitated in accordance with the terms of the Disability Act 2005.<sup>#</sup>
- 4.2.8 Children with life-threatening or life-limiting conditions and their families receive care and support, which meets their physical, emotional, social and spiritual needs and respects their dignity.
- 4.2.9 Health and wellbeing is promoted and supported through diet, nutrition, recreation, exercise and physical activities.

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<sup>#</sup> At the time of going to print, the right to an assessment of need under the Disability Act 2005 applies only to children aged 0-5 years born after 1 June 2005.

## Standard 4.3

**Each child's health is supported by the residential centre's policies and procedures for medication management.**

### Features to meet the requirements of this standard include:

- 4.3.1 The residential centre has medication management policies and procedures in place that comply with legislative and professional regulatory requirements and best practice guidelines.<sup>+</sup> They ensure that medication is never administered other than for medical reasons and as prescribed by a medical practitioner legally authorised to do so. Records are kept to account for all medicines.
- 4.3.2 Staff adhere to procedures for the safe administration of medication, for the prescription, supply, receipt, self-administration by children, recording, storage, handling, and disposal of medicines that accord with legislation and professional regulatory requirements or guidance.
- 4.3.3 All medicines, including scheduled controlled drugs (except those for self-medication) are administered by a registered nurse or medical practitioner.
- 4.3.4 Children's medication is prescribed and administered according to best practice as individually clinically indicated to increase the quality of each child's life.
- 4.3.5 Following a risk assessment and assessment of capacity, children are encouraged to take responsibility for their own medication, in line with their age, capacity and wishes.

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<sup>+</sup> Nursing staff adhere to the Code of Professional Conduct for each Nurse and Midwife (An Bord Altranais, 2000), the Nurse Prescribing Regulations, the Guidance to Nurses and Midwives on Medication Management (2007) (An Bord Altranais), the Health Act 2007 and any subsequent revisions to the above and any other subsequent legislation or guidance including the HSE Dispose of Unused Medicines Properly Campaign for Disposal of Medicinal Products.

- 4.3.6 Staff actively promote children's understanding of their health needs relating to medication. Children and their families are advised, as appropriate, about the side effects of prescribed medicines and are given access if they request it, to information leaflets provided with medicines. Children and their families are afforded the opportunity to consult the pharmacist or other appropriate independent healthcare professional about medicines prescribed as appropriate.
- 4.3.7 Medication is reviewed at regular specified intervals as documented in the personal plan. Special consideration is given to the use of: antipsychotic medication, sedative medication, anticonvulsant medication, medication for the management of depression, analgesic medications and different medications and their potential interactions.
- 4.3.8 All medication errors, suspected adverse reactions and incidents are recorded, reported and analysed within an open culture of reporting. Learning is fed back to improve children's safety and to prevent reoccurrence.

## Standard 4.4

**Educational opportunities are provided to each child to maximise their individual strengths and abilities.**

### **Features to meet the requirements of this standard include:**

- 4.4.1 The residential centre has an education policy that sets out how it promotes and actively supports educational attainment.
- 4.4.2 The residential centre complies with relevant legislation in respect of education needs for children with disabilities.
- 4.4.3 Residential centres link with education authorities and local education providers in order to ensure that the particular needs of each child is assessed and addressed.
- 4.4.4 Continuity of education and minimising school changes for children is taken into account by residential centres and given a high priority.
- 4.4.5 When children enter residential care, their assessment includes appropriate and achievable educational attainment targets and the supports necessary for their achievement are put in place.
- 4.4.5 Comprehensive records are maintained of each child's educational history including schools attended, reports obtained, certificates awarded, assessment reports and any remedial assistance provided.
- 4.4.6 Children are given additional support and appropriate assistance when managing transitions such as changing school or entering a higher level of education/training.
- 4.4.7 Children approaching school-leaving age are actively encouraged and supported by the service to participate in third-level education or vocational training programmes as appropriate to their abilities, interests and aspirations.

## Theme 5: Leadership, Governance and Management

Effective governance in residential centres for children with disabilities is guided by provisions made in Irish and European legislation and national policy documents. It is accomplished by directing and managing activities using good business practices, objectivity, accountability and integrity.

In an effective governance structure, overall accountability for the delivery of services is clearly defined and there are clear lines of accountability at individual, team and service levels so that all individuals working in the service are aware of their responsibilities and who they are accountable to.

The statement of purpose for the residential centre promotes transparency and responsiveness by accurately describing its aims and objectives, the services provided, including how and where they are provided. Governance systems ensure that service delivery is safe and effective through the ongoing audit and monitoring of its performance.

Effective leadership and management ensure that a service fulfils its statement of purpose and achieves its objectives. The deployment of necessary resources through informed decisions and actions facilitates the delivery of effective and safe residential care to children.

The effectiveness of residential care sourced externally is monitored through formalised agreements. The safety of residential care provided by service providers on behalf of the State is assured through the monitoring of compliance with legislation and acting on national policy, standards and recommendations.

## Standard 5.1

**The residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each child and promote their welfare.**

### **Features to meet the requirements of this standard include:**

- 5.1.1 Staff demonstrate a knowledge of the relevant legislation, regulations, policies and standards for the care and welfare of children with disabilities, appropriate to their role, and this is reflected in all aspects of their practice.
- 5.1.2 Appropriate action is taken on requirements made by regulatory bodies to comply with regulations.
- 5.1.3 Appropriate action is taken on recommendations made following an investigation into the residential centre.
- 5.1.4 New and existing legislation and national policy is reviewed on a regular basis to determine what is relevant to the residential centre, how it impacts on practice and to address any gaps in compliance.

## Standard 5.2

**The residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability.**

### Features to meet the requirements of this standard include:

- 5.2.1 The residential centre has clearly defined accessible governance arrangements and structures that set out the lines of authority and accountability, stipulate individual accountability and specify roles and responsibilities.
- 5.2.2 The residential centre is registered in accordance with statutory requirements.
- 5.2.3 The registered provider, the person in charge and all other persons involved in the management of the residential centre are fit persons.
- 5.2.4 There is an internal management structure appropriate to the size, ethos and purpose and function of the residential centre.
- 5.2.5 Leadership is demonstrated by management at all levels and there is a commitment to continuous improvements in the residential centre.
- 5.2.6 Leaders demonstrate that they understand the needs of children with disabilities in receipt of their services. They direct sufficient resources to services for the care and welfare of children.
- 5.2.7 Strategic and operational plans for the residential centre set clear objectives and plans for the delivery of safe and quality care. Strategic and operational plans are implemented.
- 5.2.8 There are management arrangements in place to achieve planned service objectives effectively and efficiently.
- 5.2.9 Information governance arrangements are in place to ensure that the residential centre complies with legislation and regulations, uses information ethically and uses best available evidence to protect personal information and to support the provision of residential care for children.
- 5.2.10 The residential centre is monitored and evaluated annually against strategic objectives and action is taken to bring about improvements in work practices and to achieve better outcomes for children.
- 5.2.11 Regular audits are carried out to assess, evaluate and improve the provision of services in a systematic way in order to achieve better outcomes for children.

- 5.2.12 There is an established risk management framework and supporting structures in place for the identification, assessment and management of risk.
- 5.2.13 There are systems in place to effectively manage risk, including a designated person(s) to contact in an emergency.
- 5.2.14 Records are maintained to monitor complaints, concerns and adverse events. Details are taken of any investigations and related actions, to help ensure complaints, concerns and adverse events are addressed appropriately, trends are detected and learning takes place.



## Standard 5.3

**The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.**

### Features to meet the requirements of this standard include:

- 5.3.1 There is a statement of purpose for the residential centre which clearly describes the model of care and support delivered in the centre.
- 5.3.2 The statement of purpose for the residential centre details:
  - the aims, objectives and ethos of the service
  - the number of people who can be accommodated in the centre together with details of the type(s) and levels of care and support that can be provided
  - the range of services and any specialised facilities provided
  - the terms and conditions of the contract of care or other similar agreement
  - the physical layout and extent of the premises
  - a list of key policies that inform practice in the residential centre.
- 5.3.3 The day-to-day operation of the residential centre reflects the statement of purpose and it is reviewed regularly and updated when necessary.
- 5.3.4 The statement of purpose is publicly available and communicated to children and their families, in an accessible format.
- 5.3.5 The review and evaluation of the statement of purpose is incorporated in the service's governance arrangements to provide assurance that services are being delivered within the scope of the statement of purpose.

## Standard 5.4

**The residential centre has appropriate service level agreements, contracts and/or other similar arrangements in place with the funding body or bodies.**

### **Features to meet the requirements of this standard include:**

- 5.4.1 Formal service level agreements, contracts or similar arrangements clearly define the relationship, role and responsibilities of both service provider and funding body.
- 5.4.2 The service level agreement, contract or similar arrangement clearly specifies the nature, quality, quantum and outcome of the service to be delivered by the residential centre and what level of funding is being provided.
- 5.4.3 The service level agreement, contract or similar arrangements defines the reporting, monitoring, review and oversight arrangements in place between the service provider and the funding body including expectations as regards compliance with relevant legislation, national policy and relevant quality standards, systems and measures.

## Theme 6: Use of Resources

The effective management and use of available financial and human resources is fundamental to delivering safe and effective residential care that meet the needs of children with disabilities.

A well-run residential centre uses resources effectively and seeks opportunities to provide an improved service, which achieves better outcomes for children. Resource decisions take account of the needs of children and the levels of demand on the service. Staff who make decisions on the use of resources are accountable for the decisions made and ensure these decisions are well informed.

## **Standard 6.1**

**The use of available resources is planned and managed to provide effective residential care to children.**

### **Features to meet the requirements of this standard include:**

- 6.1.1 The residential centre demonstrates an understanding of the levels of need within the service to inform the planning and allocation of resources.
- 6.1.2 There are clear plans that take account of the funding and resources available to ensure the provision of high quality, safe and effective residential care for children with disabilities.
- 6.1.3 Resources are effectively deployed to meet the needs and aspirations of children and their families using the service.
- 6.1.4 The residential centre demonstrates transparent and effective decision making when planning, procuring and managing the use of resources.

## Theme 7: Workforce

Each staff member has a key role to play in delivering effective and safe residential care and support to children. Residential centres organise and manage their workforce to ensure that staff have the required skills, experience and competencies to provide a safe and effective service.

Safe recruitment practices ensure that staff have the required skills, competencies and experience to undertake duties associated with their roles and responsibilities. All staff receive support and supervision to ensure that they perform their job to the best of their ability. The performance of staff is appraised at regular specified intervals.

Staff are registered with their professional body where relevant (for example, nurses are registered with An Bord Altranais) to assure the public that they are competent to deliver safe services to children.

Providing residential care to children with disabilities can be complex and demanding for the staff involved. The residential centre should protect its workforce from the risk of work-related stress, bullying and harassment and listen and respond to their views.

As aspects of service provision change and develop over time, the service supports staff to continuously update and maintain their knowledge and skills. The training needs of the workforce are monitored on an ongoing basis and identified training needs are addressed to ensure the delivery of high quality, safe and effective residential care for children with disabilities.

All staff receive specific training in the protection of vulnerable children to ensure that they are well equipped with the knowledge and skills to recognise the signs of abuse and/or neglect and the action(s) required to protect children from significant harm.

## Standard 7.1

**Safe and effective recruitment practices are in place to recruit staff.**

### Features to meet the requirements of this standard include:

- 7.1.1 Staff are recruited in compliance with employment and equality legislation and recruitment and selection processes are informed by evidence-based human resource practices.
- 7.1.2 The registered provider identifies the skills, competencies and personal attributes required of staff and recruits accordingly.
- 7.1.3 Garda Síochána vetting is carried out on staff and volunteers with direct access to children. References are checked before they start working in the residential centre.
- 7.1.4 All staff have written job descriptions and a copy of their terms and conditions of employment prior to taking up post.
- 7.1.5 A contemporaneous, accurate and secure personnel file is kept for all staff.
- 7.1.6 Orientation and induction training is provided to all staff when they start working in the centre.
- 7.1.7 There is a written code of conduct for all staff. All staff also adhere to the codes of conduct of their own professional body/association and/or professional regulatory body.

## Standard 7.2

**Staff have the required competencies to manage and deliver effective services to children.**

### Features to meet the requirements of this standard include:

- 7.2.1 At all times there are sufficient numbers of staff with the necessary experience and competencies to meet the needs of the children in the centre and which reflect the size, layout and purpose of the centre.
- 7.2.2 At all times there are sufficient staff available to ensure the safety of children. Contingency plans are in place in the event of a shortfall in staffing levels.
- 7.2.3 There is continuity of staffing so that attachments are not disrupted. The continuity of support and the maintenance of relationships are promoted through:
- strategies for the retention of staff
  - ensuring sufficient staffing levels to avoid excessive use of casual, short-term, temporary and agency workers.
- 7.2.4 Staff have the necessary skills to provide care and support to children with disabilities and are registered with the relevant professional statutory body in compliance with legislation.
- 7.2.5 Key workers have the skills required to plan and coordinate care and supports and to liaise effectively with other organisations and professionals.
- 7.2.6 The residential centre has competent managers with appropriate qualification/s and sufficient practice and management experience to manage the residential centre and meet its stated purpose, aims and objectives.

## Standard 7.3

**Staff are supported and supervised to carry out their duties to promote and protect the care and welfare of children.**

### Features to meet the requirements of this standard include:

- 7.3.1 Staff understand their roles and responsibilities, have clear accountability and reporting lines and are aware of policies and procedures to be followed at all times.
- 7.3.2 Staff are supported to effectively exercise their personal, professional and collective accountability for the provision of effective and safe care and support to children.
- 7.3.3 There are procedures to protect staff by minimising the risk of violence, bullying and harassment by other members of staff or persons in the residential centre.
- 7.3.4 Staff are provided with access to support and advice. Staff receive regular supervision and support by appropriately qualified and experienced staff.
- 7.3.5 Each individual staff member's performance is formally appraised, at least annually, by appropriate personnel.
- 7.3.6 A written record is kept of each supervision, support and performance appraisal and a copy is given to the member of staff. The record is signed by the supervisor and staff member at the end of each supervision, support and performance appraisal session and is available for inspection.
- 7.3.7 Staff are facilitated to make protected disclosures about the effectiveness and safety of the service in line with legislative requirements where appropriate.
- 7.3.8 Staff are provided with training and development opportunities that equip them with the necessary skills required to meet the needs of children with disabilities.
- 7.3.9 Accredited management training is provided to all new managers who manage front-line staff.
- 7.3.10 Managers who supervise staff are provided with training in supervision theory and practice.



## Standard 7.4

### Training is provided to staff to improve the outcomes for children.

#### Features to meet the requirements of this standard include:

- 7.4.1 All staff are trained to provide care and support to children with disabilities in residential care.
- 7.4.2 A training needs analysis is periodically undertaken with all staff and relevant training is provided as part of a continuous professional development programme.
- 7.4.3 There is a training and development programme to ensure that staff maintain competence in all relevant areas.
- 7.4.4 All staff receive ongoing training in the prevention, detection and reporting of child abuse and their requirement to report abuse, as outlined in legislation and national policies, including Children First.
- 7.4.5 The person in charge ensures that staff and children actively participate in health and safety education and training programmes.

## Theme 8: Use of Information

Quality information and effective information systems are central to improving the quality of residential care for children. Quality information, which is accurate, valid and reliable, is an important resource for service providers in planning, managing, delivering and monitoring residential services.

To effectively use the multiple sources of information available, service providers have systems, including information and communications technology, to ensure the collection and reporting of quality information within the context of effective arrangements for information governance.

Information governance refers to the systems and processes that service providers have in place to manage information to support their immediate and future regulatory, legal, risk, environmental and operational requirements. An information governance framework enables services to ensure all information including personal information is handled securely, efficiently, effectively and in line with legislation. This supports the delivery of child-centred, safe and effective care to children.

## Standard 8.1

**Information is used to plan and deliver safe and effective residential care and support.**

### **Features to meet the requirements of this standard include:**

- 8.1.1 Information governance arrangements are in place to ensure that the service complies with legislation, uses information ethically, and uses best available evidence to protect personal information and support the provision of safe and effective residential care and support.
- 8.1.2 There is a robust and secure system for managing information to support the delivery of safe and effective residential care and support.
- 8.1.3 Information is collated, managed and shared to support effective decision making, in compliance with legislation.
- 8.1.4 A system is in place to gather information about the quality and safety of the service. This information is used to inform management decisions and to drive continuous improvements in service provision.

## Standard 8.2

**Secure record-keeping and file-management systems are in place to provide a safe and effective service.**

### **Features to meet the requirements of this standard include:**

- 8.2.1 Records required for the effective and efficient running of the residential centre are up to date, are of a high quality and are accurate at all times.
- 8.2.2 The centre holds a register (electronic or hard copy) in line with statutory requirements, which details the relevant information in respect of each child who resides in the centre.
- 8.2.3 Each child has a contemporaneous file that includes all records relating to their health and social care, in line with statutory requirements.
- 8.2.4 There is a policy for the retention and destruction of records in compliance with the Data Protection Acts, 1988 and 2003.
- 8.2.5 Any personal information is treated as confidential and held in accordance with legislative, regulatory and best practice requirements.

# Draft National Standards – for Adults with Disabilities



## Summary of Standards for Adults with Disabilities

### Theme 1: Person-centred Services

Standard 1:1	The rights and diversity of each person are respected and promoted.
Standard 1:2	The privacy and dignity of each person are respected.
Standard 1:3	Each person exercises choice and control in their daily life in accordance with their preferences.
Standard 1:4	Each person develops and maintains personal relationships and links with the community in accordance with their wishes.
Standard 1:5	Each person has access to information, provided in a format appropriate to their communication needs.
Standard 1:6	Each person participates in decision making, has access to an advocate and consent is obtained in accordance with legislation and current best practice guidelines.
Standard 1:7	Each person's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.

### Theme 2: Effective Services

Standard 2:1	Each person has a personal plan which details their needs and outlines the supports required to maximise their personal development, in accordance with their wishes.
Standard 2:2	The residential centre is homely and accessible and promotes the privacy, dignity and welfare of each person.
Standard 2:3	Each person's admission and discharge is determined on the basis of fair and transparent criteria.
Standard 2:4	Young adults are supported following the transition from children's centres to adults' centres.
Standard 2:5	Each person receives high quality, effective respite services.

### Theme 3: Safe Services

Standard 3:1	Each person is protected from abuse and neglect and their safety and welfare is promoted.
Standard 3:2	Each person experiences care that assists them to manage their behaviour and supports their emotional wellbeing.
Standard 3:3	People living in the residential centre are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.
Standard 3:4	Adverse events and incidents are managed and reviewed in a timely manner and outcomes inform practice at all levels.

### Theme 4: Health and Development

Standard 4:1	The health and development of each person is promoted and improved.
Standard 4:2	Each person receives a health assessment and is given appropriate support to meet any identified need.
Standard 4:3	Each person's health is supported by the residential centre's policies and procedures for medication management.
Standard 4:4	Educational, training and employment opportunities are made available to each person that promotes their strengths, abilities and individual preferences.

### Theme 5: Leadership, Governance and Management

Standard 5:1	The residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each person and promote their welfare.
Standard 5:2	The residential centre has effective leadership, governance and management arrangements in place and clear lines of accountability.
Standard 5:3	The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.
Standard 5:4	The residential centre has appropriate service level agreements, contracts and/or other similar arrangements in place with the funding body or bodies.

## Theme 6: Use of Resources

Standard 6:1	The use of available resources is planned and managed to provide effective residential care to people living in the residential centre.
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## Theme 7: Workforce

Standard 7:1	Safe and effective recruitment practices are in place to recruit staff.
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Standard 7:2	Staff have the required competencies to manage and deliver effective services to people living in the residential centre.
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Standard 7:3	Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of people living in the residential centre.
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Standard 7:4	Training is provided to staff to improve outcomes for people living in the residential centre.
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## Theme 8: Use of Information

Standard 8:1	Information is used to plan and deliver safe and effective residential care and support.
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Standard 8:2	Secure record-keeping and file-management systems are in place to provide a safe and effective service.
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## Theme 1: Person-centred Services

Person-centred services provide the right support at the right time to enable people with disabilities to lead their lives in as fulfilling a way as possible. A person-centred approach to service provision is one where services are planned and delivered with the active involvement of people who use services.

The experience of person-centred services is more than just an individualistic approach to care provision and requires all aspects of service provision to work together to support people with disabilities. Service providers are able to understand the world from the perspective of the person with a disability, and provide the appropriate social, psychological and health supports to promote the welfare and quality of life of people with disabilities. Services supporting people with disabilities have an individualised approach, which recognises the uniqueness of the individual person.

People living in residential care are actively involved in their own care and are empowered to exercise their rights including the right to be treated equally in the allocation of services and supports, the right to refuse a service or some element of a service, and to exit a particular service in favour of another one or in order to live independently. People make their own choices, participate in the running of the services and contribute to the life of the community, in accordance with their wishes.

Where people have difficulties in communicating their wishes or making informed decisions, there is an obligation on service providers to work in close collaboration with the person's representative who will ascertain the person's wishes and facilitate them in achieving a desired outcome.

## Standard 1.1

**The rights and diversity of each person are respected and promoted.**

### Features to meet the requirements of this standard include:

- 1.1.1 The rights of people with disabilities as enshrined in the UN Convention on the Rights of People with Disabilities and in Irish law are promoted and protected.
- 1.1.2 Each person is:
- informed of their rights
  - supported in understanding their rights
  - facilitated in exercising their rights
  - facilitated to participate in the political process by voting and by seeking public office if they so wish
  - take responsibility for their own financial affairs
  - support in making a will, where they wish to do so.
- 1.1.3 People are treated with dignity and respect, their equality is promoted and the residential centre respects their age, gender, sexual orientation, disability, race, religious beliefs and membership of an ethnic group or Traveller community.
- 1.1.4 Each person has the right to recognition as persons before the law and to any support they may require in exercising their legal capacity.
- 1.1.5 People are facilitated in accessing advocacy services and are well-informed, supported and receive information about their rights.
- 1.1.6 People are given appropriate assistance to engage in legal proceedings, and are encouraged to access legal advice and representation in any forum where their rights are being determined or when any criminal charge is made against them.

## Standard 1.2

### The privacy and dignity of each person are respected.

#### Features to meet the requirements of this standard include:

- 1.2.1 Each person has an area of personal space that comprises their own person, possessions, thoughts and feelings that no other person enters, uses or intrudes upon without their expressed permission.
- 1.2.2 Each person has their own bedrooms unless they wish to share. A person's room is not made available to other individuals in need of respite or short-term care.
- 1.2.3 Personal possessions are respected. The importance of particular items of significance is recognised and any personal belongings are retained.
- 1.2.4 People have opportunities to be alone, with due regard to their safety. Privacy and dignity are respected at all times, and particularly in relation to:
  - receiving visitors
  - personal communications
  - expressions of intimacy and sexuality
  - consultations with social care and other professionals
  - examinations by healthcare professionals
  - the provision of intimate and personal care and support
  - circumstances where confidential and/or sensitive information is being discussed
  - entering bedrooms, toilets and bathrooms.
- 1.2.5 Each person's preferences in relation to personal appearance are respected.
- 1.2.6 People receive support at times of illness and at the end of their lives which meets their physical, emotional, social and spiritual needs and respects their dignity, autonomy and wishes.
- 1.2.7 People receive accurate and timely information and appropriate support to deal with critical events in their lives such as loss and bereavement.
- 1.2.8 People receive enhanced support at times of acute distress in a manner that takes account of their particular needs and preferences.
- 1.2.9 Staff and managers consult with people living in the residential centre in relation to the business of the centre where it has implications for their privacy and sense of home.

- 1.2.10 Staff understand the needs of people with disabilities and demonstrate respect for their privacy and dignity by the manner in which they relate to them.
- 1.2.11 Staff treat all people equally. Different levels of support are provided only in accordance with the needs and preferences of each person.

## Standard 1.3

**Each person exercises choice and control in their daily life in accordance with their preferences.**

### Features to meet the requirements of this standard include:

- 1.3.1 People living in the residential centre are encouraged to exercise choice and control across a range of daily activities.
- 1.3.2 A sensible balance is made available regarding everyday events and activities, between the choices people make and reasonable risks they want to take and their safety.
- 1.3.3 Each person works out a structure to their daily lives that best reflects their goals, activities and needs and are assisted in doing so, if required.
- 1.3.4 The everyday activities of the residential service vary according to people's interests and activities. They take account of different levels of functioning and ability and of each person's personal plan. People:
  - contribute ideas to, and participate in, the day-to-day activities of the centre
  - participate in residential committees and fora
  - are represented in whatever forum is used to discuss and plan the future direction of the centre.
- 1.3.5 The activities of daily living, including mealtimes, provide opportunities for social interaction. Social, religious and cultural beliefs and values are respected and valued in the everyday activities of the residential service.
- 1.3.6 Each person's preferences, their dietary requirements and cultural and religious beliefs, are taken into account in relation to mealtimes and food provided.
- 1.3.7 Each person is supported to buy, prepare and cook their own meals if they so wish.
- 1.3.8 Each person is supported to go out if they choose, but are not required to do so.
- 1.3.9 A person's right to opt out of communal activities is respected and reasonable alternatives are available.

- 1.3.10 Staff understand the particular challenges experienced by people with disabilities and suitable arrangements are made to facilitate and encourage their autonomy and independence.
- 1.3.11 The everyday activities of the residential centre vary according to individual interests and activities. They take account of different levels of functioning and the ability of people residing there.
- 1.3.12 Each person has opportunities for recreation, travel and leisure.

## Standard 1.4

**Each person develops and maintains personal relationships and links with the community in accordance with their wishes.**

### **Features to meet the requirements of this standard include:**

- 1.4.1 People living in the residential centre are facilitated to develop and maintain personal relationships in accordance with their wishes.
- 1.4.2 People are facilitated and encouraged to integrate into their communities. The centre is proactive in identifying and facilitating initiatives for participation in the wider community, developing friendships and involvement in local social, educational and professional networks.
- 1.4.3 Families and friends are welcomed by staff. Family members visit, participate in and are regularly involved in key events in the person's life, in accordance with the person's wishes.
- 1.4.4 Equipment and communication tools are provided to facilitate contact with family and friends.
- 1.4.5 People are supported to develop intimate relationships with significant others.

## Standard 1.5

**Each person has access to information, provided in a format appropriate to their communication needs.**

### Features to meet the requirements of this standard include:

- 1.5.1 All information is in a format and medium that is appropriate to the information and communication needs of people living in the residential centre.
- 1.5.2 Assistance and support are provided to access information, to communicate with others through a variety of media, and to make contact with family, friends and other services.
- 1.5.3 Information is provided at the earliest opportunity and as required thereafter to enable people to make choices and decisions.
- 1.5.4 Each person is provided with an accessible copy of these Standards and time is spent by staff in explaining the Standards to each person.
- 1.5.5 Each person has access to an advocate to facilitate communication and information sharing.
- 1.5.6 The person in charge ensures that people with disabilities are kept informed of and consulted about developments in the residential centre.
- 1.5.7 The person in charge ensures that people are informed of day-to-day arrangements in the residential centre, such as which staff are on duty and whether any arrangements are subject to change.
- 1.5.8 The person in charge ensures that each person is informed about what personal information is being maintained, who has access to this information, including other professionals and how they can access their personal information.



## Standard 1.6

**Each person participates in decision making, has access to an advocate and consent is obtained in accordance with legislation and current best practice guidelines.**

### **Features to meet the requirements of this standard include:**

- 1.6.1 People living in the residential centre are consulted about, and participate in, decisions about the care they receive and their views are actively and regularly sought by staff.
- 1.6.2 Each person is listened to with care and respect by staff. Their views are taken into account in all decisions, in accordance with their age, ability and stage of development.
- 1.6.3 Each person enjoys legal capacity on an equal basis with others in all aspects of life.
- 1.6.4 People living in the centre are given clear information in a format and language they can understand when any proposed action is being considered, in order to help them make informed choices and decisions.
- 1.6.5 Each person is facilitated to access citizens' information, advocacy services or an advocate of their choice when making decisions, in accordance with their wishes.
- 1.6.6 Any means of restricting the capacity of a person with a disability is free of any conflict of interest and undue influence, is proportional and tailored to the person's circumstances, applies for the shortest time possible, and is subject to regular review. Staff understand the particular support needs of people with disabilities and create circumstances to achieve their optimal level of consultation and participation.

## Standard 1.7

**Each person's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.**

### Features to meet the requirements of this standard include:

- 1.7.1 Information on the complaints procedure is available and explained to people living in the residential centre in an accessible and appropriate format.
- 1.7.2 Each person is encouraged and supported to express any concerns safely and is reassured that there are no adverse consequences for raising an issue of concern, whether informally or through the formal complaints procedure.
- 1.7.3 Each person has access to an advocate when making a complaint or concern.
- 1.7.4 There is a culture of openness and transparency that welcomes feedback, the raising of concerns and the making of suggestions and complaints. These are seen as a valuable source of information and are used to make improvements in the service provided.
- 1.7.5 Concerns are addressed immediately at local level and, where appropriate, without recourse to the formal complaints procedure, unless the person wishes otherwise.
- 1.7.6 There is a procedure for making formal complaints. This procedure is consistent with relevant legislation and regulations, HSE protocols and takes account of best practice guidelines. People are given information about how to take complaints outside of the residential centre for resolution.
- 1.7.7 Staff are trained to understand behaviour that indicates an issue of concern or complaint that a person with a disability cannot communicate by other means. Such messages receive the same positive response as issues of concern and complaints raised by other means.

## Theme 2: Effective Services

Effective services ensure that the proper support mechanisms are in place to enable people with disabilities to lead a fulfilling life. Personal planning is central to supporting people to identify their goals, needs and preferences and what supports need to be put in place by the service to ensure that each person maximises their personal development. Personal plans use holistic assessments which identify personal, health, social and educational goals, where appropriate. Actions in the personal plan encourage the person to take an active role in deciding what contributes to quality of life at the various stages of life. People can also expect that their personal plan will change as their circumstances and/or need for support changes.

People have the right to choose where they want to live, the place they want to call home. Admission and discharge procedures for residential centres uphold the rights of people and do not discriminate on admission or discharge.

For many people with disabilities, the residential centre is their home. Each residential centre has its own special features and layout depending on the building and the needs of the people who live there. The design and layout of the physical environment helps to make sure that people with disabilities can enjoy living in accessible, safe, comfortable and homely surroundings. Residential centres promote independence, recreation and leisure and enable an excellent quality of life for all who live there.

Residential respite services are provided to people on a short- or long-term basis. An effective service endeavours to ensure that people who reside in the centre on a short-term basis receive equivalent care to those who live there long term.

## Standard 2.1

**Each person has a personal plan which details their needs and outlines the supports required to maximise their personal development, in accordance with their wishes.**

### Features to meet the requirements of this standard include:

- 2.1.1 People living in the residential centre are consulted with and participate in the development of a comprehensive personal plan, in consultation with their families, the residential centre and the multidisciplinary team. The written personal plan is kept on the case file. Personal plans are prepared before people come to live in the residential centre, or as soon as practicable after admission.
- 2.1.2 Each person has a personal plan that outlines the services and supports to be provided to them to achieve a good quality of life and to realise their goals including:
- health services
  - education, life-long learning and employment support services
  - social services
  - transport services
  - assistive devices and technologies.
- 2.1.3 Each person's personal plan takes account of, and records:
- the person's wishes in relation to where he/she wants to live and with whom
  - the person's wishes in relation to managing transitions such as retirement
  - short- and longer-term aspirations.
  - and, where he/she wishes to give consideration to these matters:
    - the person's wishes in relation to end-of-life care
    - the person's wishes as to the distribution of their property
    - and personal effects after their death.
- 2.1.4 To ensure there is a single integrated plan, the personal plan takes account of:
- an assessment of the person's abilities, skills and needs, carried out with appropriate professional assistance, if required and requested
  - other specific plans such as health plans, risk management plans, intimate support plans.

- 2.1.5 Each person has a copy of their personal plan in an accessible format.
- 2.1.6 Each person's personal plan is formally reviewed annually or more frequently if there is a change in needs or circumstances. The review of the personal plan is multidisciplinary and is conducted in a manner that ensures the maximum participation of each person, their key worker and family.
- 2.1.7 The review of the personal plan assesses its effectiveness, takes into account changes in circumstances and new developments, and names those responsible for pursuing objectives in the plan within agreed timescales. The review process is recorded and the rationale for any changes is documented.
- 2.1.8 Where a person declines to engage in the planning process, the person in charge ensures that arrangements are made to address their needs as identified in the assessment, and their aspirations and wishes insofar as these can be ascertained. A record is kept of all attempts to engage people and their representatives in the planning process.
- 2.1.9 The person in charge appoints a key worker in agreement with each person and/or their representatives, whose primary responsibilities are to assist the person, in accordance with their wishes, in developing their personal plan and to oversee its implementation. Other key professionals participate in the planning process as requested.

## Standard 2.2

**The residential centre is homely and accessible and promotes the privacy, dignity and welfare of each person.**

### Features to meet the requirements of this standard include:

- 2.2.1 The living environment is adapted to promote the independence of people with disabilities. The premises are equipped, where required, with assistive technology, aids and appliances, including accessible information and communications technology, to promote the full capabilities of people living in the residential centre.
- 2.2.2 The living environment is stimulating and provides opportunities for rest and recreation.
- 2.2.3 The residential centre adheres to best practice in achieving and promoting accessibility. It regularly reviews its accessibility and the changing needs and interests of people using the service, in collaboration with those residing in residential centres and with reference to the service's stated purpose and function and carries out any required alterations to ensure it is accessible to all.
- 2.2.4 Where adults and children share a campus or premises, accommodation is provided separately.
- 2.2.5 Bedrooms are decorated in accordance with their wishes.
- 2.2.6 All bedrooms are equipped with adequate and secure storage for personal belongings and furniture.
- 2.2.7 Each person participates in choosing equipment and furniture for the residential centre and can access appropriate professional advice in selecting equipment that facilitates functional activity and promotes independence.
- 2.2.8 Furnishings and facilities are homely and meet the needs of people living in the residential centre.
- 2.2.9 Baths, showers and toilets are of a number and standard to meet the needs of people with disabilities and are adapted to meet their assessed needs.
- 2.2.10 Food preparation and dining areas and facilities are clean and suited to their purpose.

- 2.2.11 Access to appropriate and accessible indoor and outdoor recreational areas is provided in the centre. Outdoor spaces, which are part of the premises, are safe, secure and well maintained.
- 2.2.12 There is a policy on the use of closed circuit television (CCTV) which is informed by relevant legislation. Where CCTV systems are used, they do not intrude on privacy.
- 2.2.13 The physical environment is kept in good structural and decorative repair. Clear records of major repairs, capital works and maintenance works are kept.
- 2.2.14 The residential centre is maintained to a high standard of hygiene and is adequately lit, heated and ventilated.
- 2.2.15 The residential centre complies with the requirements of fire safety legislation, relevant building regulations and health and safety legislation. There is a safety statement in place.
- 2.2.16 The building and contents are insured and there is a valid insurance certificate or written confirmation of insurance cover.
- 2.2.17 All vehicles used to transport people with disabilities are roadworthy, regularly serviced, insured, equipped with appropriate safety equipment and driven by persons who are properly licensed and trained.
- 2.2.18 All equipment is purchased to appropriate and accessible standards and is maintained and operated in line with manufacturer's instructions and good practice.
- 2.2.19 There are procedures in place for the management of risks to health and safety.

## Standard 2.3

**Each person's admission and discharge is determined on the basis of fair and transparent criteria.**

### Features to meet the requirements of this standard include:

- 2.3.1 There is a written policy on admission, transition and leaving the residential centre that takes account of the rights of people with disabilities and is consistent with these Standards.
- 2.3.2 Admission and discharge to the residential centre is timely, determined on the basis of fair and transparent criteria and placements are based on written agreements with the registered provider.
- 2.3.3 Each person and/or their representatives sign an agreement, in an accessible format, with the registered provider. If a person or their representatives are unable or choose not to sign, this is recorded.
- 2.3.4 The agreement provides for and is consistent with the assessment, service statement and personal plan.
- 2.3.5 People living in the residential centre are consulted about new admissions, with due regard to the rights of the applicant for admission.
- 2.3.6 Each person is given the opportunity to visit the residential centre before they make a decision to stay there.
- 2.3.7 Opportunities are provided to meet with a member of staff prior to admission, to discuss what the transition into the residential centre will mean, and to discuss the application for admission.
- 2.3.8 Each person is told about key aspects of service provision prior to their admission. In the case of emergency admissions, this is done as soon as possible after admission.
- 2.3.9 Following an emergency admission, people are given time, information and, if necessary, access to an advocate, to help them plan for their future.
- 2.3.10 People living in the residential centre on a long-stay basis enjoy the security of a permanent home and are not required to leave against their wishes unless there are compelling reasons for the move. Each person is consulted with in advance of any move and has access to an advocate if they wish to object.



2.3.11 People who decide to move from a residential centre are assisted in the preparation for the move and are facilitated to do so through the provision of information on services and supports available and, where appropriate, the provision of training in the skills required for independent living. They are supported through the transition process.

## Standard 2.4

**Young adults are supported following the transition from children's centres to adults' centres.**

### **Features to meet the requirements of this standard include:**

- 2.4.1 Young adults are consulted with and involved in the planning for their transition from children's centres to adults' centres.
- 2.4.2 Young adults admitted from a children's centre are supported in the transition from children's to adult's centres.
- 2.4.3 Transitions between services provide continuity in young adults lives.
- 2.4.4 Young adults are transferred to centres which can meet their specific needs.
- 2.4.5 The transition does not disrupt key events in the young adult's life and this is reflected in the personal plan.

## Standard 2.5

**Each person receives high quality, effective respite services.**

### **Features to meet the requirements of this standard include:**

- 2.5.1 Service providers providing respite services comply with the Standards and provide an equivalent level of service provision for people who require both short- and long-term respite stays.
- 2.5.2 Respite services have positive benefits for each person and provide the opportunity to have enjoyable experiences.
- 2.5.3 Respite services are delivered in a way which promotes participation in activities which people would normally participate in (for example, education, training, employment and social events).
- 2.5.4 Respite services are designed so that each person is able to receive optimum care and support, as close to home as possible.
- 2.5.5 There is continuity between the care delivered in different settings and this is supported by systems for sharing relevant information in a timely way.

## Theme 3: Safe Services

Services promote the safety of people living in residential centres through the assessment of risk, learning from adverse events and the implementation of policies and procedures designed to protect people with disabilities.

People make decisions about their own lives and care in the residential centre and they feel safe and secure while living there. They also have the right to choose to take appropriate risks, as long as there is a sensible balance between their individual needs and preferences, and the safety of other people living in the centre.

Safe residential services protect people from abuse and neglect and follow policy and procedure in reporting any concerns of abuse and/or neglect to the relevant authorities. Where there are risks to the safety and welfare of any person, therapeutic interventions may be required to protect them. Written policies and procedures detail the conditions under which restraint is assessed and used, staff are fully trained in the use of restraint and all instances of restraint are recorded in the personal plan and the use of restraint is monitored on an ongoing basis.

Safe residential centres services are open, transparent and accountable. Learning from adverse events is shared internally with staff. The residential centre reports on adverse events in accordance with regulations and national policy.

## Standard 3.1

**Each person is protected from abuse and neglect and their safety and welfare is promoted.**

### Features to meet the requirements of this standard include:

- 3.1.1 There are policies and supporting procedures for ensuring that each person is protected from all forms of abuse.
- 3.1.2 People living in residential centres are protected by practices that promote their safety in relation to:
  - recruitment, selection, training, assignment and supervision of staff and volunteers
  - the provision of intimate and personal support to people who require it
  - the duty of each staff member to report any past or current concerns for the safety of the people living in the residential centre or in any other setting
  - access to an advocate or advocacy services
  - private access to their representatives, family, advocates and external professionals.
- 3.1.3 Risk assessment and management policies and procedures are in place for dealing with situations where safety may be compromised. The approach to risk management supports responsible risk taking and capacity, as a means to enhancing the quality of life, competence and social skills of people with disabilities.
- 3.1.4 Each person is assisted and supported to develop the knowledge, self-awareness, understanding and skills needed for self-care and protection. Areas of vulnerability are identified and individual safeguards put in place.
- 3.1.5 All information and advice given to help people to care for and protect themselves is sensitive towards gender and type of disability.
- 3.1.6 Staff work in partnership with each person and their family/representative to promote their safety and wellbeing, in accordance with their wishes.

- 3.1.7 All allegations of abuse are dealt with in an effective manner, in accordance with policies and procedures that describe:
- how people are to be supported and facilitated to take their concerns directly to an external agency should they so wish
  - how the service provider responds to concerns and/or allegations of abuse
  - the reporting of concerns and/or allegations of abuse to statutory agencies including the HSE, the Health Information and Quality Authority and, where appropriate, An Garda Síochána
  - the arrangements that have been agreed with the HSE for the assessment and, where appropriate, investigation by An Garda Síochána of any concerns or allegations of abuse.
- 3.1.8 Where a concern arises for a person's safety, the person in charge takes all reasonable and proportionate interim measures to protect them pending the outcome of any assessment or investigation into the matter.
- 3.1.9 Where there is an allegation of abuse or ill-treatment, this is reported in accordance with legislation, and any national and/or HSE policies, as appropriate.
- 3.1.10 Where there is a concern that a person may have been abused or ill-treated, the person is offered counselling and support. Where appropriate, and in accordance with the wishes of the person, their representative, family and professionals are involved in their support and treatment.
- 3.1.11 There are clearly defined procedures, understood by all, for the resolution of allegations of abuse by staff. These procedures prioritise the safety of people with disabilities, take account of their need for early resolution of such matters, and ensure that those against whom such allegations are made are treated fairly.
- 3.1.12 There is a designated person to act as a liaison with outside agencies and a resource person to staff members, carers or volunteers who have protection concerns. The designated person is responsible for reporting allegations or suspicions of abuse to the HSE or to An Garda Síochána in accordance with national guidance.
- 3.1.13 Each person controls their own financial affairs unless they wish otherwise.
- 3.1.14 Information, advice and support on money management are made available.
- 3.1.15 People have easy access to personal monies and control their own financial affairs in accordance with their wishes.

- 3.1.16 Where people need assistance to manage their financial affairs, they nominate a person to be entrusted with this responsibility. Nominated persons keep an account of all monies spent. If nominated persons are staff members, they are accountable to the person in charge as well as the person concerned.
- 3.1.17 People do not contribute to any communal fund without their informed consent.
- 3.1.18 People can avail of facilities for the safe storage of their money and valuables.
- 3.1.19 Records and receipts of possessions handed over for, or withdrawn from, safekeeping are kept up to date.
- 3.1.20 The person-in-charge ensures that people have access to advocates and/or legal advice in any situation where it appears they are subject to any form of financial abuse by a third party.

## Standard 3.2

**Each person experiences care that assists them to manage their behaviour and supports their emotional wellbeing.**

### Features to meet the requirements of this standard include:

- 3.2.1 The residential centre has a written policy on the provision of emotional, behavioural and therapeutic support to people living in the residential centre that promotes a positive approach to behaviour management and how specialist and therapeutic interventions are implemented.
- 3.2.2 People are encouraged to appropriately express their feelings and are helped by the residential centre to deal with issues that impact on their emotional wellbeing.
- 3.2.3 Communications are clear, appropriate and positive and help people to understand their own behaviour and how to behave in a manner that is respectful of the rights of others and supports their development.
- 3.2.4 People have timely access to specialist mental health services.
- 3.2.5 Specialist and/or therapeutic interventions are implemented in accordance with national policy and guidelines.
- 3.2.6 People are cared for by professional staff who support them in situations where they are not in control of their own behaviour.
- 3.2.7 Each person is consulted with and given an explanation regarding all rules, boundaries and the effects of inappropriate behaviour.
- 3.2.8 There is a positive approach to behaviour management that is tailored to meet the needs of each person with a disability.
- 3.2.9 Where a person has ongoing difficulty in managing their behaviour, an appropriate intervention plan is agreed and implemented, in line with evidence-based practice. The intervention is reviewed as part of the care planning and review process.



3.2.10 Specialist and/or therapeutic interventions are implemented with the informed consent of each person, or persons acting on their behalf and reviewed as part of the personal planning process.

3.2.11 Staff are:

- trained in the provision of emotional, behavioural and therapeutic support to people with disabilities
- trained to deal with issues of disrupted attachment, neglect and abuse and how this can impact on the behaviour of people with disabilities.
- to understand and to respond to behaviour or communication difficulties that may indicate an issue of concern.
- given all relevant information required to assist them in supporting people to manage their behaviour.

3.2.12 Staff have access to specialist advice and appropriate support when looking after people who present with behaviour that is difficult to manage. Such support includes:

- interventions designed to promote good communication
- guidelines for appropriate responses to particular situations
- access to advice/consultation outside of normal working hours.

3.2.13 The residential centre regularly monitors and audits the centre's approach to the management of behaviour, as outlined in the service's policy.

## Standard 3.3

**People living in the residential centre are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.**

### Features to meet the requirements of this standard include:

- 3.3.1 Residential centres limit the use of restrictive procedures and restrictive procedures are only used as an emergency intervention, in line with the residential centre's policy.
- 3.3.2 Each residential centre has a policy for dealing with situations that involve a risk to safety. It takes account of, and is formulated in strict adherence to, international human rights instruments, domestic legislation, regulation, national policy and evidence-based practice guidelines.
- 3.3.3 There is a written policy on physical intervention, restraint, and all use of physical intervention and restraint is in accordance with the policy.
- 3.3.4 The policy reflects evidence-based practice in relation to the use of all forms of physical intervention and restraint.
- 3.3.5 A requirement to adhere to the residential centre's policy on dealing with situations that involve a risk to safety is included in the code of conduct for professional staff of residential centres.
- 3.3.6 Each instance of the use of a restrictive procedure, insofar as possible, is properly sanctioned in advance by persons at an appropriate level of management and all uses of restraint are notified to the relevant personnel.
- 3.3.7 All incidents of restrictive procedures are reported and reviewed by senior management in the residential centre.
- 3.3.8 A debrief is carried out following the use of a restrictive procedure with each person, their representative and/or advocate and relevant staff members to review the use of the intervention on the person and record the learning.
- 3.3.9 The use of physical intervention and restraint is recorded in the person's personal plan and each use is monitored on an ongoing basis.

3.3.10 Staff are:

- trained in the use of restraint techniques and only use approved and agreed techniques
- trained in conciliation and de-escalation to reduce the likelihood of violence and the need for physical intervention and restraint.

3.3.11 The residential centre regularly monitors and audits the centre's approach to the use of restrictive procedures, as outlined in the service's policy

## Standard 3:4

**Adverse events and incidents are managed and reviewed in a timely manner and outcomes inform practice at all levels.**

### Features to meet the requirements of this Standard include:

- 3.4.1 There are policies and procedures for the management, review and evaluation of adverse events and incidents.
- 3.4.2 Adverse events and incidents are notified to the Health Information and Quality Authority in the required format and within the specified timeframe in accordance with the regulations.
- 3.4.3 The residential centre ensures the prompt and effective dissemination of the recommendations and learning from the management and review of adverse events and incidents.
- 3.4.4 The learning from the evaluation of all adverse events and incident reviews is communicated in the residential centre. The lessons learned are used to inform the development of best practice and improve service provision.

## Theme 4: Health and Development

Residential centres and residential respite centres support people so that they continue to enjoy a good quality of life and live their lives in keeping with their own social, cultural and religious beliefs.

The quality of life of for people living in residential care is important in areas including health, educational development, physical and cognitive attainment, social and emotional development, relationships with family and community and material wellbeing.

Many people take medications to support and improve their health conditions. A large number of people are able to manage and take their medications independently. Others require some form of assistance or support.

Medication management covers a number of tasks including assessing, prescribing, dispensing, administering, reviewing and assisting people with their medications. Residential centres have an overall responsibility to ensure that people receive effective and safe support to manage their medications when such assistance is required. Policies and procedures, which outline the parameters of the assistance that can be provided, should be in place to support this.

Residential centres constantly look for ways and opportunities to enhance the health and development of people living in residential care. Good health and development in all aspects of people's lives can be achieved through the provision of accessible services based on need and narrowing the gap in educational, employment and health outcomes for those who are more vulnerable.

## Standard 4.1

**The health and development of each person is promoted and improved.**

### Features to meet the requirements of this standard include:

- 4.1.1 Services develop and deliver initiatives to promote health and development, in line with the centre's objectives and in consultation with people living in the residential centre.
- 4.1.2 Services cooperate with other service providers and other statutory and non-statutory agencies to promote the health and development of people with disabilities.
- 4.1.3 Each person has access to screening, early detection and the full range of universal health and welfare services in the community.
- 4.1.4 Each person is supported to live healthily and take responsibility for their health.
- 4.1.5 People are encouraged to access appropriate health information and education both within the residential service and in the local community including information on:
  - diet and nutrition
  - recreation, interests and activities
  - the risks associated with smoking, alcohol and drug consumption
  - exercise and physical activity
  - sexual relationships and sexual health.
- 4.1.6 Each person has opportunities for new experiences, social participation, education, training and employment.

## Standard 4.2

**Each person receives a health assessment and is given appropriate support to meet any identified need.**

### Features to meet the requirements of this standard include:

- 4.2.1 People living in the residential centre have access to a general practitioner (GP) or suitably qualified medical practitioner of their choice.
- 4.2.2 Each person receives a timely, comprehensive multidisciplinary assessment of their health needs which is regularly updated and reviewed.
- 4.2.3 The multidisciplinary assessment is based on consultation with the person and, where appropriate, their family. Assessment goals are shared, and regularly reviewed and revised.
- 4.2.4 If the assessment indicates that the needs of the person cannot be met within the scope of the residential centre, they are consulted to make the necessary arrangements for transfer to an appropriate service. Families are also consulted with, where appropriate.
- 4.2.5 Where a person needs a mental health service or other allied health professional service it is provided in an appropriate setting:
  - that involves the least disruption to their daily life
  - that maximises the opportunities for continuity of treatment and takes account of their wishes.
- 4.2.6 The person in charge promotes good communication between the health and social care professionals involved in the support and treatment of each person, with due regard for their informed wishes about the sharing of information. The assessment and planning processes are used to bring direction, coordination and coherence where people with disabilities undergo multiple and diverse health and social care interventions.
- 4.2.7 People with life-threatening or life-limiting conditions and their families receive care and support, which meets their physical, emotional, social and spiritual needs and respects their dignity.

## Standard 4.3

**Each person's health is supported by the residential centre's policies and procedures for medication management.**

### Features to meet the requirements of this standard include:

- 4.3.1 The residential centre has medication management policies and procedures in place that comply with legislative and professional regulatory requirements and best practice guidelines.<sup>¥</sup> They ensure that medication is never administered other than for medical reasons and as prescribed by a medical practitioner legally authorised to do so. Records are kept to account for all medicines.
- 4.3.2 Staff adhere to procedures for the safe administration of medication, for the prescription, supply, receipt, self-administration by people with disabilities, recording, storage, handling, and disposal of medicines that accord with legislation and professional regulatory requirements or guidance.
- 4.3.3 All medicines, including scheduled controlled drugs (except those for self-medication) are administered by a registered nurse or medical practitioner.
- 4.3.4 Each person's medication is prescribed and administered according to best practice as individually clinically indicated to increase the quality of each person's life.
- 4.3.5 Following a risk assessment and assessment of capacity, each person is encouraged to take responsibility for their own medication, in accordance with their wishes and preferences.
- 4.3.6 Staff actively promote each person's understanding of their health needs relating to medication. Each person is advised, as appropriate, about the side effects of prescribed medicines and are given access if they request it, to information leaflets provided with medicines. Each person is afforded the opportunity to consult the pharmacist or other appropriate independent healthcare professional about medicines prescribed as appropriate.

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<sup>¥</sup> Nursing staff adhere to the Code of Professional Conduct for each Nurse and Midwife (An Bord Altranais, 2000), the Nurse Prescribing Regulations, the Guidance to Nurses and Midwives on Medication Management (2007) (An Bord Altranais), the Health Act 2007 and any subsequent revisions to the above and any other subsequent legislation or guidance including the HSE Dispose of Unused Medicines Properly Campaign for Disposal of Medicinal Products.



- 4.3.7 Medication is reviewed at regular specified intervals as documented in the personal plan. Special consideration is given to the use of: antipsychotic medication, sedative medication, anticonvulsant medication, medication for the management of depression, analgesic medications, and different medications and their potential interactions.
- 4.3.8 All medication errors, suspected adverse reactions and incidents recorded, reported and analysed within an open culture of reporting. Learning is fed back to improve children's safety and to prevent reoccurrence.

## Standard 4.4

**Educational, training and employment opportunities are made available to each person that promotes their strengths, abilities and individual preferences.**

### **Features to meet the requirements of this standard include:**

- 4.4.1 The education and training needs of people living in the residential centre are addressed.
- 4.4.2 Residential centres link up with education authorities and local education providers in order to ensure that the particular needs of each person are assessed and addressed.
- 4.4.3 Continuity of education, training and employment is taken into account and given a high priority.
- 4.4.4 Assessments include appropriate and achievable training/employment attainment targets, and the supports necessary for achieving them are put in place.
- 4.4.5 Each person is facilitated with additional support and appropriate assistance when managing transitions such as entering a higher level of education or commencing a training programme or employment.
- 4.4.6 Assistance in obtaining recognised training qualifications leading to greater employment opportunities is provided.
- 4.4.7 Accessing and maintaining employment is facilitated, where appropriate.

## Theme 5: Leadership, Governance and Management

Effective governance in residential centres for people with disabilities is guided by provisions made in Irish and European legislation and national policy documents. It is accomplished by directing and managing activities using good business practices, objectivity, accountability and integrity.

In an effective governance structure, overall accountability for the delivery of services is clearly defined and there are clear lines of accountability at individual, team and service levels so that all people working in the service are aware of their responsibilities and who they are accountable to.

The statement of purpose for the residential centre promotes transparency and responsiveness by accurately describing its aims and objectives, the services provided, including how and where they are provided. Governance systems ensure that service delivery is safe and effective through the ongoing audit and monitoring of its performance.

Effective leadership and management ensure that a service fulfils its statement of purpose and achieves its objectives. The deployment of necessary resources through informed decisions and actions facilitates the delivery of high quality, effective and safe residential care to people with disabilities.

The effectiveness of residential care sourced externally is monitored through formalised agreements. The safety of residential care provided is assured by monitoring compliance with legislation and acting on national policy, standards and recommendations.

## Standard 5.1

**The residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each person and promote their welfare.**

### **Features to meet the requirements of this standard include:**

- 5.1.1 Staff demonstrate a knowledge of legislation, regulations, policies and standards for the care, protection and welfare of people with disabilities, appropriate to their role, and this is reflected in all aspects of their practice.
- 5.1.2 Appropriate action is taken on requirements made by regulatory bodies to comply with regulations.
- 5.1.3 Appropriate action is taken on recommendations made following an investigation into the residential centre.
- 5.1.4 New and existing legislation and national policy is reviewed on a regular basis to determine what is relevant to the residential centre, how it impacts on practice and to address any gaps in compliance.

## Standard 5.2

**The residential centre has effective leadership, governance and management arrangements in place and clear lines of accountability.**

### Features to meet the requirements of this standard include:

- 5.2.1 The residential centre has clearly defined accessible governance arrangements and structures that set out lines of authority and accountability, stipulate individual accountability, and specify roles and responsibilities.
- 5.2.2 The residential centre is registered in accordance with statutory requirements.
- 5.2.3 The registered provider, the person in charge and all other persons involved in the management of the residential centre are fit persons.
- 5.2.4 There is an internal management structure appropriate to the size, ethos, and purpose and function of the residential centre.
- 5.2.5 Leadership is demonstrated by management at all levels and there is a commitment to continuous improvements in the residential centre.
- 5.2.6 Leaders demonstrate that they understand the needs of people with disabilities in receipt of their services. They direct sufficient resources to services for the care and protection of people with disabilities.
- 5.2.7 Strategic and operational plans for the residential centre set clear objectives and plans for the delivery of safe and quality care. Strategic and operational plans are implemented.
- 5.2.8 There are management arrangements in place to achieve planned service objectives effectively and efficiently.
- 5.2.9 Information governance arrangements are in place to ensure that the residential centre complies with legislation and regulations, uses information ethically and uses best available evidence to protect personal information and to support the provision of residential care.
- 5.2.10 The residential centre is monitored and evaluated annually against strategic objectives and action is taken to bring about improvements in work practices and to achieve better outcomes for people living in residential care.

- 5.2.11 Regular audits are carried out to assess, evaluate and improve the provision of services in a systematic way in order to achieve better outcomes for people living in residential care.
- 5.2.12 There is an established risk management framework and supporting structures in place for the identification, assessment and management of risk.
- 5.2.13 There are systems in place to effectively manage risk, including a designated person(s) to contact in an emergency.
- 5.2.14 Records are maintained to monitor complaints, concerns and adverse events. Details are taken of any investigations and related actions, to help ensure complaints, concerns and adverse events are addressed appropriately, trends are detected and learning takes place.

## Standard 5.3

**The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.**

### Features to meet the requirements of this standard include:

- 5.3.1 There is a statement of purpose for the residential centre which clearly describes the model of care and support delivered in the centre.
- 5.3.2 The statement of purpose for the residential centre details:
- the aims, objectives and ethos of the service
  - the number of people who can be accommodated in the centre together with details of the type(s) and levels of care and support that can be provided
  - the range of services and any specialised facilities provided
  - the terms and conditions of the contract of care or other similar agreement
  - the physical layout and extent of the premises
  - a list of key policies that inform practice in the residential centre.
- 5.3.3 The day-to-day operation of the residential centre reflects the statement of purpose and is reviewed regularly and updated when necessary.
- 5.3.4 The statement of purpose is publicly available and communicated to people living in the residential centre and their families, in an accessible format.
- 5.3.5 The review and evaluation of the statement of purpose is incorporated in the service's governance arrangements to provide assurance that services are being delivered within the scope of the statement of purpose.

## Standard 5.4

**The residential centre has appropriate service level agreements, contracts and/or other similar arrangements in place with the funding body or bodies.**

### **Features to meet the requirements of this standard include:**

- 5.4.1 Formal service level agreements, contracts or similar arrangements clearly define the relationship, role and responsibilities of both service provider and funding body.
- 5.4.2 The service level agreement, contract or similar arrangement specifies clearly the nature, quality, quantum and outcome of the service to be delivered by the residential centre and what level of funding is being provided.
- 5.4.3 The service level agreement, contract or similar arrangements defines the reporting, monitoring, review and oversight arrangements in place between the service provider and the funding body including expectations as regards compliance with relevant legislation, national policy and relevant quality standards, systems and measures.



## Theme 6: Use of Resources

The effective management and use of available financial and human resources is fundamental to delivering safe and effective residential care that meet the needs of people with disabilities.

A well-run residential centre uses resources effectively and seeks opportunities to provide an improved service, which achieves better outcomes for people living in the centre. Resource decisions take account of the needs of people and the levels of demand on the service. Staff who make decisions on the use of resources are accountable for the decisions made and ensure these decisions are well informed.

## **Standard 6.1**

**The use of available resources is planned and managed to provide effective residential care to people living in the residential centre.**

### **Features to meet the requirements of this standard include:**

- 6.1.1 The residential centre demonstrates an understanding of the levels of need within the service to inform the planning and allocation of resources.
- 6.1.2 There are clear plans that take account of the funding and resources available to ensure the provision of quality residential care.
- 6.1.3 Resources are effectively deployed to meet the needs and aspirations of the people living in the residential centre.
- 6.1.4 The residential centre demonstrates transparent and effective decision making when planning, procuring and managing the use of resources.

## Theme 7: Workforce

Each staff member has a key role to play in delivering effective and safe residential care and support to people living in the residential centre. Residential centres organise and manage their workforce to ensure that staff have the required skills, experience and competencies to provide an effective service to people with disabilities.

Safe recruitment practices ensure that staff have the required skills, competencies and experience to undertake duties associated with their roles and responsibilities. All staff receive support and supervision to ensure that they perform their job to the best of their ability. The performance of staff is appraised at regular specified intervals.

Staff are registered with their professional body, where relevant (for example, nurses are registered with An Bord Altranais) to assure the public that they are competent to deliver safe services to people with disabilities.

Providing residential care for people with disabilities can be complex and demanding for the staff involved. The residential centre should protect its workforce from the risk of work-related stress, bullying and harassment and listen and respond to their views.

As aspects of service provision change and develop over time, the service supports staff to continuously update and maintain their knowledge and skills. The training needs of the workforce are monitored on an ongoing basis and identified training needs are addressed to ensure the delivery of high quality, safe and effective residential care for people with disabilities.

All staff working receive specific training in the protection of vulnerable people to ensure that they are well equipped with the knowledge and skills to recognise the signs of abuse and/or neglect and the action(s) required to protect them from significant harm.

## Standard 7.1

**Safe and effective recruitment practices are in place to recruit staff.**

### Features to meet the requirements of this standard include:

- 7.1.1 Staff are recruited in compliance with employment and equality legislation, and recruitment and selection processes are informed by evidence-based human resource practices.
- 7.1.2 The registered provider identifies the skills, competencies and personal attributes required of staff and recruits accordingly.
- 7.1.3 Each person, where appropriate, is consulted on the skills and expertise required by staff and contributes to the development of staff job descriptions.
- 7.1.4 Garda Síochána vetting is carried out on staff and volunteers with direct access to people living in the centre. References are checked before they start working in the residential centre.
- 7.1.5 All staff have written job descriptions and a copy of their terms and conditions of employment prior to taking up post.
- 7.1.6 Job descriptions for staff who provide care and support to people living in the residential centre state that staff are required to establish and maintain relationships with people with disabilities that are based on respect and equality and that promote their independence.
- 7.1.7 A contemporaneous, accurate and secure personnel file is kept for all staff.
- 7.1.8 Orientation and induction training is provided to all staff when they start working in the centre.
- 7.1.9 There is a written code of conduct for all staff, developed in consultation with people living in the residential centre. All staff also adhere to the codes of conduct of their own professional body/association and/or professional regulatory body.

## Standard 7.2

Staff have the required competencies to manage and deliver effective services to people living in the residential centre.

### Features to meet the requirements of this standard include:

- 7.2.1 At all times there are sufficient numbers of staff with the necessary experience and competencies to meet the needs of the people living in the centre and which reflect the size, layout and purpose of the centre.
- 7.2.2 At all times there are sufficient staff available to ensure the safety of people with disabilities. Contingency plans are in place in the event of a shortfall in staffing levels.
- 7.2.3 There is continuity of staffing so that attachments are not disrupted. The continuity of support and the maintenance of relationships are promoted through:
- strategies for the retention of staff
  - ensuring sufficient staffing levels to avoid excessive use of casual, short-term, temporary and agency workers.
- 7.2.4 Staff have the necessary skills to provide care and support to people with disabilities and are registered with the relevant professional statutory body in compliance with legislation.
- 7.2.5 Key workers have the skills required to plan and coordinate care and supports and to liaise effectively with other organisations and professionals.
- 7.2.6 The residential centre has competent managers with appropriate qualifications and sufficient practice and management experience to manage the residential centres and meet its stated purpose, aims and objectives.

## Standard 7.3

**Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of people living in the residential centre.**

### Features to meet the requirements of this standard include:

- 7.3.1 Staff understand their roles and responsibilities, have clear accountability and reporting lines, and are aware of policies and procedures to be followed at all times.
- 7.3.2 Staff are supported to effectively exercise their personal, professional and collective accountability for the provision of effective and safe care and supports.
- 7.3.3 There are procedures to protect staff by minimising the risk of violence, bullying and harassment by other members of staff or persons in the residential centre.
- 7.3.4 Staff are provided with access to support and advice. Staff receive regular supervision and support by appropriately qualified and experienced staff.
- 7.3.5 Each individual staff member's performance is formally appraised, at least annually by appropriate personnel.
- 7.3.6 A written record is kept of each supervision, support and performance appraisal and a copy is given to the member of staff. The record is signed by the supervisor and staff member at the end of each supervision, support and performance appraisal session and is available for inspection.
- 7.3.7 Staff are facilitated to make protected disclosures about the effectiveness and safety of the service in line with legislative requirements, where appropriate.
- 7.3.8 Staff are provided with training and development opportunities that equip them with the necessary skills required to meet the needs of people with disabilities.
- 7.3.9 Accredited management training is provided to all new managers who manage front-line staff.
- 7.3.10 Managers who supervise staff are provided with training in supervision theory and practice.

## Standard 7.4

**Training is provided to staff to improve outcomes for people living in the residential centre.**

### **Features to meet the requirements of this standard include:**

- 7.4.1 All staff are trained to provide care and support to people living in residential care.
- 7.4.2 A training needs analysis is periodically undertaken with all staff and relevant training is provided as part of a continuous professional development programme.
- 7.4.3 There is a training and development programme to ensure that staff maintain competence in all relevant areas.
- 7.4.4 All staff receive ongoing training in the prevention, detection and reporting of abuse and their requirement to report abuse, as outlined in legislation and national policies.
- 7.4.5 The person in charge ensures that staff and people living in the residential centre actively participate in health and safety education and training programmes.

## Theme 8: Use of Information

Quality information and effective information systems are central to improving the quality of residential care for people. Quality information, which is accurate, valid and reliable, is an important resource for service providers in planning, managing, delivering and monitoring residential services.

To effectively use the multiple sources of information available, service providers have systems, including information and communications technology, to ensure the collection and reporting of quality information within the context of effective arrangements for information governance.

Information governance refers to the systems and processes that service providers have in place to manage information to support their immediate and future regulatory, legal, risk, environmental and operational requirements. An information governance framework enables services to ensure all information including personal information is handled securely, efficiently, effectively and in line with legislation. This supports the delivery of person-centred, safe and effective care to people with disabilities residing in residential care or residential respite care.



## Standard 8.1

**Information is used to plan and deliver safe and effective residential care and support.**

### **Features to meet the requirements of this standard include:**

- 8.1.1 Information governance arrangements are in place to ensure that the service complies with legislation, uses information ethically, and uses best available evidence to protect personal information and support the provision of safe and effective residential care and support.
- 8.1.2 There is a robust and secure system for managing information to support the delivery of safe and effective residential care and support.
- 8.1.3 Information is collated, managed and shared to support effective decision-making, in compliance with legislation.
- 8.1.4 A system is in place to gather information about the quality and safety of the service. This information is used to inform management decisions and to drive continuous improvements in service provision.
- 8.1.5 People are informed by the service on the recording and intended use of all personal information.
- 8.1.6 People have access to their personal information in line with legislation and best practice.

## Standard 8.2

**Secure record-keeping and file-management systems are in place to provide a safe and effective service.**

### Features to meet the requirements of this standard include:

- 8.2.1 Records required for the effective and efficient running of the residential centre are up to date, of high quality and accurate at all times.
- 8.2.2 The centre holds a register (electronic or hard copy) in line with statutory requirements which details the relevant information in respect of each person who resides in the centre.
- 8.2.3 Each person has a contemporaneous file that includes all records relating to their health and social care.
- 8.2.4 There is a policy for the retention and destruction of records in compliance with the Data Protection Acts, 1988 and 2003.
- 8.2.5 Any personal information is treated as confidential and held in accordance with legislative, regulatory and best practice requirements.

## Glossary of Terms

**Abuse:**<sup>+</sup> any act, or failure to act, which results in a breach of a vulnerable person's human rights, civil liberties, physical and mental integrity, dignity or general wellbeing, whether intended or through negligence, including sexual relationships or financial transactions to which the person does not or cannot validly consent, or which are deliberately exploitative. Abuse may take a variety of forms:

- physical abuse, including corporal punishment, incarceration (including being locked in one's home or not allowed out) over- or misuse of medication, medical experimentation or involvement in invasive research without consent, and unlawful detention of psychiatric patients;
- sexual abuse and exploitation, including rape, sexual aggression, indecent assault, indecent exposure, forced involvement in pornography and prostitution;
- psychological threats and harm, usually consisting of verbal abuse, constraints, isolation, rejection, intimidation, harassment, humiliation or threats of punishment or abandonment, emotional blackmail, arbitrariness, denial of adult status and infantilising people with disabilities, and the denial of individuality, sexuality, education and training, leisure and sport;
- interventions which violate the integrity of the person, including certain educational, therapeutic and behavioural programmes;
- financial abuse including fraud and theft of personal belongings, money or property;
- neglect, abandonment and deprivation, whether physical or emotional, in particular an often cumulative lack of healthcare or negligent risk taking, of food or of other daily necessities, including in the context of educational or behavioural programmes;
- institutional violence with regard to the place, the level of hygiene, the space, the rigidity of the system, the programme, the visits, the holidays.

**Accessible format:** the presentation of print and online information in plain English in a manner suited to adults and children with disabilities, including large print, audio and Braille.

**Adverse event:** an incident which results in harm to a resident.

**Advocacy:** a process of empowerment of the person which takes many forms. It includes taking action to help say what they want, secure their rights, represent their interests or obtain the services they need; it can be undertaken by people themselves, by their friends and relations, by peers and those who have had similar experiences, and/or by independent trained volunteers and professionals.

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<sup>+</sup> As defined in the Council of Europe, *Resolution Res AP (2005)1 on safeguarding adults and children with disabilities against abuse*. Strasbourg: France; 2005.

**Assessment:** a process by which a person's needs are evaluated and determined so that they can be addressed.

**Assistive living technology:** a generic term that includes assistive, adaptive, and rehabilitative devices and the process used in selecting, locating, and using them. Assistive living technology promotes greater independence for children by enabling them to perform tasks that they were formerly unable to accomplish, or had difficulty accomplishing.

**Autonomy:** the perceived ability to control, cope with and make personal decisions about how one lives on a day-to-day basis, according to one's own preferences.

**Capacity:** capacity means the ability to understand the nature and consequences of a decision in the context of available choices at the time the decision is to be made. A person lacks the capacity to make a decision if he or she is unable to understand the information relevant to the decision, unable to retain that information, unable to use or weigh that information as part of the process of making the decision, or unable to communicate his or her decision.<sup>#</sup>

**Carer:** a carer is any person who provides regular ongoing support to a person with a disability.

**Child:** a person under the age of 18 years who has not been married.<sup>+</sup>

**Child abuse:** child abuse can be categorised into four different types: neglect, emotional abuse, physical abuse and sexual abuse. A child may be subjected to one or more forms of abuse at any given time. For detailed guidance and signs and symptoms on each type of abuse, please refer to Children First.

**Child protection:** the process of protecting individual children identified as either suffering, or likely to suffer, significant harm as a result of abuse or neglect.

**Clustered housing:** housing that is traditionally associated with an institution. The accommodation is dispersed away from the main institutional building, but clustered within its environs.

**Competency:** the behavioural definition of the knowledge, skills, values and personal qualities that underlie the adequate performance of professional activities.

**Complaint:** an expression of dissatisfaction with any aspect of a service.

**Complaints procedures:** a set of clearly defined steps for the resolution of complaints.

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<sup>#</sup> Capacity as defined in the Scheme of Mental Capacity Bill, 2008.

<sup>+</sup> As defined in the Child Care Act, 1991.

**Contract:** written agreement between the individual or his/her representative and the residential centre that sets out the terms and conditions, and rights and responsibilities of both parties.

**Designated centre:** a designated centre is defined in Part 1, Section 2 of the Health Act as an institution at which residential services are provided by the Health Service Executive (HSE) or other service providers including residential services run by public, private and voluntary organisations.

**Disability:** a substantial restriction in the capacity of the person to carry on a profession, business or occupation or to participate in social or cultural life by reason of an enduring physical, sensory, mental health or intellectual impairment.<sup>‡</sup>

**Emergency admission:** an admission to a residential centre that is unplanned, unprepared or not consented to in advance.

**Garda Síochána vetting:** the practice whereby employers obtain information from An Garda Síochána as to whether or not a prospective or existing employee or volunteer has a criminal conviction.

**Governance:** the function of determining the organisation's direction, setting objectives and developing policy to guide the organisation in achieving its objectives and stated purpose. Effective governance arrangements recognise the interdependencies between corporate and clinical governance and integrate them to deliver safe and effective services to adults with disabilities.

**Hazard:** anything that can cause harm, injury, ill-health or damage.

**Incident:** an event or circumstance which could have resulted, or did result, in unnecessary harm to an individual.

**Individual's representative:** this is the person, preferably nominated by the individual, who acts on their behalf in situations where the individual lacks capacity to make decisions. This person will often be a family member and could also be a friend, advocate or legal advisor. The role of this person is to ascertain, as far as possible, the individual's wishes and to act in every instance in the individual's best interests.

**Information governance:** the arrangements that service providers have in place to manage information to support their immediate and future regulatory, legal, risk, environmental and operational requirements.

**Inspection:** inspection is part of the monitoring process by which the Authority checks compliance with standards and regulations. Inspections may seek the experiences of people who use services and carers. Their experiences, triangulated

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<sup>‡</sup> As defined in the Disability Act, 2005.

with other evidence and information from a range of sources are a key part of inspections and inform inspection judgments. Inspection is a tool of monitoring.

**Institution:** large settings that typically provide accommodation for 10 or more people.

**Key worker:** the key worker is the member of the staff in the residential centre who carries particular responsibility for the person with a disability, liaises directly with him/ her, coordinates health and social services, and acts as a resource person.

**Monitoring:** systematic process of gathering, analysis of information and tracking change over time for the purpose of improving the quality and safety of health and social care. Under section 8(1)(c) of the Health Act 2007, one of the functions of the Health Information and Quality Authority is to monitor compliance with standards.

**Multidisciplinary:** an approach to the planning and delivery of care by a team of health and social care professionals who work together to provide integrated care.

**Person in charge:**<sup>¥</sup> the person whose name is entered on the register as being in charge of or managing the residential centre.

**Personal plan:** a plan setting out the person's individual goals and needs and how it is proposed to address them. A personal plan takes account of a formal assessment of need, where one has been carried out. The plan typically outlines the supports needed to maximise the person's abilities, their personal development goals in areas such as health and education and any specialist services required such as speech and language therapy. It addresses, as appropriate, issues of consent and risk management. The plan aims to ensure that the specific supports provided to the person with a disability are pertinent to his/her needs and that the service provided by the service provider is purposeful and goal-directed.

**Policy:** a written operational statement of intended outcomes to guide staff actions in particular circumstances.

**Procedure:** a written set of instructions that describe the approved steps to be taken to fulfil a policy.

**Protection:** process of protecting individual adults identified as either suffering, or likely to suffer, significant harm as a result of abuse or neglect.

**Quality:** quality is meeting the assessed needs and expectations by ensuring the provision of efficient and effective management and processes.

**Record:** a record includes any memorandum, book, plan, map, drawing, diagram, pictorial or graphic work or other document, any photograph, film or recording

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<sup>¥</sup> Definitions that are subject to Regulations.

(whether of sound or images or both), any form in which data are held, any other form (including machine-readable form) or thing in which information is held or stored manually, mechanically or electronically and anything that is a part or a copy, in any form, of any of the foregoing or is a combination of two or more of the foregoing.

**Register:**<sup>¥</sup> the register of residential centres established under Part 7, Section 41, of the Health Act 2007. In order to be entered on the register, the residential centre must be in compliance with standards and regulations.

**Registered provider:**<sup>¥</sup> the person whose name is entered on the register as the person carrying on the business of the residential centre.

**Regulation:** a governmental order having the force of law.

**Residential centre:** a place where people with disabilities live and a designated centre as defined in the Health Act 2007 for the purposes of registration and inspection. Residential centres may be supported community housing, clustered housing or an institution but may take other forms.

**Respite:** temporary residential care based either in a centre or community home that is intended to support the maintenance of people with disabilities in their own homes. It can cover a crisis period, take place on a periodic basis to enable a carer to have a break, or can provide adults and children with medication, therapy or support services.

**Risk:** the likelihood of an adverse event or outcome.

**Risk management:** the systematic identification, evaluation and management of risk. It is a continuous process with the aim of reducing risk to an organisation and individuals.

**Serious incident:** a death or a potentially life-threatening injury or serious and permanent impairment of health, wellbeing or development. Defining a serious incident is extremely complex. The nature and number of serious incidents reported will inform any future revisions of this definition.

**Service level agreement:** is part of the contract between the service provider and the funding body where the level and scope of the service is formally defined.

**Service provider:** person(s) or organisations that provide services. This includes staff and management that are employed, self-employed, visiting, temporary, volunteers, contracted or anyone who is responsible or accountable to the organisation when providing a service to people with disabilities.

**Service statement:** a statement which specifies the health services or education services or both which will be provided to the individual by or on behalf of the HSE or

an education service provider, as appropriate, and the period of time within which such services will be provided.

**Staff:** the people who work in, for or with the service provider. This includes individuals that are employed, self-employed, temporary, volunteers, contracted or anyone who is responsible or accountable to the organisation when providing a service to children with disabilities.

**Standards and features:** a standard is a measure by which quality is judged. The standard statements set out what is expected in terms of the service provided to the person residing in the residential centre. The features are the supporting statements that indicate how a service may be judged to meet the standard.

**Statement of purpose:** describes the aims and objectives of the service including how resources are aligned to deliver these objectives. It also describes in detail the range, availability and scope of services provided by the overall service.

**Supported community living:** housing within an ordinary neighbourhood which provides accommodation and is designed to meet the needs and wishes of people with disabilities.

**Timely:** refers to action taken within a timeframe which meets the welfare and protection needs of any particular child or adult with a disability and his/her circumstances.

**Vetting:** the process of investigating an individual thoroughly in order to ensure that they are suitable for a job. This process also includes checking references provided by the individual.

**Welfare:** welfare encompasses all aspects of a person's wellbeing to include physical, social, emotional, religious, moral and intellectual welfare.

**Workforce:** all people working in a service.



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