

Children's residential services inspection report

Health Information and Quality Authority
Regulation Directorate monitoring inspection
report on children's statutory residential centres
under the Child Care Act, 1991



Name of region:	Dublin North East	
Centre ID:	20	
Dates of inspection:	14 – 15 October 2015	
Number of fieldwork days:	1.5	
Lead inspector:	Niamh Greevy	
Support inspector(s):	Bronagh Gibson	
Type of inspection:	<input type="checkbox"/> Announced <input checked="" type="checkbox"/> Unannounced <input checked="" type="checkbox"/> Full <input type="checkbox"/> Themed	
Inspection ID:	742	

About monitoring of children's residential services

The Health Information and Quality Authority (the Authority) monitors services used by some of the most vulnerable children in the state. Monitoring provides assurance to the public that children are receiving a service that meets the requirements of quality standards. This process also seeks to ensure that the wellbeing, welfare and safety of children is promoted and protected. Monitoring also has an important role in driving continuous improvement so that children have better, safer services.

The Authority is authorised by the Minister for Children and Youth Affairs under Section 69 of the Child Care Act, 1991 as amended by Section 26 of the Child Care (Amendment) Act 2011, to inspect children's residential care services provided by the Child and Family Agency.

The Authority monitors the performance of the Child and Family Agency against the *National Standards for Children's Residential Services* and advises the Minister for Children and Youth Affairs and the Child and Family Agency.

In order to promote quality and improve safety in the provision of children's residential centres, the Authority carries out inspections to:

- **assess** if the Child and Family Agency (the service provider) has all the elements in place to safeguard children
- **seek assurances** from service providers that they are **safeguarding children** by reducing serious risks
- **provide** service providers with the **findings** of inspections so that service providers develop action plans to implement safety and quality improvements
- **inform** the public and **promote confidence** through the publication of the Authority's findings.

The Authority inspects services to see if the National Standards are met. Inspections can be announced or unannounced.

This inspection report sets out the findings of a monitoring inspection against the following themes:

Theme 1: Child-centred Services	<input checked="" type="checkbox"/>
Theme 2: Safe and Effective Services	<input checked="" type="checkbox"/>
Theme 3: Health and Development	<input checked="" type="checkbox"/>
Theme 4: Leadership, Governance and Management	<input checked="" type="checkbox"/>

1. Inspection methodology

As part of this inspection, inspectors met with children, parents, managers and staff. Inspectors observed practices and reviewed documentation including statutory care plans, child-in-care reviews, relevant registers, policies and procedures, children's files and staff files.

During the inspection, the inspectors evaluated the:

- quality of care and safety of the service
- organisation and management of the centre
- safeguarding processes
- effectiveness of interagency and multidisciplinary work
- outcomes for children.

The key activities of this inspection involved:

- the analysis of data
- reviewing local policies and procedures and minutes of various meetings
- reviewing four children's case files
- meeting with two children and discussions with three parents and relatives
- meeting with the centre manager and deputy centre manager
- meeting with three centre staff
- discussions with one social worker
- observation of the day-to-day life in the centre.

Acknowledgements

The Authority wishes to thank the children, parents, staff, managers, and other professionals in the service for their cooperation with this inspection.

2. Profile of the service

2.1 The Child and Family Agency

Child and family services in Ireland are delivered by a single dedicated State agency called the Child and Family Agency, which is overseen by the Department of Children and Youth Affairs. The Child and Family Agency Act 2013 (Number 40 of 2013) established the Child and Family Agency with effect from 1 January 2014.

The Child and Family Agency has responsibility for a range of services including:

- child welfare and protection services, including family support and residential services to children
- existing Family Support Agency responsibilities
- existing National Educational Welfare Board responsibilities
- pre-school inspection services
- service response to domestic, sexual and gender-based violence.

Child and family services are organised into 17 service areas and are managed by area managers. The areas are grouped into four regions each with a regional manager known as a service director. The service directors report to the chief operations officer, who is a member of the national management team.

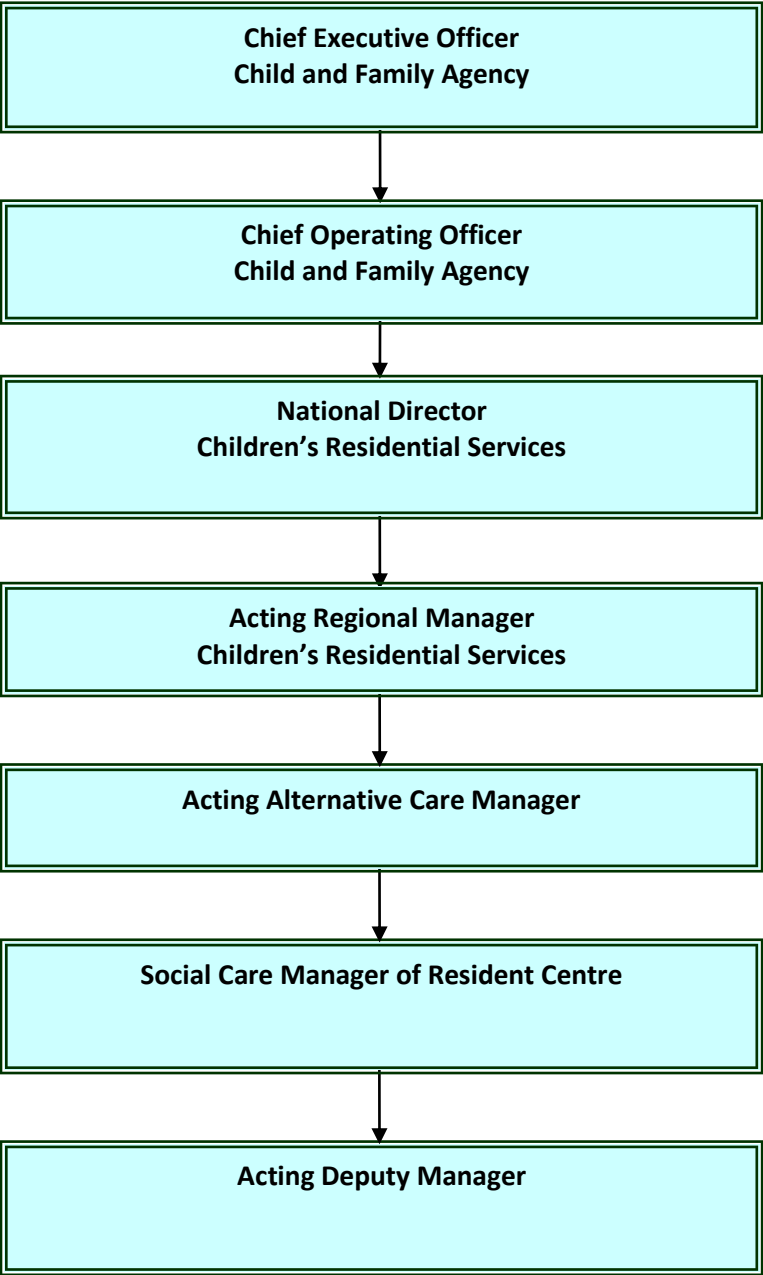
This centre was situated in the Dublin North East region of the Child and Family Agency.

2.2 The Centre

The centre was a two-storey building, off a main road and had a spacious front and back garden. The centre was nicely decorated and well maintained. The centre provides places for four boys and girls from the ages of 13 to 18 years. At the time of the inspection there were two boys and two girls living there. The statement of purpose and function stated that the centre used a relationship and strengths based model to inform its care.

The organisational chart in Figure 1 describes the management and team structure as provided by the centre.

Figure 1: Organisational structure of the children’s residential service*



* Source: The Child and Family Agency

3. Summary of inspection findings

The Child and Family Agency has the legal responsibility to promote the welfare of children and protect those who are deemed to be at risk of harm. Children in residential care require a high-quality service which is safe and well supported by social work practice. Residential staff must be able to provide them with warm and nurturing relationships in order for children to achieve positive outcomes. Services must be well governed in order to produce these outcomes consistently.

This report reflects the findings of the inspection, which are set out in Section 5. The provider is required to address a number of recommendations in an action plan which is published separately to this report.

In this inspection, the Authority found that of the ten standards assessed:

- One standard was exceeded
- Five standards were met
- Four standards required improvement
- No significant risks were identified.

Children using the service were safe and protected. While some improvements were needed in relation to the risk assessments for the centre, this had already been identified by the centre manager prior to inspection.

It was apparent from records and observations that children were valued by staff. Staff advocated for children and children were involved in decisions around their care. Children and families spoke positively about the centre and the staff who worked there. Up to date placement plans were not on file for children and staff reported these had been sent out to social workers to be signed.

Inspectors identified some issues around the management of medication and how shared care arrangements were recorded on the register of children.

Children received good quality care and effective systems were in the early stages of being developed in relation to the governance of the centre. The manager had good oversight of the provision of care to children.

A training needs analysis had not been undertaken by the date of inspection. This would help the service develop the skills of the team in the centre around the needs of the children placed there.

Children reported feeling listened to and staff had a good understanding of the current plan in place for each individual child and their role in implementing it.

4. Summary of judgments under each standard and or regulation

During the inspection, inspectors made judgments against the *National Standards for Children's Residential Services*.⁺ They used four categories that describe how the Standards were met as follows:

- **Exceeds standard** – services are proactive and ambitious for children and there are examples of excellent practice supported by strong and reliable systems.
- **Meets standard** – services are safe and of good quality.
- **Requires improvement** – there are deficits in the quality of services and systems. Some risks to children may be identified.
- **Significant risk identified** – children have been harmed or there is a high possibility that they will experience harm due to poor practice or weak systems.

<i>National Standards for Children's Residential Centres</i>	Judgment
Theme 1: Child-centred Services	
Standard 4: Children's Rights	Exceeds the Standard
Theme 2: Safe and Effective Services	
Standard 5: Planning for Children and Young People	Requires improvement
Standard 6: Care of Young People	Meets the Standard
Standard 7: Safeguarding and Child Protection	Meets the Standard
Standard 10: Premises and Safety	Requires Improvement
Theme 3: Health and Development	
Standard 8: Education	Meets the Standard
Standard 9: Health	Requires Improvement
Theme 4: Leadership, Governance and Management	
Standard 1: Purpose and Function	Meets the Standard
Standard 2: Management and Staffing	Requires Improvement
Standard 3: Monitoring	Meets the Standard

5. Findings and inspection judgments

⁺ Please refer to Appendix 1 for full listing of standards and regulations for children's residential centres.

Theme 1: Child-centred Services

Services for children are centred on the individual child and their care and support needs. Child-centred services provide the right support at the right time to enable children to lead their lives in as fulfilling a way as possible. A child-centred approach to service provision is one where services are planned and delivered with the active involvement and participation of the children who use services.

Summary of inspection findings under Theme 1

Children were treated with respect and kindness by the staff and were supported to exercise their rights.

Children's Rights

Children spoke positively about the centre and the staff who work there and they told inspectors that they felt they were listened to. Children had reported reading their daily logs but not all children were aware that they could access their whole file provided their social worker felt they were ready to do so.

Children had had contact with an advocacy service for children in care and were aware of the service. At the time of inspection, no children were allocated a Guardian ad Litem. Staff spoke about the children in the centre in a positive and respectful way.

Diversity

The diverse needs of children were catered for by staff. Children were encouraged to participate in decisions about their daily lives such as meals, chores and activities. Children attended house meetings and records showed that they led these meetings. Inspectors found evidence that house rules were discussed and changed in collaboration with children during these meetings. Children also had input into their care planning and plans to manage behaviour that challenged.

Complaints

Inspectors found that complaints were managed appropriately. Inspectors saw complaints relating to peer issues and pocket money, which were resolved. The centre held a log which allowed the centre manager to have an overview of any themes or issues that arose for individual young people. Children knew how to make a complaint and told inspectors they were confident that it would be dealt with.

Theme 2: Safe and Effective Services

Services promote the safety of children by protecting them from abuse and neglect and following policy and procedure in reporting any concerns of abuse and/or neglect to the relevant authorities. Effective services ensure that the systems are in place to promote children's welfare. Assessment and planning is central to the identification of children's care needs.

Summary of inspection findings under Theme 2

Inspectors found good practice in the area of care and safeguarding in the centre. Children were appropriately placed and as a result were doing well. Inspectors found good care plans in place for children and staff were aware of the current stage each child was at in relation to their plan. Children were also supported in their relationships with family and friends.

Admissions and discharges

Admissions were in line with the Statement of Purpose for the centre. Inspectors found that the procedures around admission to the centre involved referrals being sent from the local resource committee and a subsequent risk assessment being completed by the centre manager and allocated social worker. The centre manager identified her responsibility to the children already in the service and the need to consider the possible impact of any admissions on their welfare. Inspectors identified an issue with the Statement of Purpose which will be outlined in greater detail under Theme 4. The policy for the service was to have a phased admission to the service and the centre manager identified that this should be developed in line with the needs of the child. Inspectors reviewed the information provided to young people on admission to the centre and found that this needed to be updated. For example, the information relating to advocacy services was out of date.

Children understood why they were placed in the centre and inspectors found evidence of discussions with children regarding their wishes and anxieties around leaving the centre. Inspectors also saw records of inter-agency planning for children who were due to be discharged from the centre over the coming years. One of the two most recent discharges was done in a planned way, while the second was unplanned. Inspectors did not find any evidence of a review following this unplanned ending, which might have highlighted any areas for improvement in how the service managed the breakdown of a placement.

Inspectors identified an issue for the service in relation to the recording of shared care arrangements and how this is reflected in the register of children. On reviewing the register, inspectors found that it was not clear that children on shared care arrangements spent a number of nights each week out of the centre. It is important that the service finds a way to reflect this arrangement in the register.

Assessment and care planning

Inspectors found that each child had an allocated social worker and they were visited regularly. Specialist assessments had taken place for children as necessary.

Inspectors saw written records with children on file in key working sessions to prepare for upcoming child in care reviews so that staff could ensure that the child's views were represented. Children also attended review meetings and their views were represented in care plans. Review meetings were multidisciplinary with input from social work, speech and language, guardian ad litem and other specialist services. Plans were also developed with the involvement of families as appropriate.

Care plans were up-to-date and were clear in identifying children's needs. Inspectors found ample evidence that care planning had improved outcomes for children in the areas of education, emotional and behavioural development, life skills and health. For example, children who were previously not attending school had returned to school since their admission to the centre, some children had developed better self care skills and children were being supported to develop skills to manage their own behaviour. Care plans were signed by relevant people.

Placement plans on file were comprehensive and identified short and long term goals. However, while staff reported plans were in the process of being developed for all children following child in care review meetings, inspectors did not have access to these plans. Discussion during the team meeting, observed by inspectors, indicated that these plans were with social workers at the time of inspection for signing. Staff responsible for these plans had followed up with social workers and expected to have these plans returned imminently. Many of the goals on the available placement plans were out of date or did not reflect changes in the care plan. However, it was positive that a number of the short term goals identified in earlier placement plans had been achieved. Inspectors also found that key working sessions reflected the identified goals for children, were relevant to current issues and were strengths-based and supportive.

Quality of care

Children's emotional and psychological needs were appropriately assessed and where specialist intervention was required, this had been put in place. Staff showed a good understanding of the challenges facing the children in their care, how this connected to their behaviour and how they managed behaviour that challenged, as a result. The

centre used a relationship and strengths based model of care and this was reflected in plans, records of individual work with children and observations of relationships between staff and children on the day of inspection.

Children were engaged in various sports and hobbies and received support from staff to pursue these interests. There was evidence of praise and celebration of significant events and achievements in the lives of the children.

Children were expected to take part in household chores and inspectors found evidence of ongoing work with young people around developing self care and independent living skills. There was a plan for one young person to remain in their placement after turning 18 years of age until they completed their academic year. The onward placement for this young person had been identified at the time of the inspection but staff were unclear about the plan as it had not been finalised by the day of the inspection.

Inspectors found evidence of children having a varied diet and efforts on the part of staff to encourage healthy eating. Staff showed awareness around the specific needs of individuals and trying to cater for these in meals. The centre placed a focus on having a shared mealtime and records showed consideration around how this would be managed.

Children who presented with behaviour that challenged received good quality support and care. Inspectors reviewed behaviour management plans and found them to be of good quality. Plans gave clear instructions for staff on how to identify triggers and behaviour that may be a precursor to incidents of behaviour that challenged. The plans also outlined how to respond at each stage to de-escalate behaviour. Staff knew children well and were all aware of the strategies in place to support children with behaviour that challenged.

Where restrictive practices were in place, there was a clear rationale for this and a plan had been implemented to reduce restrictive practices in a phased way. This plan had been developed with multidisciplinary input and the aim of the work was to support the child to learn to manage their own behaviour. One physical restraint had been implemented in the previous twelve months and staff documented the rationale for its use. Inspectors saw evidence of follow up with the young person following the incident through keyworking sessions and liaison with mental health services to help child understand their actions and try prevent further incidents.

One child had a number of restrictions in place due to behaviour that challenged. There was a phased plan in place to give the child more freedom and all staff in the centre were aware of the structures in place for the child at the time of inspection.

The service used a strengths and relationship based model to work with young people so staff developed strong relationships with children and used this to support children through times of crisis. Staff also took the approach of focusing on areas where the children do well to try build up self-esteem and empower children to take appropriate levels of responsibility for their lives. It was evident from interviews with staff and children that staff knew the children well and had good relationships with them. Staff were then able to use this relationship to support children through times of crisis or anxiety.

All children were placed outside of their home communities. One child was in the early stages of planning to move to another placement to be closer to their friends and family and access accommodation that would also support them living more independently. This plan was made in collaboration with the child and staff advocated on the child's behalf to progress this matter.

A child due to leave the service in two years time, had had discussions with their keyworker regarding the plan for leaving care. The centre manager advised inspectors that onward planning for this person was in the early stages of being explored.

Files were in good condition, clear, legible and signed by staff. Some documents such as risk assessments had not been signed by the centre manager. Files were stored securely and systems were in place around archiving. However, given that files stored for archiving were kept in cardboard boxes, as opposed to flame retardant filing cabinets, inspectors were of the view that a risk assessment should be carried out in relation to this practice, with particular consideration for fire safety and the loss of files in the event of a fire.

Family and friends

Children's relationships with their families and friends were valued and supported in the staff and manager. Children reported that their family and friends visited them in and inspectors found this reflected in documentation. Where children had difficulties in making and sustaining friendships, a plan to support children with this was identified in their care plan.

Parents interviewed as part of the inspection also told inspectors that they felt very welcome by staff and thought that staff were warm and caring. Parents also identified that there was good communication from the service and they were involved in their child's life.

Diversity and disability

Staff were supportive of children's diverse needs. Children's right to their own identity was respected and the service had linked children in with groups such as Belong2 for

support around their sexual identity. The children's meeting was also used as a forum to discuss issues around respecting each other. Staff were supportive of the individual needs of young people but inspectors found that further training around autistic spectrum disorders and intellectual disability would benefit the team. When this was identified with managers, they acknowledged that would benefit the team. The centre was proactive in supporting children around all issues that arose and liaised with appropriate services.

Child protection and safeguarding

The centre had good practices in place to keep children safe. Staff followed procedures when children went missing or absconded from the centre, like informing the appropriate people, trying to contact and look for children and notifying An Garda Síochána where children were missing from care. Staff members were aware of how to manage bullying but this was not an issue for children in the centre.

Staff were aware of the whistleblowing policy and also familiar with how to manage any child protection concerns. The centre was awaiting a response to three child protection and welfare referrals. Child protection and welfare referrals were made in line with Children First (2011) and safety plans were implemented to manage concerns, while awaiting the outcome of the social work department assessment. A designated staff member was identified to follow up on all child protection notifications to ensure the centre received feedback in relation to the outcome.

Where absences from the centre were an issue for one child, the manager scheduled a strategy meeting with the social work department and An Garda Síochána to develop a plan to manage these incidents in line with national policy.

Health and safety

The premises was a well-maintained, homely environment that was suitable to meet the needs of children using the service. Inspectors viewed a letter of compliance of fire safety and building control. However, the safety statement provided to inspectors on the day of inspection was out of date. The centre implemented national policies in relation to health and safety management and inspectors found that vehicle in use was suitably maintained and insured. However, inspectors did not find evidence of current insurance for the premises.

Inspectors found evidence that monthly health and safety audits had been undertaken and risk assessments were in place. This will be outlined in greater detail under theme four.

Personal emergency evacuation plans were in place for all children and the evacuation procedure in place for the centre also guided staff in relation to evacuating specific

children. Fire safety equipment was in place and had been maintained appropriately but there were a number of gaps in relation to daily checks. Fire drills had taken place and there was a system to record which staff and children had taken part in these. There was adequate signage and training in place around fire safety.

Theme 3: Health and Development

The health and development needs of children are assessed and arrangements are in place to meet the assessed needs. Children's educational needs are given high priority to support them to achieve at school and access education or training in adult life.

Summary of inspection findings under Theme 3

The health and educational needs of children were appropriately assessed and met. Staff advocated for children and educational achievements were celebrated. Some issues were identified in relation to the management of medication.

Education needs

All children in the centre had an educational programme that they attended daily. There was evidence of improved engagement in education for some children after their admission to the centre and there was an expectation for each child to be in education. Each child had identified short and long term goals that had been reviewed and there was evidence of progress for children. Inspectors also found there was good communication between the service, schools, families and other professionals. The service had also celebrated important milestones in education like when children got Junior Certificate results.

Health needs

Children had accessed medical treatment in a timely way and were registered with a local GP. For some children, the service had advocated for access to private services given the delay in accessing public services but funding had not been made available. There was evidence that the health of children had improved since their admission to the centre and staff were proactive in following up on issues for children. Inspectors found that staff encouraged children to make healthier choices around food and exercise and key working sessions were used to explore issues such as relationships, sexual and mental health.

Inspectors found that files contained all necessary information in relation to health and consent but issues were identified in relation to recording the administration of medication. The medication policy for the centre required that two staff sign when a medication is administered but this was not consistently implemented. Inspectors also identified that there was no reconciliation process around controlled drugs, which is required by law. Inspectors found that the centre had its own system of recording the administration of medication.

Theme 4: Leadership, Governance and Management

Effective governance is achieved by planning and directing activities, using good business practices, accountability and integrity. In an effective governance structure, there are clear lines of accountability at individual, team and service levels and all staff working in the service are aware of their responsibilities. Risks to the service as well as to individuals are well managed. The system is subject to a rigorous quality assurance system and is well monitored.

Summary of inspection findings under Theme 4

The centre was well managed and child centred. The manager had good oversight of practices within the centre. Some governance systems were in the early stages of being implemented and as a result, there was limited evidence of these.

Statement of purpose

Inspectors found an up to date Statement of Purpose in place in the centre and that the service was delivered in line with the Statement of Purpose. Inspectors identified issues that the Statement of Purpose did not detail the number of children with complex needs that it can cater for, particularly in relation to children with a disability.

Management structures and systems

The centre manager joined this residential service in 2003, had a qualification in social care and was doing further study in a field relevant to their work. The manager was supervised by the alternative care manager on a quarterly basis, which is not as regular as required under the agency's supervision policy. The centre manager also had the support of an acting deputy centre manager. The centre manager supervised the acting deputy manager along with seven other staff, while the acting deputy manager supervised four staff.

The centre manager had received quarterly supervision in relation to the issues that arose in the centre regarding the children's care needs, staffing, health and safety and finance. Decisions made by the alternative care manager in relation to these issues were recorded on supervision records. Inspectors also saw the alternative care manager's signature on complaints records but it was unclear if the review of these documents resulted in feedback around how the complaint was managed or if areas for improvement were identified.

Records showed that managers had good oversight of issues in the centre. Inspectors saw records of management meetings and strategy meetings that clearly showed how

decisions were made by the appropriate level of management. Significant events were notified appropriately and more serious significant events were referred to the significant event review group (SERG). At the time of inspection, there was no formal arrangement around how decisions were made regarding what type of events were referred to the regional SERG. A plan was in place to start a local SERG meeting so that the decision to refer an event to the regional SERG would be more transparent.

The centre manager reported that the alternative care manager had begun to visit the centre periodically to review the quality of keyworking plans, placement plans and the health and safety audits but inspectors did not find documentary evidence of this during the inspection.

At the time of inspection, fortnightly team meetings were used to communicate decisions made by the alternative care manager, regional SERG meetings and the centre manager, to staff in the centre. The service also had a system for staff to handover relevant documentation and information at the change of shift.

Inspectors did not find an operational plan in place for the service. While the centre manager had a clear vision in relation to the desired outcomes for children, there was no formal system in place for measuring this at a managerial level.

Risks assessments for the centre were in place but needed some improvements. The centre manager had identified areas for improvement in relation to these prior to inspection, with an identified date for when the changes would be made. For example, no unit risks were identified in relation to children and other risks needed to be elaborated on. Staff also completed good quality risks assessments in relation to issues for individual children and the centre manager was involved in completing risk assessments in relation to higher risk issues.

With the exception of medication management, inspectors found evidence that practices in the centre reviewed by inspectors were in line with the centre's policies.

Inspectors found the manager and deputy manager to be competent and qualified. The centre manager was fully aware of all issues in the centre and was child centred in their approach to managing the centre. The centre manager signed off on placement plans, keyworking plans, risk assessments and safety plans, among other documents. There was evidence on some of these documents of comments in relation to the quality of work, while some documents were missing the manager's signature. The centre manager identified a system in place for certain documents to ensure that they had oversight of them before they were filed but this was not in place for all documents. Inspectors found that all issues of a more serious nature were managed with the support of the centre manager and this was reflected in documentation.

Key working sessions were of good quality and related to identified goals for children. Key workers completed regular key working reports and plans which were reviewed by the centre manager and used as a means to ensure that important work was completed with children and that children were making progress in relation to goals.

Inspectors reviewed the register of children and found that it contained all the necessary information, except that it did not reflect the shared care arrangements in place in the centre.

Files were tidy, accessible and comprehensive. Inspectors found that records were empathic towards children and reflected the positive regard in which children were held by staff.

Financial management systems were clear and accounted for the use of resources.

Monthly audits took place around finances and health and safety, and the centre had conducted a self audit at the request of the monitoring officer. The most recent monitoring report dated 10/06/2015 was made available to the Authority and inspectors reviewed the action plan held by the service in relation to the recommendations of that report and saw that the service had completed seven of the ten actions to date.

Recruitment

Staff were recruited centrally through a national recruitment service. Two staff who needed updated garda vetting had had forms sent off to An Garda Siochana for this purpose and it was expected these would return in the weeks following inspection.

Sufficient staff and skill mix

The staff team were appropriately qualified and had a good level of experience. The staff team under the centre manager was made up of an acting deputy manager, four social care leaders and seven social care workers. There were staff with considerable experience on the team and some newly qualified staff, but all staff were suitably qualified for the role. On the day of inspection, two staff members were due leave the service and the centre manager had advised that the paperwork had been submitted for their replacement but was awaiting confirmation that they would be replaced. Overall, the staff team was stable and there was evidence of good relationships between staff and children.

Supervision and support

Supervision contracts were in place and staff received regular, good quality supervision. Inspectors saw supervision records and found that they showed how decisions were made and that staff and managers were accountable for their actions. Children's needs

and practice issues in the centre were discussed in supervision. Supervision was also used to discuss professional development.

Training

Most staff had received training in core areas. Staff were trained in relation to manual handling, first aid and the centre's model of de-escalating behaviour. However, one staff member required training in relation to Children First 2011 and two staff members were not trained in relation to physical restraints. Managers had received training in relation to supervision.

While training was dealt with as part of supervision, inspectors identified that the centre had not developed a training needs analysis to consider the overall needs of children using the service and how to train the workforce to respond to these needs. The centre manager advised that they had been informed by senior management that there was a plan to develop a training needs analysis but it had not started by the day of inspection. Inspectors identified that based on the needs of children currently in the centre, further training around autistic spectrum disorders and intellectual disability would benefit the team.

Appendix 1 – Standards and Regulations for Children’s Residential Services

<i>National Standards and Regulations for Children’s Residential Centres</i>
Theme 1: Child-centred Services
<p>Standard 4: Children’s Rights</p> <p>The rights of young people are reflected in all centre policies and care practices. Young people and their parents are informed of their rights by supervising social workers and centre staff.</p>
Theme 2: Safe and Effective Services
<p>Standard 5: Planning for Children and Young People</p> <p>There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. This plan states the aims and objectives of the placement, promotes the welfare, education, interests and health needs of young people and addresses their emotional and psychological needs. It stresses and outlines practical contact with families and, where appropriate, preparation for leaving care.</p> <p><i>Child Care (Placement of Children in Residential Care) Regulations, 1995</i> <i>Part IV, Article 23 Care Plans</i> <i>Part V, Articles 25 and 26 Care Plan reviews</i> <i>Part III, Article 8 Contact with families</i> <i>Part IV, Article 24 Supervision and visiting of children</i> <i>Part IV, Article 22 Case records</i> <i>Part III, Article 9 Emotional and specialist support</i></p>
<p>Standard 6: Care of Young People</p> <p>Staff relate to young people in an open, positive and respectful manner. Care practices take account of young people’s individual needs and respect their social, cultural, religious and ethnic identity. Staff interventions show an awareness of the impact on young people of separation and loss and, where applicable, of neglect and abuse.</p> <p><i>Child Care (Placement of Children in Residential Care) Regulations, 1995</i> <i>Part III, Article 11 Provision of food and cooking facilities</i> <i>Part III, Article 10 Religion</i></p>

Standard 7: Safeguarding and Child Protection

Attention is paid to keeping young people in the centre safe, through conscious steps designed to ensure a regime and ethos that promotes a culture of openness and accountability.

Theme 2: Safe and Effective Services

Standard 10: Premises and Safety

The premises are suitable for the residential care of young people and their use is in keeping with their stated purpose. The centre has adequate arrangements to guard against the risk of fire and other hazards in accordance with Articles 12 and 13 of the Child Care (Placement of Children in Residential Care) Regulations, 1995.

Child Care (Placement of Children in Residential Care) Regulations, 1995

Part III, Article 7 Accommodation

Part III, Article 12 Fire Precautions

Part III, Article 13 Safety Precautions

Theme 3: Health and Development

Standard 8: Education

All young people have a right to education. Supervising social workers and centre management ensure each young person in the centre has access to appropriate education facilities.

Standard 9: Health

The health needs of the young person are assessed and met. They are given information and support to make age-appropriate choices in relation to their health.

Child Care (Placement of Children in Residential Care) Regulations, 1995

Part III, Article 9 Health care

Part IV, Article 20 Medical examinations

National Standards and Regulations for Children's Residential Centres

Theme 4: Leadership, Governance and Management

Standard 1: Purpose and Function

The centre has a written statement of purpose and function that accurately describes what the centre sets out to do for young people and the manner in which care is provided. The statement is available, accessible and understood.

Standard 2: Management and Staffing

The centre is effectively managed, and staff are organised to deliver the best possible care and protection for young people. There are appropriate external management and monitoring arrangements in place.

Child Care (Placement of Children in Residential Care) Regulations, 1995

Part III, Article 5 Care practices and operational policies

Part III, Article 6 Staffing

Part IV, Article 21 Maintenance of Register

Part III, Article 15 Notification of Significant events

Part III, Article 16 Records

Theme 4: Leadership, Governance and Management

Standard 3: Monitoring

The Health Service Executive¹, for the purpose of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements are in place to enable an authorised person, on behalf of the Health Service Executive to monitor statutory and non-statutory children's residential centres.

Child Care (Placement of Children in Residential Care) Regulations, 1995

Part III, Article 17 Monitoring of Standards

¹ Formally known as Health Service Executive at time of writing Standards, now known as The Child and Family Agency.