Annual Review Report

Assessing performance against the national standards for residential services for children and adults with disabilities

About the centre

Centre name: St Paul's Coolatree

Centre ID: OSV-0003767

Registered Provider: St Paul's Child and Family Care Centre

Person in charge: Ms Sarah Mohan/Niamh Salter

Report Completed: December 2025

Reported Compiled by:

Ms Niamh Salter (Director of Service)

Section 1 Quality and Safety		
Theme 1: Individualised Supports and Care		**Quality improvement required? Y/N** Where yes complete improvement plan
Standard 1:1	The rights and diversity of each person are respected and promoted.	N
Standard 1.2	The privacy and dignity of each person are respected.	N
Standard 1.3	Each person exercises choice and control in their daily life in accordance with their preferences.	N
Standard 1.3	Each child exercises choice and experiences care and support in everyday life.	N
Standard 1.4	Each person develops and maintains personal relationships and links with the community in accordance with their wishes.	N
Standard 1.4	Each child develops and maintains relationships and links with family and the community.	Y
Standard 1.5	Each person has access to information, provided in a format appropriate to their communication needs.	N
Standard 1.6	Each person makes decisions and, has access to an advocate and consent is obtained in accordance with leg-	N
Standard 1.7	Each person's complaints and concerns are listened to and acted upon in a timely, supportive and effective	N

Your findings:

The service provides support/care through a Person Centred Planning (PCP) approach. PCP is a 'way of discovering how a person wants to live their life and ways to make that happen' (National Disability Association 2005). Each child's PCP is tailored to support their individual needs, whereby enabling them to develop to their full potential and lead a full life, according to their wishes.

Ethnic, cultural needs, and religious background of the children, are affirmed, protected, and promoted by the service. The centre's Statement of Purpose commits to respect the rights of each child, irrespective of religion, race, nationality, sex or age, to be treated without discrimination, with staff provided with training on cultural awareness. All staff completed this training.

Children are encouraged to be involved in the development and maintenance of their PCPs, and where possible, children attend their PCP review meetings. Each child's PCP contains a child friendly "Charter of Rights for Children with Autism" which details how the individual is supported to experience and understand their rights.

A Rights Committee was active within the service. The Committee was put on pause in 2025 while the service reviewed the Committee terms of reference and overall purpose. It is due to begin again in 2026 with a new purpose. Going forward this Committee will report to the Quality and Safety Committee and any Issues of immediate concern or require action are brought to the attention of the Director of Service / Administration and Medical Director.

Following this training in 2024 on neurodiversity and strengths based approaches, and in line with our increased commitment to greener environmental goals and data protection practices, we have commenced the implementation of a new online, integrated person centred planning model using Aspirco system, known as I planit. This cloud-based platform provides a fully integrated approach to person-centred planning. Ultimately, it will enhance communication pathways increase service user and family engagement, and enable real time oversight of PCP's by all stakeholder, including MDT, care staff, families and service users.

The privacy and dignity of each child is promoted through the assignment of individual bedrooms during the child's stay, individual Intimate Care Plans, basic rights and data protection awareness.

All staff receive instruction from the PIC in regard to respect, privacy and dignity in caring for the child and this is represented within each child's Intimate Care Plan. Staff are provided with Intimate Care Training when they begin working in the service. All staff in the service also will complete training on the FREDA Principles. The aim is for this training to help

inform the practice we employ when working with children and being conscious of respecting their rights, privacy and dignity. Each child has a Communication Profile which will be saved as a document on iplanit helps to develop and maintain interaction and relationships with the child. The Communication Profile of each child is updated annually as per regulation or more frequently based on changing needs. A review of the Communication Profiles showed that they were all reviewed in a timely manner. Some updates were made for some children to reflect changes in their development in the area of communication and to further support them with changes in routine and when transitioning from one place to another. The Communication Audit took place in February 2024. The audits were previously given percentages but this was changed in 2024 in order to help form collaborative and positive working relationships between staff and SLT. The next audit will take place in early 2025. Following the audits conducted in 2024 the SLT Department completed a review and update on the template used when developing a communication profile for each child that attends respite. The communication profiles now contain a visual checklist of the individualised communication supports needed for each child. Staff working with that child can easily review this and ensure that all the recommended communication supports are available for the child during their stay in respite. The communication profiles contain information on the children expressive, receptive and interaction skills which staff can review in a time efficient way.

The SLT Department now also meet with each child's key worker annually to discuss the information outlined in the communication profile and support staff to implement the communication support strategies. The SLT's are available to visit the respite houses and model use of the supports (e.g. Lamh signs, communication devices, Core Boards) in real time if requested by staff. A new system was set up in 2025 where the SLT department send all PIC's a monthly you tube video of Lamh signs to help staff to practive in real time along with the visual aid.

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Each child is supported to communicate their needs and choices in a format tailored to their ability and preference .i.e. iPhone, pictures, social stories, photos, and objects of reference. Each month the SLT department educate both staff and children on specific Lámh signs and encourage the use of same.

Each child is encouraged to make choices throughout the day in regard to their activities, daily routines and food preferences. Children with verbal ability are asked their opinions on toys, equipment for the house, bed linen, and all children are encouraged to bring their own personal favourite items from home. The children are supported to maintain contact with family during their respite stay as evident through phone-calls to and from parents. When competent, children are encouraged to phone home themselves. Some children like to bring their own communication devices with them

when they come for their respite stay. Communication between parents and the service is also maintained through a Communication Diary, emails and written correspondence (as relevant) in line with the service's Communication Plan.

Choices and Experiences

PCP goals and daily activity schedules (timetables) all promote active participation in the community. Community participation by the children has involved being out in ordinary places i.e. beach, bowling, playgrounds, restaurants, coffee shops, public parks, and activity centres. Some children use words or pictures to communicate to staff where they would like to go and how they would like to spend their time.

Children also enjoyed some outings throughout the year:

- 10 Family passes (50 tickets) where donated to facilitate children, staff, parents, carers and families attend the Wonderlights Christmas in Malahide Castle. Great response from families and the support is greatly appreciated.
- Some Coolatree children enjoyed outings to Dublin Zoo.

Some children were also provided with a place on a Summer Camp in 2025 which was funded by the HSE. St Paul's CFCC Social Worker planned and oversaw a summer camp which resulted in 12 families accessing this one week support camp. The main benefits of the programme reported by most families were:

- Time to do some errands, chores and look after siblings
- Children were more emotionally regulated on the days coming up to attending summer camp and for a time after attending camp
- Establishment of a routine for their child
- Familiar staff and location

The main benefits of the programme for each participating child were:

- Access to a familiar location and familiar staff
- Establishment of a routine
- Access to activities (listed above)

Preparation for their return to school

Family Participation

Interventions with families include the Parents Group which is overseen by St. Paul's CFCC Senior Social Worker, one to one supports from Multi-Disciplinary Team Members in relation to their child's needs, and advocating to the Health Service Executive (HSE) for further supports if needed. Over the past three years we have started to celebrate Autism Awareness Month as a service. We held an event in April 2025 where all families accessing the service were invited to attend an "Autism Celebration" in the grounds of our main site. The service facilitated a child friendly event with therapy ponies, ice – cream van, soft room and garden activities. A great number of families came to this event and we plan for this celebration to continue on an annual basis.

As noted above, the service supported families over the summer holidays by giving access to the grounds and providing a Summer Camp which were well received by parents.

We were delighted that we were in a position to plan our Winter Wonderland event again in December 2024. This saw children, families and siblings being invited to our main site where we will have a Santa, food and some activities planned to celebrate together. The service once again supported over 50 service users, their families, and staff to attend of "Winter Wonderland Lights" event in Malahide Castle to celebrate the Christmas period in a safe way.

Rights and Advocacy

St Paul's Coolatree values the feedback it receives from parents. In October 2025 we issued our annual parent's feedback questionnaire using an electronic system

There are currently 20 children attending St Paul's Coolatree and 5 families completed and returned the questionnaire. The feedback/responses provided in the questionnaire were overall positive, highlighting the benefit of respite and the friendly, professional staff. When asked what parents valued most about the service, parents expressed things such as "My child enjoys going and it is great and time for the rest of the family to recharge". Another parent noted that "Very thankful for the support and the break. Everyone in Coolatree is so nice. Thank you."". Other comments received were, In terms of feedback on the service one reported "I am extremely grateful for this service and the staff, I was so worried but they have handled everything with kindness, understating and compassion."

Suggestions for improvement included broadening the variety of activates offered to children with one parent noting "Perhaps more varied activities. Such as cinema, jumpzone, library visits etc."

St Paul's Coolatree enables children to understand the processes and policies in place through the use of child friendly documentation e.g. a complaints brochure and poster, an illustrated Charter of Rights for Children with Autism, and a Resident's Guide. The service has a child friendly Statement of Purpose in place for each Designated Centre and this continues to be reviewed annually and circulated to children and their parents. St. Paul's CFCC also has an Easy to Read Version of the Annual Report available for the service users

accessing respite.

The service operates Children's Advocacy Sessions twice per year with each service user. The aim of the sessions is to afford the children of the service an opportunity to have their voices heard on matters that affect their experience in respite (and any other matters that are important to them) and have these responded to. In this way children are supported to define the service of St. Paul's CFCC, and make requests as part of the normal running of the service. In addition, children are afforded opportunity and choice in their everyday routine, e.g. food choice and activities, amongst others.

Some children can self-advocate, and some children may require the support of respite staff and the people closest to them to communicate their views. For this reason, respite staff ensure that the (variety of) communication mode(s) that is made available to each child is in line with their communication profiles.

Staff utilise preferred / most effective mode of communication as a basis for successful advocacy daily (e.g. communication devices, Coreboards, PECS, Photos, use of Lámh, Objects of Reference, body language). Staff, particularly key workers, link regularly with parents and share information, by way of keeping up to date on the child's current interests, preferences and needs. Advocacy Sessions held this year highlighted many positive aspects including community outings such as restaurants, zoo and playgrounds, what children like to eat in their days in respite, items they like to bring from home.

Complaints

A child-friendly Complaints Brochure is in place with visuals of who the child can contact if they feel unhappy. A child-friendly complaints form is also available to children who attend Coolatree. The service Complaints Policy is available to parents through the Parent Resource Folder which is accessible in the Designated Centre. During November 2024 to end of October 2025, St Paul's Coolatree received no complaints.

Improvement Plan

The Person in Charge of Coolatree respite alongside the team of staff to review children's activities to ensure a variety of activities are offered and in line with children's ability to access the community.

Theme 2: Effective services		**Quality improvement required? Y/N** Where yes complete improvement plan
Standard 2.1	Each person has a personal plan which details their needs and outlines the supports required to maximise their personal development and quality of life, in accordance with their wishes.	N
Standard 2.2	The residential service is homely and accessible and pro- motes the privacy, dignity and welfare of each person.	N
Standard 2.3	Each person's access to services is determined on the basis of fair and transparent criteria.	N
Standard 2.4 **Adults**	Young adults are supported throughout the transition from children's services to adults' services.	N
Standard 2.4 **Children**	Children are actively supported in the transition from childhood to adulthood and are sufficiently prepared for and involved in the transfer to adult services or independent living.	N

Your findings:

St Paul's Coolatree is designed to replicate a home from home environment that promotes a good quality of life and ensures privacy and dignity in safe and secure premises. The children/adolescents are invited to bring any items from home for their bedrooms for their overnight stay to personalise their bedrooms. The garden contains a swing and water play table. In 2024/2025 the outside of the house was painted to improve the look and feel of the house, new toys were also purchased for use of the children that access respite from Coolatree Designated Centre. The Assistant Director of Service worked with Localise Youth Group to also complete a projected where the back garden of the house was repainted by a group of volunteer's to give the space a new look and feel. The aim of this is to encourage the children to enjoy and use the space.

Admissions and Discharges

The service operates admissions under a defined admissions policy. The policy was reviewed in May 2024 and a full review of all section was complete.

When referrals are made to the service, the child's name is put on a waiting list. The list is determined by date of referral. A diagnosis of Autism is an essential criterion for admission, sourced from a variety of relevant clinical reports. The care needs of the child are with the family, in order to make a well informed decision as to appropriateness of the proposed admission. St Paul's Coolatree addresses each child's placements based on appropriate peer group in order to enable each child to engage in their areas of interest and ability, whereby maximising potential to develop socially and emotionally.

From November 2024 to October 2025, St Paul's Coolatree had:

- Admissions: 6??
- Transitions out: 2
- Transitions in: 1
- Discharges: 1
- Transitions to Emergency Medical Care: 0
- Transition to Residential Care : 0
- Deaths: 0

Table 1

Dependency Level	1 (Independent)	2 (Requires Support)	3 (Requires more Support)	4 (Fully dependent)	Total
May 2025	0	13	0	3	**18**

October 2025	3	15	2	0	**20**

Transition Plans

Transition planning for all adolescents begins the year the person turns 16 in line with the service's Transition Policy. A Transition Plan is completed for each adolescent, which involves key strategies, supports and communicated wishes by the adolescent on how best to move on and settle into an adult service. The Transition Plan also contains key information from the adolescent's PCP which supports consistency between services. Transition Plans involve preparation with both the child and family. The Transition Policy for the service was reviewed in 2025 in line with service procedures.

Transition Planning also takes place for children who transition internally i.e. from one St Paul's Designated Centre to another. Transition planning was completed for all transitions that took place during November 2024 to October 2025. For example, this year two children transitioned to adult services and transition arrangements were put in place by way of:

-Completing a Transition Plan

-Linking directly with the new service where requested

Child Numbers and Dependency Levels

From November 2024 to October end 2025, St Paul's Coolatree provided a service to a total of 20 children. It currently has 20 children in the service, as detailed in **Table 1** above. Dependency levels were measured in May and October 2025.

Service Activity

During November 2024 to October end 2025, an average respite service of 96% was delivered. The reduction in respite given was as a result of sick leave, annual leave combined with staffing levels due to internal vacancies and back filling internal promotions.

Person Centred Planning

Each child that attends the Centre has a PCP which details their needs and outlines the supports required to maximise their personal development and quality of life, in accordance with their wishes. The Person Centred Plan is based on input from the child (where possible), clinicians, staff and the child's parent(s). The PCP is subject to review every 6 months and updated where required. Over the past year, non-compliances were predominantly in the areas of sending copies of updated documents to parents in a timely manner, IEPs (particularly from external children not attending St Paul's special school), intimate care plans, and risk management plan signatures.

Each child has one PCP goal which staff work with the child to achieve during their time in the service. Examples of some goals that children are working on over the past 12 months

are as follows:

- Accessing community
- Group activities, group interaction, turn taking.
- Use of communication aids
- Independent living skills – household chores, using household appliances

Two person centred plans are audited on a monthly basis and high audit scores have consistently been achieved over the past 12 months (i.e. 96.7%).

At the start of 2024 the service started the process of moving all children information to an online system called I Planit. The move from a paper based system to an online system is hoped to produce greater efficiency and collaboration when supporting the children in our care. There is an option on this system to also create a child/family view which would be very person centred allowing an easy to read interface which will allow the child/family to engage in their plan easily. St. Paulve from a paper based syste system to be fully implemented by the second quarter of 2026. Phase 1 format was complete in the second quarter of 2025 with phase 2 launching in September 2025.

Theme 3: Safe services		**Quality improvement required? Y/N** Where yes complete improvement plan
Standard 3.1	Each person is protected from abuse and neglect and their safety and welfare is promoted.	N
Standard 3.2	Each person experiences care that supports positive behaviour and emotional wellbeing.	Y
Standard 3.3	People living in the residential service 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.	N
Standard 3.4	Adverse events and incidents are managed and reviewed in a timely manner and outcomes inform practice at all levels.	N

Your findings:

St Paul's CFCC aims to have in place, best practice & policies to deal with clinical and

operational matters and update service policies on an on-going basis. St Paul's Board oversee and assists St Paul's Executive Committee in directing and monitoring progress on the implementation of key service strategies for quality and safety.

The quality and safety of the service continues to be overseen by a 'Quality and Safety Committee'. The results of scheduled quality and safety audits are reviewed and discussed at this Committee. The service recognises that quality and safety is a continuous cycle and that vigilance in this area is on-going. In 2025, two Quality and Safety Visits took place for St Paul's Coolatree. Those reports are available for viewing. The main themes identified for follow up action were relating to environmental upgrades in the house and recruitment of staff.

Child Protection

In terms of child protection, steps are taken to protect each child from abuse and neglect and their safety and welfare is promoted. All staff have completed Children's First Training. The Service Senior Social Worker has been appointed as the 'Relevant Person' for the service and has devised Child Protection Risk Assessments for the service and an updated Safeguarding Statement.

In each Centre there are named Mandated Persons and the Persons in Charge maintains an up to date list of same on record. Mandated Persons include all Social Care Workers and Person's In Charge Working in the Designated Centre.

There is a Child Protection and Welfare Committee in the service comprised of the Director of Service, Medical Director, Snr Social Worker, Principal of St Paul's Special School and Persons in Charge. Persons in Charge attend the Committee when a child whom attends their Centre will be discussed at the Committee Meeting.

Safeguarding Vulnerable Adults Training

In 2024/ 2025, St. Paul's Coolatree staff completed online 'Safeguarding Adults at Risk of Abuse' Training on HSEland where it was due.

PCP Audit Outcomes

Monthly audit of two PCP's showed evidence of good compliance by staff in most aspects.

Health & Safety Outcomes

Health and Safety Audit scores were consistently high The risks identified throughout the year were of a low rating. A three monthly Risk Register is completed by the Persons In Charge and this is populated by the incident reports, health and safety, fire risk, etc. Each Designated Centre's Risk Register informs the Corporate Risk Register.

Health and Safety is discussed at the Board, Executive Management Committee, Quality and Safety Committee and the Health & Safety Committee meetings. A

nominated staff member from each Designated Centre continues to attend the Health and Safety Committee on a rotational basis. Frontline staff are recognised as providing relevant health and safety information and have a positive impact on the health and safety of the service. St Paul's CFCC sourced specific training for those in the role of Health & Safety Representatives, given updates in Health and Safety officers, a new training date is scheduled.

St. Paul's CFCC implement an annual Health and Safety Walk around for the service. This is completed by the Mater Health and Safety Officer. Action plans can be viewed on request. There were no high-risk actions identified during this walk around.

Annual Health & Safety Questionnaires were circulated to staff for completion in October 2025. Many questionnaires were completed and returned, and the feedback/suggestions included:

⇒ Recruitment and continuous professional development

Fire Safety Regulations

Fire Safety awareness remains paramount in the service with all quality checks maintained as per fire regulations. Involvement of fire wardens is recognised as central to promoting safe practice in regards to the risk of fire. Quarterly quality assurance fire register checks for 2025 demonstrated 98% compliance. Non-compliance related to medication file in fire bag not being most up to date copy, magnet holder needing replacement battery.

Hygiene and Environmental Audit

The centre is homely and clean. Each child has their own bedroom. There is a swing and water play table in the garden which the children appear to really enjoy. There are two bathrooms. There is adequate space for all persons in the Centre and the Centre's size and layout promotes the privacy, dignity and welfare of each child. A bi-monthly Hygiene and Environmental Audits is conducted in the Designated Centre with all follow up actions closed out.

The Hygiene and Environmental Audit scores have been consistently high over the past 12 months (95 % bi-monthly average audit score). Some areas were found to require improvement and actions were taken including painting, high storage in office, outside weeds, broken bedframe. Further actions await funding and ongoing maintenance is carried out successfully as required.

Incident Analysis

The service acknowledges the high level of commitment by staff in relation to incident reporting. Incident analysis provided the service with invaluable information which informed positive behaviour support plans, risk assessments, staff needs, follow-up

safety measures and quality improvement plans both locally and throughout the service.

In St Paul's Coolatree, there was a total of 5 incidents in the 12 month period. These incidents presented as low risk and related to falls, personal injury, challenging behaviour/property damage. The learning outcomes from these incidents identified the need for:

- Update pro-active risk assessment.
- Fix fridge handle in kitchen.
- Power hose back garden to remove moss and prevent slips.
- Radiator cover to be fixed.

Overall recommendations and learning generated from incidents are shared with all staff in the service.

Restrictive Practices

The service places a strong emphasis on proactively managing a child's behaviour through Positive Behaviour Support Plans and strategies. Therefore, restrictive practices are only implemented as a last resort to safeguard a child who is assessed to be at risk.

There is a Restrictive Practices Policy in place. The service developed its own Restrictive Practice Training with the aim of developing training that is specific to the service and therefore provides staff with a clear understanding of the area of restrictive practices, their application in the service, and responsibilities on the part of staff and management. All staff mush complete the training every two years.
There is an ARC Committee in place for the formal oversight, review and approval of restrictive practices. Alongside a formal restrictive practices approval committee, parental involvement & consent are recognised as pivotal to the restrictive practice approval process.

Restrictive practices used for some children during 2024/2025 included:
- Safety Devices on service transport.
- Bedroom door alarms
- Bedroom motion sensors
- Adaptive clothing onsey

Over the past 12 months, there has been a decrease in the amount of Restrictive Practices used. Each year a Restrictive Practice Audit is undertaken by psychology. The audit took place in October 2025 with the addition on a Behaviour Specialist that now works as part of the Clinical Team in St. Paul's CFCC. The documentation pertaining to two Restrictive Practices was audited and an Observational Audit was also undertaken.

The following was found to be in place and good practice:

- Risk assessment and Management Plan completed.
- Functional assessment and analysis have been complete
- Target behaviours defined in clear behavioural terms
- PBSP devised in conjunction with MDT
- Evidence to show reportable incidents are recorded
- Evidence of clear communication with home
- Folder sections clearly delineated
- Frequency and duration data recorded.

The focus of the Quality Improvement Plan following the audit included an exploration of the use of play and capable environments across the service. Noted re daily schedule to be emphasised to children and shown not merely just displayed. Re manager adding supervision template of PBSP feedback/supports required which may be helpful in supporting staff with concerns around behaviour supports. Look at how charts and logs are framed when capturing data. The Coolatree Respite House Quality Improvement Plan (QIP) is divided across two identified themes (1) Visual Supports and (2) Interactions-opportunity for reinforcement of positive behaviour. These themes have been highlighted as they were either not evidenced (where opportunity was present) or could be improved upon as seen during the observed period.

Positive Behaviour and Emotional well-being are a focus of discussion at Monthly Meetings which staff and the clinical team attend; each child who attends the Centre is discussed at every meeting.

Each child that attends the Centre experiences care that supports positive behaviour and emotional wellbeing. There is a Clinical Team on site that provide support and training to staff in the area of Positive Behaviour Support. There is Positive Behaviour Support Plans (PBSP) in place for 2 of the 20 children that attend the Centre and it is reviewed every six months. The Behaviour Analysis in the service also conduct a yearly review of Positive Behaviour Support Plans. The most recent audit took place in September staff were praised for their work in this regard. Good practice was noted including staff creating an excellent positive atmosphere, calm and reassuring atmosphere. Interaction was appropriate (minimal) and non-intrusive, Staff showed excellent capacity to create and low arousal state.

Positive Behaviour and Emotional well-being are a focus of discussion at Monthly Meetings which staff and the clinical team attend; each child who attends the Centre is discussed at every meeting. Training in the area of capable environments was provided to

all care staff in 2025. The training aims to support staff to ensure all of the environmental supports are in place proactively for all children accessing the service in a person centred way. Further training in the area of supporting children with anxiety behaviours is planned for 2026.

Quality Improvement Plan

(1) Visual Supports: The person in charge of the house to review the available visual supports in the environment to ensure they are appropriate for the children accessing the service and ensure use where appropriate to the child.

(2) Interactions- opportunity for reinforcement of positive behaviour: The person in charge to discuss positive reinforcement during shift handovers and ensure implementation of same with all staff.

Theme 4: Health and development		**Quality improvement required? Y/N** Where yes complete improvement plan
Standard 4.1	The health and development of each person is promoted.	N
Standard 4.2	Each person receives a health assessment and is given appropriate support to meet any identified need.	N
Standard 4.3	Each person's health and wellbeing is supported by the residential service's policies and procedures for	N
Standard 4.4 **Adults**	Educational, training and employment opportunities are made available to each person that promotes	N
Standard 4.4 **Children**	Education opportunities are provided to each child to maximise their individual strengths and abilities.	N

Pre-admission Assessment

St. Paul's CFCC conducts an initial pre-admission assessment, in partnership with the parent(s) or guardian, to determine the care needs and the wishes of the child and family. This assessment of the child's social, care, health, communication and educational needs, as well as cultural, religious and ethnicity preferences, is to ensure that service provision remains tailored to each child's on-going development and changing needs.

As the children stay in the service for several years, and in line with HIQA regulation, an 'Annual Assessment' is completed (which is used in conjunction with the initial Pre-admission Assessment of personal and social care needs) which provides more updated information regarding each child. Information contained within formal clinical reports and that gleaned from disciplines and parent (s) are all used to help determine the child's annual assessment and PCP.

Health Plan

Each child has a detailed Health Plan in their PCP which is reviewed and updated annually with the parent, or more frequently where warranted. Parents are advised that information pertaining to their child's immunisation and allergy status is required by the service with the aim of ensuring the safety and welfare of each child.

Where a child has a medical condition, a medical plan will be devised, and where appropriate, an emergency response plan for staff to implement e.g. asthmatic routine care and/or asthma acute attack, epilepsy seizure plan, diabetes plan, and Anapen procedure. These plans are review annually by the Medical Director.

Medication Management

All staff in St. Paul's Coolatree are trained in the Safe Administration of Medication. Staff undertake three competency assessments following training to ensure safe administration of medication. A revised competency assessment template is now in use across all care settings. The new template provides clear direction for both the assessor and person being assessed on the specific expectations that are due during the assessment.

There is a monthly Medication Process Audit in place. The average audit score from November 2023 to October 2024 was 99%. This is an increase in comparison to the previous year. The main action points from the audits were for children's information to be updated in the medication file e.g. updated weight.

The total number of medication variances over the last 12 months was 5. A Review of

the Medication Variances found that the majority were of low risk:

⇒ Child declining medication

⇒ Compliance with SAM policy

⇒ Label errors from pharmacies

There is a procedure in place for regarding the formal handover of medication to ensure all medications are accounted for. Two medication files are audited monthly to ensure medications are administered safely.

Staff Health Training

All staff in St. Paul's Coolatree are up to date with the requirements for Cardio Pulmonary Resuscitation Training (CPR). Some are due a refresher in the coming months. There are First aid kits available for staff, contained in the Designated Centre and on service transport. The first aid kit contents are audited and a first aid audit also takes place. The average first aid audit result for Coolatree over the last 12 months has been 100%.

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Healthy Eating

The service has a Food and Nutrition Policy in place which promotes healthy eating and lifestyle. The children are provided with nutritious meals according to personal preference and are encouraged to participate in writing shopping lists and in food preparation. Communication supports (i.e. visuals) are made available to enable the children to communicate their needs and food choices. Food diaries are maintained to ensure a varied diet. Staff are vigilant around specific diets and allergies which children who attend the service have.

The service Speech and Language Therapist and Occupational therapist provided specific training on "eating" for parents and teachers in St Paul's Special school.

Physical and Emotional Wellbeing

The service is committed to enhancing quality of life for the children, with emphasis on physical and emotional well-being. St Paul's CFCC places emphasis on appropriate peer groupings to enhance emotional well-being. Healthy living including exercise, social activities and diet all aid to the physical and emotional well-being of the child.

Education

Children access school through their pre-determined education placement. The service Education Policy details the service's commitment to meeting requirements of the Health Act 2007 and Health Information and Quality Authority regulations. Information

gleamed from each child's Individual Education Plan (IEP) is requested from the child's school and/or the child's parent. In the absence of being able to secure a written IEP, information is sourced from parent

(s) in relation to their child's IEP. The service advocates for all children to attend full school hours.

Social Engagement

The children avail of many leisure activities in the wider community i.e. cafes, local parks, pet shops, toy shops, beaches, horse-riding, allotments, sensory gardens, Ice cream shops, football Children attending respite have the opportunity to socialise with peer in their respite peer group and to go on community outings in line with their individual risk assessments.

Goals Achieved

- Community outings
- Communication (progress using objects of reference)
- Brushing teeth
- Household jobs (eg, dishwasher, setting table etc)

Section 2 **Capacity and Capability**		
Theme 5: Leadership governance and management		**Quality improvement required? Y/N** Where yes complete improvement plan
Standard 5.1	The residential service performs its functions as out-lined in relevant legislation, regulations, national policies, and standards to protect each person and promote their welfare.	N

Standard 5.2	The residential service has effective leadership, governance and management arrangements in place and clear lines of accountability.	N
Standard 5.3	The residential service has a publicly available statement of purpose that accurately and clearly describes the services provided.	N
Standard 5.4	The residential service has appropriate service level agreements, contracts and/or other similar arrangements in place with the funding body or bodies.	N

Your findings:

The governance responsibility of the service is managed by St Paul's Child and Family Care Centre Designated Activity Company, hereafter referred to as the Board. The Board oversees primary areas of organisational governance, including mission and identity, policy and strategy development, staff appointment and development, financial control and public accountability. The Board is comprised of both executive and non-executive directors. In 2025 the Board had two new member join with great experience in the area of children's mental health and estates and facilities.

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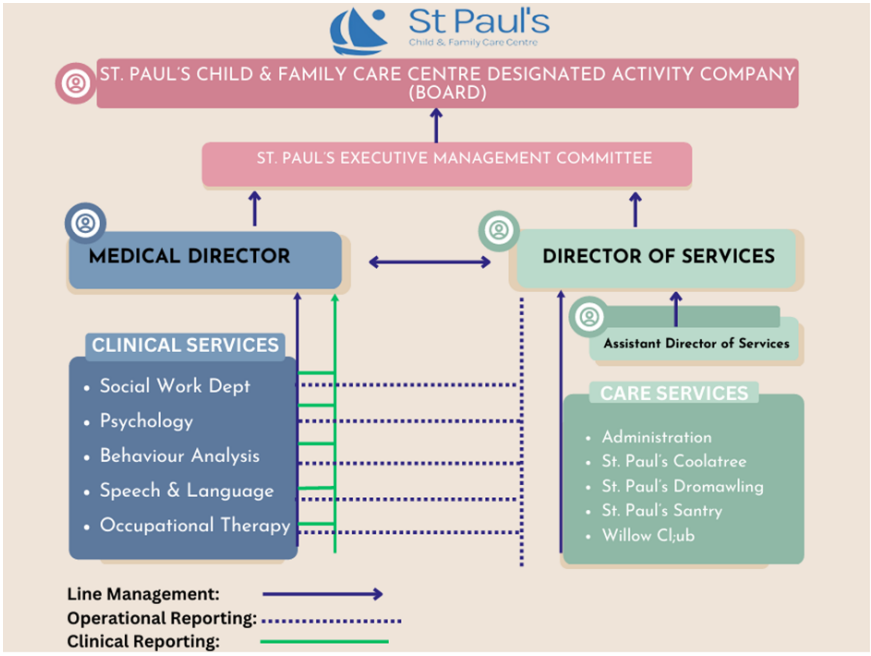

StPaul's CFCC has an Executive Management Committee which is responsible for overseeing the effective operation, delivery, and management of the respite services. The organisations structure is as detailed above.

The introduction of the National Standards for Children and Young Adults in Residential Service regulated by Health Information and Quality Authority (HIQA) is fully endorsed by the Board. These well-constructed, person centred standards are recognised to benefit the children and families who access the service. The Board continues to work closely with St Paul's Coolatree.

St Paul's CFCC faces on-going challenges to meet HSE Policy Directives. In addressing these challenges St Paul's CFCC is continuously seeking to develop more efficient and effective models of services and are currently planning for service expansion. It is important that St Paul's CFCC continues to advocate for the needs of the children awaiting services and the associated funding necessary. At time of writing, there are 14 children / families on the overnight respite waiting List.

Director of Service/Administration

The Director of Service, hereafter referred to as Director, has the principal responsibility for providing support and advice to the Service and, under the auspices of

the Board, and is charged with development and implementation of governance systems in the Service.

In addition, the Director has responsibility for the overall management of the Service in ensuring that compliance is achieved with Regulations/Standards as set out by the Health Information Quality Authority (HIQA).

The Director also provides strategic, professional and operational leadership for all aspects of the service whilst, simultaneously, adhering to the principles and values of the service in developing and delivering support. The Director advocates for the children and provides support for their families within a changing and evolving organisation.

The focus of the Director's role is on improving the children's experience and the quality and safety of the service they receive, whilst delivering agreed Key Performance Indicators and establishing a performance culture, including planning and implementing recommendations of National Policies.

The Director has a key role in creating an atmosphere and culture where excellence can flourish with strong multidisciplinary collaboration across the service and with external services.

It is again very appropriate to acknowledge, with huge gratitude, the immense contribution made by the multidisciplinary team that consists of Childcare Leaders (PICs,) Nursing, Childcare Workers and Care Assistants, Administration staff, Service Care Taker and the Clinical team as detailed below. It is recognised that staff continue to provide an exceptional level of service and care to the children in sometimes challenging circumstances especially in the current year. Staff must also be thanked and complimented for their ever willingness to proactively engage with continuous developments in the service.
The Assistant Director of Service is responsible for the oversight of service rosters, coordinating staff training and the line management of Childcare Leaders. The Assistant Director of Service has a vast amount of experience working at Senior Management Level within St Paul's CFCC and assists the Director with ensuring a quality, safe and expanding service is delivered.

Medical Director

Psychiatry in St Paul's CFCC carries three main roles spanning clinical, management and academic. Psychiatry as a medical specialty is provided by the Medical Director and mental health intervention of children attending school and respite and is provided on-site with emphasis on the co-morbidity of mental health diagnoses in children with Autism. This situation arises more frequently in this cohort of paediatrics as children with Autism and Intellectual Disability are at increased risk of Mental Health difficulties. Joint clinical and school multidisciplinary work facilitates timely intervention and monitoring.

The Medical Director takes the lead role in service development and working closely with clinical team, school and respite service, identifies additional programmes that would provide further therapeutic input for children and families. Proposals of service development are presented to the Board of St Paul's CFCC and with approval are initially explored at local level and in negotiation with our funders.

Statement of Purpose

St Paul's Coolatree has ensured the Statement of Purpose is up to date and that it accurately and clearly describes the services provided. The service also developed an Easy to Read Statement of Purpose and both documents are available for viewing.

Service Level Agreement

The service has appropriate service level agreements in place with the Health Service Executive. The agreement was submitted to the HSE in August of this year and has been officially signed off for 2025.

Theme 6: Use of resources		**Quality improvement required? Y/N** Where yes complete improveme
Standard 6.1 **Adults**	The use of available resources is planned and managed to provide person-centred effective and safe residential services and supports to people living in the residential service.	N
Standard 6.1 **Children**	The use of available resources is planned and managed to provide child-centred, effective residential services and supports to children.	N

Multi-Disciplinary Team Input

Members of St Paul's Clinical Team provide support to St Paul's Coolatree Designated Centre through attendance at its Monthly Meeting and provide training, quality practices through audits, and individual supports as required for those children who attend St Paul's Special School. Members of the clinical team provide a support role, through the Person in Charge, for children in the service with an external service provider. The types of supports provided by different clinical disciplines within St Paul's CFCC are outlined as follows and also see Theme 5 above for information regarding the Medical Directors role.

Psychology

The Psychologist provides a psychological service to children and families who attend the service to enable them to develop to their full potential and lead a good quality of life. The Psychologist provides a range of psychological services to service users and their families, together with in-service training and supports for staff. Inputs include psycho-educational assessments, diagnostic and developmental reviews, transition assessments, curricular and methodological advice to teachers, therapeutic interventions where appropriate and participation in a range of multi- disciplinary supports including positive behaviour support across settings and the delivery of parent information sessions/training for parents of children attending the St. Paul's Special School.

The Psychologist contributes to a range of regular meetings including: weekly case conferences and monthly team, respite house and restrictive practice committee meetings where children's progress and parental priorities are considered. They provide supervision and practice placements for trainee psychologists and to the collaborative process of advising on policy development.

Behaviour Specialist

The Behaviour Specialist is responsible for the provision of evidence-based behaviour support services throughout the service. Behaviour Support Services are involved in the development and implementation of service-wide Positive Behaviour Interventions and Supports (PBIS), targeted PBIS supports, and/or comprehensive behaviour intervention plans for children in the service.

The Behaviour Specialist offers advice and assistance on the implementation of Positive Behaviour Support Plans (PBSPs) that aim to understand why a child exhibits behaviours of concern, as well as supporting them to acquire new skills and improve quality of life. PBSP's are developed in collaboration with caregivers, school and respite staff and other multidisciplinary team members

Behaviour support services also provide needs-led training workshops for families and staff on a variety of evidence-based positive behaviour support approaches. Topics include; Functions of Behaviour, Toilet Training, Positive Behaviour Support Strategies and The A,B,C's of Behaviour.

Individualised PBIS coaching seasons may also be delivered to caregivers where appropriate. Support and advice is also offered to staff via attendance at monthly respite house meetings. The Behaviour Specialist will also link with PICs, key-workers and staff about specific issues on a needs led basis.

Speech and Language Therapy (SLT)

The Speech and Language Therapists (SLT's) deliver an evidenced-based Communication and Feeding, Eating, Drinking, Swallowing (FEDS) service. The SLT's are responsible for the provision of assessment and therapeutic intervention which aligns with a family centred approach. Interventions may often include staff, parent/carer training as well as information sharing and education with other professionals.

The SLT's aim to identify and support the implementation of appropriate communication and/or FEDS strategies while also focusing on managing environmental opportunities and barriers. The SLT dept. adopt an individualised family-centred, strengths based approach, advocating for unrestricted access to robust Total Communication, promoting meaningful, functional communication.

This is achieved through a triad system:

· Universal: The SLT's provide proactive supports to every student, this ensures that environments (classrooms and respite services) work in line with a Total Communication approach and that all children have unrestricted access to communication within their environment.

· Targeted: The SLT's provide individualised supports to some students where necessary and appropriate, this may focus on lite tech, mid tech, or high tech augmentative alternative communication (AAC) inputs and is person centred based on individualistic needs, desires, and abilities.

· Specialised: The SLT's provide multidisciplinary led supports to few students to address more complicated speech language and communication needs. This level may not be needed all of the time.

The SLT Department support the school staff with implementing Attention Autism group activities as well as a weekly aversive feeding group.

The SLT's can provide training on many aspects of communication to parents, respite and school staff. These are provided in-person or online. In 2023 the SLT's Department began offering a monthly 'AAC Drop in Session' for parents which provided the opportunity for parents to learn more about Alternative Augmentative Communication, ask questions and share their experiences with other parents.

Communication audits are conducted annually in the respite settings. Following this the SLT's form a communication action plan outlining ways to further promote communication support strategies for children during their stay in respite. The SLT's are also responsible for writing an individualised Communication Profile for each child attending respite and meets their key worker annually to support staff to implement the recommended communication strategies.

SLT is also involved in Person Centred Plans, Individual Education Plans, Case Conferences and also supports the integration of communication skills development into the child's day. The SLT Department are committed to supporting SLT's in training and offer student placements annually as well as regularly engaging in CPD.

Occupational Therapy

The aim of the Occupational Therapy (OT) is to support children to participate in everyday activities which are meaningful to them and which are important for their future development. As the service currently does not have an Occupational Therapist in the service a contractor is currently in place to help advise on the area of OT for children and staff in St. Paul's CFCC.

Social Work

The role of the Social Worker in St Paul's CFCC is to link in with all families of children that attend St Paul's CFCC's Respite Service and St Paul's Special School. The role of Social Work has changed over recent years due to the service changing from a residential service to delivering a respite service in the local community, a different service user group and the enacting of the Children's First Act 2015.

Social Work currently provides a number of supports to families and children. These currently include but are not limited to: advocating on a families behalf, support with securing entitlements or grants, supporting families in crisis, supporting families with practical tasks, an emotional support and outlet for some families and working with St Paul's Special School. The Social Worker Chairs both the Parents Senior and Junior Groups monthly. These meetings provide information and a social opportunity to meet other parents in a similar situation. The Social Worker also acts as the Complaints Officer for the service.

Child protection is a major component of the Social Work role. The Social Worker takes the lead on Child Protection issues in St Paul's CFCC. In addition to the mandatory training of Children's First, the Social Worker provides an annual Child Protection Awareness Talk to all staff in the service. The Social Worker is a Designated Person in the service with whom other staff can link in with if needed for assistance on Child Protection concerns and assistance with reporting their concerns to Tusla. The Social Worker is also the Relevant Person in the service who is responsible to ensure the service is complying with child safeguarding procedures outlined in the Child Safeguarding Statement and for other requirements outlined in the Children's First Act 2015.

Your findings:

The service recognises that in order to provide effective support to a child with

Autism it is essential that staff are competent and caring in the role they hold. The service commits to having an appropriate skill mix on each shift. The Shift Leader is that of a Childcare Worker or Nursing qualification. St Paul's CFCC complies fully with its service recruitment and induction policy and ensures staff compliance with National Garda Vetting Bureau.

Formal dependency levels are established on each child, assessed six monthly or more frequently as required, and overseen by the Person in Charge. A summary of the levels can be found under Theme 2 of this report. This assessment helps inform the staffing levels required. Some children will have a higher dependency level of need than others and in such cases staffing requirements are adjusted accordingly. St Paul's Coolatree staff comprises of 1wte Child Care Leader (PIC), 1 wte Staff Nurse, 3 wte Child/Social Care Workers & 2 Direct Support Workers.

Recruitment

There are safe and effective recruitment practices are in place to recruit staff. In relation to St Paul's Coolatree, a Direct Support worker progressed to the role of Social Care Worker. A Direct Support Worker post is currently being filled. The service has a team of hours as required staff that are covering any gaps in the roster to ensure service delivery to the children that are attending St. Paul's Coolatree.

Support and Supervision

Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of children attending the service. There is full time Persons in Charge in place and staff receive both informal and formal supervision. Staff also receive an annual 'Performance Achievement'.

Sick Leave

Average absenteeism for the period November 2024 to October 2025 was 3.2%.

Staff Training

The service commits to supporting the continuous professional development of its entire workforce. Staff competencies are maintained through regular mandatory training and continuous professional development. In 2024/ 2025, Coolatree staff completed additional training and educational courses such as Clinical Hand Hygiene, Fire safety, safe administration of medication, , and Safety Intervention to name a few. Staff have the required competencies to manage and deliver person-centred, effective, and safe services to children attending the service. Staff do online training via HSE-Land and HIQA websites. One staff member is in their final year of their social care degree due to be complete June 2026.

New training / information was provided to all staff in Coolatree respite in the area of

report writing and goal setting. The focus of this newly developed training is to ensure all staff comply with high standards for report writing and follow person centred, neuroaffirmative approach when developing a person centred plan for / with each child.

Theme 8: Use of information		**Quality improvement required? Y/ N** Where yes complete improvement plan
Standard 8.1	Information is used to plan and deliver person-centred, safe and effective residential services and support.	N
Standard 8.2	Information governance arrangements ensure secure record-keeping and file-management systems are in place to deliver a person-centred, safe and effective service.	N

Your findings:

St. Paul's Coolatree fully implements its organisational Communication Plan which outlines defined communication systems with all stakeholders of the service and most importantly with parents and children. As the service is now using Zoom, a Website, and a Twitter page as platforms to communicate with staff/parents/public/other parties, the Communication Plan will be reviewed and updated. The service website is also under review with the aim of adding service policies and associated information documents along with images of our respite services for a more child friendly feel. This aims to be in place for quarter 1 2025

Parents receive real time emails and correspondence, revised statement of purpose and residents guide. Families are formally notified by emails of the availability of the Annual Quality and Safety Report. Parents have also been issued with the updated Contract of Service regarding any temporary changes to service delivery due to the pandemic.

St. Paul's Coolatree ensures safe keeping of all records and confidential material. A standalone confidentiality Policy is being developed. The Data Protection and Access to Information Policy were amalgamated this year and the Healthcare Records Management Policy was fully reviewed in line with HSE guide to the standards of practice required in the management of healthcare records. The service is developing a Healthcare Record Audit Tool and were successful in applying for funding for an IT package from HSE.

Summary

St Paul's Coolatree is dedicated to providing a high-quality, safe, and inclusive environment for children, their families, and the staff who support them. The continued partnership and engagement of parents and staff are deeply valued, as their contributions play an essential role in the ongoing growth and development of the service.