



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Report of a Designated Centre Special Care Unit

Name of designated centre:	Crannog Nua
Name of provider:	The Child and Family Agency
Address of centre:	Dublin
Type of inspection:	Unannounced
Date of inspection:	06 December 2019
Centre ID:	OSV 0004216
Fieldwork ID	MON-0028260

About the designated centre

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

In Crannog Nua Special Care Centre the young people are detained under a High Court order for a short-term period of stabilisation when their behaviour poses a real and substantial risk of harm to their life, health, safety, development or welfare. Crannog Nua Special Care Centre caters for both male and female, aged between 11 and 17 years and the group living units are mixed gender.

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

Our objective is the provision of effective and safe services designed to address the underlying emotional disturbance; to reduce unsafe and risky behaviours by the young person and to help with successful reintegration into less secure settings in the community. This requires the design of an individual programme, which promotes inclusion of the multi-disciplinary team while simultaneously creating a powerful therapeutic milieu within the programme.

The campus is described as a secure unit meaning it is locked and the young people are not allowed to leave without permission. The young people that we provide a service to have usually had a long history of challenging and risk taking behaviour before entry into the special care programme, the young person must be deemed inappropriate to an intervention in a less secure setting due to the seriousness of the risk presented by their presentation.

The following information outlines some additional data of this centre.

Current registration end date:	11 November 2021
Number of children on the date of inspection:	6

How we inspect

To prepare for this inspection the inspector or inspectors reviewed all information about this centre. This included any previous inspection findings, registration information and information submitted by the provider or person in charge since the last inspection.

As part of our inspection, where possible, we:

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

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

1. Capacity and capability of the service:

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

2. Quality and safety of the service:

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

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

This inspection was carried out during the following times:

Date	Times of inspection	Inspector	Role
06 December 2019	09:10hrs to 13:10hrs	Jane Mc Carroll	Inspector

Capacity and capability

The special care unit was previously inspected in August 2019 to monitor on-going regulatory compliance with 12 out of 25 regulations pursuant to the Health Act 2007 (Care and Welfare of Children in Special Care Units) Regulations. A compliance plan was submitted to HIQA in October 2019, which set out the actions to be taken to ensure compliance with four regulations judged not compliant and four judged substantially compliant.

This inspection on 6 December 2019 was risk-based. It was in response to information received from the director of the special care unit. The purpose of the inspection was to assess whether the special care unit continued to comply with the regulations and could continue to safely operate in line with national policy on the use of single separation.

On 29 November 2019, HIQA was informed by the director of the special care unit that a sixth child was admitted to Crannog Nua on that same date. To accommodate this child, a fifth bedroom was created in a four-bed residential unit, by turning a safe room into an additional bedroom. While this did not increase the number of registered beds in the special care unit, the physical changes to this building constituted a change to the unit's statement of purpose and function. The provider (Tusla) Child and Family Agency, was found to be in breach of one condition of the special care unit's registration, which was granted in November 2019, as the Chief Inspector was not informed of the changes to this designated centre's statement of purpose and function prior to the changes being made, as required by the regulations. Following a meeting with the registered provider representative on 9 December 2019 at which a warning letter was issued by the Chief Inspector, a revised statement of purpose and function was submitted to the Chief Inspector.

This inspection found that the increase in numbers in the residential unit did not impact negatively on the children placed there, as there was adequate space and staff resources to provide care to this number of children. Four new members of staff had taken up position in the previous three weeks, which meant that at the time of inspection, 39 social care staff and nine social care leaders were caring for a total of six children placed across two residential units.

At the time of registration, the safe room of the residential unit in question, was fitted with doors through which children could be observed to ensure their ongoing safety. On a walk around the unit, the inspector found that in order to create a new bedroom, a consultancy room had been turned into a safe room. This room was not fitted with an adequate viewing panel for observation. The Inspector was assured by centre managers that adequate arrangements were put in place to ensure children placed in this room for their safety, could be observed appropriately. There were adequate fire

safety arrangements in place.

This inspection found that although required revisions of practice in relation to single separation were put in place and were recorded in each child's placement plan, instructions were not clearly written and were poorly communicated to the staff team.

The registered provider did not ensure that the identification, assessment, management and review of the risks posed by the use of a consultation room as a safe room was undertaken. An urgent compliance plan was issued to the provider on 6 December seeking assurances in relation to the management of this risk, so as to ensure the ongoing safety of children and staff in the special care unit. An appropriate response was received and the director of the special care unit explained that closed circuit television (CCTV) was in use in the room. He provided assurances that the unit was resourced to ensure a member of staff could observe any child placed in the room.

The inspector observed that the fifth bedroom, which was previously a safe room, was also fitted with closed circuit television (CCTV), and there was a risk of unnecessary intrusion into a child's privacy at bedtime. Following the inspection, the director of the special care unit provided assurances that the CCTV camera was blocked and would not be used while this room remained a bedroom.

The inspector found that the governance arrangements in place, including a good understanding of the responsibility of the register provider, were not sufficient to ensure the conditions of registration were fully adhered to. This was addressed by the registered provider in a plan submitted to HIQA in response to identified risks.

Regulation 5: Statement of purpose

At the time of this inspection, changes to the layout of the special care unit constituted a change to the statement of purpose and function, but these changes were not reflected in the current statement. Furthermore, a revised statement of purpose provided to inspectors which accounted for the changes made in the special care unit, did not include the conditions of registration, as required in the regulations.

Judgement: Not compliant

Regulation 14: Staff members and others working in the Special Care Unit Sub Reg (1) and (4)

At the time of the inspection, there was a sufficient number of staff in the special care unit to cater for the needs of the children who were detained there, but this was

dependent on the use of agency staff.

Judgment: Substantially compliant

Regulation 24: Governance and management
Sub Reg (1)a (1)b and (1)c

The inspector found that governance arrangements in place to ensure on-going compliance with the regulations and conditions of registration required improvement. There was no strategy presented to the inspector during the inspection fieldwork to indicate that the registered provider had taken action or intended to take any action to ensure compliance with the centre's conditions of registration. There was a missed opportunity by the registered provider to appropriately manage this breach when its potential became known to the service.

Judgment: Not compliant

Regulation 25: Risk management
Sub Reg 1 and 2

During inspection fieldwork, the inspector found that the use of a consultation room as a safe room was not risk assessed. While this did not pose an immediate risk to children in the unit, the registered provider did not ensure that identification, assessment, management and review of the risks posed by the use of a consultation room as a safe room was undertaken. Interim measures in place to ensure that children had a safe experience of single separation required improvement. Furthermore, the risks associated with a breach of conditions of registration had not been considered by the registered provider.

Judgment: Not compliant

Appendix 1 - Full list of regulations considered under each dimension

Regulation Title	Judgment
Capacity and capability	
Regulation 5: Statement of purpose	Not compliant
Regulation 14: Staff members and others working in the Special Care Unit	Substantially compliant
Regulation 24: Governance and management	Not compliant
Quality and safety	
Regulation 25: Risk management	Not compliant

Compliance Plan for Crannog Nua Special Care Unit Name OSV – 0004216

Inspection ID: MON-0028260

Date of inspection: 06 December 2019

Introduction and instruction

This document sets out the regulations where it has been assessed that the provider or person in charge are not compliant with the Health Act 2007 (Care and Welfare of Children in Special Care Units) Regulations 2017, as amended, Health Act 2007 (Registration of Designated Centres) (Special Care Units) Regulations 2017 and the National Standards for Special Care Units 2015.

This document is divided into two sections:

Section 1 is the compliance plan. It outlines which regulations the provider or person in charge must take action on to comply. In this section the provider or person in charge must consider the overall regulation when responding and not just the individual non-compliances as listed section 2.

Section 2 is the list of all regulations where it has been assessed the provider or person in charge is not compliant. Each regulation is risk assessed as to the impact of the non-compliance on the safety, health and welfare of children using the service.

A finding of:

- **Substantially compliant** - A judgment of substantially compliant means that the provider or person in charge has generally met the requirements of the regulation but some action is required to be fully compliant. This finding will have a risk rating of yellow which is low risk.
- **Not compliant** - A judgment of not compliant means the provider or person in charge has not complied with a regulation and considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of children using the service will be risk rated red (high risk) and the inspector have identified the date by which the provider must comply. Where the non-compliance does not pose a risk to the safety, health and welfare of children using the service it is risk rated orange (moderate risk) and the provider must take action *within a reasonable timeframe* to come into compliance.

Section 1

The provider and or the person in charge is required to set out what action they have taken or intend to take to comply with the regulation in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that regulation, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. The response must consider the details and risk rating of each regulation set out in section 2 when making the response. It is the provider's responsibility to ensure they implement the actions within the timeframe.

Compliance plan provider's response:

Regulation Heading	Judgment
<p>Regulation 5: Statement of purpose</p> <p>Outline how you are going to come into compliance with Regulation 5: Statement of purpose:</p> <p>The Statement of Purpose has been amended to include to include the three conditions of registration and this has been circulated to the appropriate parties.</p>	<p>Not Compliant</p>
<p>Regulation 14: Staff members and others working in the special care unit</p> <p>Outline how you are going to come into compliance with Regulation 14: Staff members and others working in the special care unit:</p> <p>Crannog Nua continues to engage in a rolling campaign with both agency provider and Tusla recruit to employee staff. Registered provider with PPIM have met with the union to look at expanding the existing qualifications so as to increase he numbers of potential staff.</p> <p>Registered Provider and PPIM have met with DCYA to review the possibility of increasing the Special Care allowance again with a view of increasing numbers of staff.</p> <p>Overtime and use of time in lieu is used to fill any gaps in roster. All current agency staff have been offered one year contracts with a view of making them permanent.</p>	<p>Substantially Compliant</p>
<p>Regulation 24: Governance and management</p> <p>Outline how you are going to come into compliance with Regulation 24: Governance and management:</p> <p>The Registered Provider will identify a manager who will have responsibility to ensure that Special Care maintains its compliance and can advise of potential conflicts with each centre's registration.</p>	<p>Not Compliant</p>
<p>Regulation 25: Risk management</p>	<p>Not Compliant</p>

Outline how you are going to come into compliance with Regulation 25: Risk management:

Any future changes to the fabric of the building will only be made once management can ensure like for like replacement of essential safety measures can be maintained. This will be only be completed following a comprehensive risk identification and management assessment is completed and supported by Tusla CRS risk manager.

The risks associated prior to any breach will be identified and fully considered by the registered provider this will include a robust risk assessment to ensure compliance can be supported with the minimal disruption.

Section 2:

Regulations to be complied with

The provider or person in charge must consider the details and risk rating of the following regulations when completing the compliance plan in section 1. Where a regulation has been risk rated red (high risk) the inspector has set out the date by which the provider or person in charge must comply. Where a regulation has been risk rated yellow (low risk) or orange (moderate risk) the provider must include a date (DD Month YY) of when they will be compliant.

The registered provider or person in charge has failed to comply with the following regulation(s).

Regulation	Regulatory requirement	Judgment	Risk rating	Date to be complied with
Regulation 5(1)	The registered provider shall prepare in writing a statement of purpose relating to the special care unit concerned which shall contain the information set out in Schedule 1.	Not Compliant	Orange	31 st January 2020
Regulation 5(3)	The registered provider shall notify the chief inspector in writing before changes are made to the statement of purpose which affect the purpose of the special care unit.	Not Compliant	Orange	31 st January 2020
Regulation 24(1)(a)	The registered provider shall ensure that the special care unit has sufficient resources to ensure the effective delivery of special care in accordance with the statement of	Not Compliant	Orange	31st December 2020

	purpose.			
Regulation 24(1)(b)	The registered provider shall ensure that there is a clearly defined management structure in the special care unit that identifies the lines of authority and accountability, specifies roles, and details responsibilities for areas of special care provision.	Not Compliant	Orange	31 st December 2020
Regulation 24(1)(c)	The registered provider shall ensure that management systems are in place to ensure that the service provided is safe, appropriate to the child's needs, consistent and effectively monitored.	Not Compliant	Orange	31 st March 2020
Regulation 25(1)	The registered provider shall ensure that the special care unit has a risk management policy in place and that it is implemented throughout the special care unit.	Not Compliant	Orange	31 st December 2020
Regulation 25(2)	The registered provider shall ensure that the risk management policy includes the following: (a) the ongoing identification, assessment,	Not Compliant	Orange	31 st December 2020

	<p>management and review of risks throughout the special care unit, (b) the measures and actions in place to control the risks identified, (c) the measures and actions in place to control the following risks to a child— (i) child abuse, (ii) situations where a child may be removed or absconds from the special care unit, (iii) accidental injury to a child, (iv) aggression and violence from or towards a child, and (v) self-harm, (d) arrangements for the identification, recording, investigation and learning from incidents involving children detained in the special care unit, (e) accidental injury to a staff member, an intern, a trainee or a person on a placement as part of a vocational training course in the special care unit, and (f) aggression and violence towards a staff member, an intern, a trainee or a person on a</p>			
--	---	--	--	--

	placement as part of a vocational training course in the special care unit.			
--	---	--	--	--