

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 Dromawling

Centre ID: OSV-0003768

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

Person in charge: Mr Dean Mulligan

Report Completed: November 2023

Reported Compiled by:

Ms Niamh Salter (Director of Service)

Mr Dean Mulligan (Person in Charge)

Dr Carol Cassidy (Medical Director)

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.	N	
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 is active within the service. The Committee meets quarterly and comprises of care staff, Clinical Team representatives, a Person in Charge (PIC), parents, and external agency members. The purpose of the Rights Committee is to:

- Promote and raise awareness of rights for children in St. Paul's CFCC.
- Be a forum where parents, children/advocates can raise concerns regarding rights.
- Promote best practice in the areas of restrictive practices, human rights, dignity, equity, inclusiveness and advocacy, making reference to all organisational policies/procedures and practices pertaining to the rights of individuals with autism.

The Committee reports to the Quality and Safety Committee and any Issues of immediate concern are brought to the attention of the Director of Service / Administration and Medical Director

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.

Each child has a Communication Profile which 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 for January 2023 received a result of 100%. The next audit will take place in January 2024.

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.

Visuals to help children understand new Infection Prevention Control measures in line with

Covid19 measures were developed for the service. These attempted to support children to understand why staff may wear face masks and what social distancing is. These visuals are displayed in prominent areas of Designated Centre.

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, toy shops, 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 events throughout the year:

- 98 tickets were 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 Dromawling staff and children attend the Florence and the Machine Concert in Malahide Castle.
- Some Dromawling staff and children attend the FAI Cup final between St Pats and Bohs in the Aviva Stadium.
- Staff attended local amusements like Jump Zone, the Cinema, the circus and a variety of Museums and neighbourhood parties in immediate local area.

Some children were also provided with a place on a Summer Camp in 2023 which was funded by the HSE. St Paul's CFCC Social Worker planned and oversaw a summer camp which resulted in 19 families accessing this two 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 Rights Committee, 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. We were delighted to start to celebrate Autism Awareness Month as a service. We held an event where all families accessing the service were invited to attend an "Autism Celebration" in the grounds of our main site on the 13th of April. The service facilitated a child friendly petting farm, silent disco, ice – cream van and garden activities. A great number of families came to this event and we plan for this celebration to continue on an annual basis. We similarly held an end of summer party where families were invited to come together to mark the end of summer and return to school.

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.

Families and children were offered and utilised a segregated quiet space at St Patricks day Parade in Swords and attend Parades at various locations.

We are delighted that we are in a position to plan our Winter Wonderland event again in 2023. This will see 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 98 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 Dromawling values the feedback it receives from parents. In September 2023 we issued our annual parent's feedback questionnaire using an electronic system to attempt to increase parent's participation and feedback while also making the process easier to

complete and return. St. Paul's Dromawling saw an increase in participation using this forum.

There are currently 19 children attending St Paul's Dromawling and 5 families completed and returned the questionnaire. The feedback/responses provided in the questionnaire was extremely positive. When asked what parents valued most about the service, parents expressed things such as "I value that my child enjoys going to respite", "I value that my child enjoys going to respite". Another parent noted that respite "That she is happy going and we can relax as a family knowing she is well looked after". In terms of feedback on the service one reported "We are happy with the service. It would be good to know about dates upcoming in order to plan. We were not told what training ongoing staff are getting. This would help too. Many Thanks"

In relation to the respite house, all parents that returned the questionnaire reported that the house is clean, suitably decorated and in a good state of repair. Regarding specific support, one parent noted "We have time with our children. Our son has some independence away from us". When asked if there is any area of the service which parents feel need improvement, all parents responded "no" and one parent added "Maybe more planning in regards dates when respite next. A print out to parents or emailed". One parent expressed they were unsure regards ongoing training as they were not informed and disappointed that a "Jumper went missing".

Throughout the year, verbal feedback was also received from parents. Parents expressed gratitude for linking in with them if they were not attending the service for a while, praised staff for the commitment in continuing to provide service for the children. Two cards were received one from a parent of child transitioning another from a parent expressing gratitude to staff. Feedback included "Thank you all for taking such good care", "as a parent if a special needs child trust is very difficult indeed. So it is a big deal when I say I trust ALL of you completely...Thank you for all the patience, kindness and care you all gave... I appreciate lengths you made to accommodate our family, it really helped to make our lives that little bit easier and we will be forever grateful...".

St Paul's Dromawling 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, 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 one child's interest in charity shops. Staff then took this child to various charity shops. Child's preferable activities for the October and they went to football match in the Aviva. Advocacy Sessions also allowed staff and the Person in Charge to identify ways of tailoring each Advocacy Session to meet communication needs of each child.

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 Dromawling. The service Complaints Policy is available to parents through the Parent Resource Folder which is accessible in the Designated Centre. During November 2022 to end of October 2023, St Paul's Dromawling received no complaints.

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	N
Standard 2.2	The residential service is homely and accessible and promotes 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 Dromawling 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 bedrooms are painted in various colours, selected by them and personalised for their overnight stay with favourite items from home. The garden contains playground equipment including a swing and there is a 'Snoozelen' Room for relaxation and sensory input.

In 2023 new carpet was installed in hall stairs and landing. We updated the sensory room, and some new household appliances were also acquired.

Admissions and Discharges

The service operates admissions under a defined admissions policy. The policy was reviewed in March 2023 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 discussed by a Multidisciplinary Team and with the family, in order to make a well informed decision as to appropriateness of the proposed admission. St Paul's Dromawling 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 2022 to October 2023, St Paul's Dromawling had:

- Admissions: 4
- Transitions out: 0
- Transitions in: 0
- Discharges: 2 (at parents request)
- Transitions to Emergency Medical Care: 0
- Transition to Residential Care : 1 (finishing school)
- Deaths: 0

Table 1

Dependency Level	1 (Independent)	2 (Requires Support)	3 (Requires more Support)	4 (Fully dependent)	Total
May 2023	1	13	3	2	19
October 2023	2	11	4	1	18

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.

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 2022 to October 2023. For example, this year one child transitioned out of this service and transition arrangements were put in place by way of:

- Facilitating the HSE with Transition Arrangements
- Completing a Transition Plan
- Linking directly with the Residential Service.
- Visiting residential service and risk assessing property.

Child Numbers and Dependency Levels

From November 23, a total of 20 Children attended Dromawling Respite. One child was demitted upon leaving school in June.

One child's parents declined Respite for two months, but has re-engaged.

A Third child transferred was demitted upon family request. An additional two of three children took up respite from June when the school year ended. One child accepted a place but did not follow through on offer in July/August 23.

Currently 18 Children receive Respite in Dromawling, as detailed in Table 1. Dependency Levels were measured in May and October 23.

Service Activity

During November 2022 to October end 2023, an average respite service of 95% 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 Pauls 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 achieved over the past 12 months are as follows:

- Accessing community, visiting new places
- Making bed
- Independently using toiletries (tooth brush, deodorant)
- Toileting (In-progress)
- Independent use of communication aids

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. 97%).

Improvement Plan	Action/Resources	Timescale
<ul style="list-style-type: none"> Some Person Centred Plans (PCPs) were not reviewed within the required timeframe. Due to number of new intakes, and PCPs being at the development stage. As well as change of keyworkers at various points throughout the year. 6 monthly reviews where not always done in the correct time frame. 	<ul style="list-style-type: none"> PIC and staff to ensure PCPs are complete and reviewed within the required timeframe. Remind staff of obligation to have a review with key working service users and their families, within the statutory time frames. 	<p>By 31st December 2023.</p> <p>ASAP</p>

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.	N	
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 2023, two Quality and Safety Visits took place for St Paul's Dromawling. Those reports are available for viewing.

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 and all staff complete a Child Protection Briefing from St Paul's CFCC Snr Social Worker in September 2022. The Snr 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. He has also devised a new procedure for the reporting of body marks noted on a child, to make the reporting process happen in real time and to ensure it is more robust.

In each Centre there are named Mandated Persons and the Persons in Charge maintains an up to date list of same on record.

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 2022/ 2023, St. Paul's Dromawling staff completed online 'Safeguarding Adults at Risk of Abuse' Training on HSEland.

PCP Audit Outcomes

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

- Goal setting, implementation of goals, communication and behaviour passports, fire evacuation procedures, keyworker information and reporting, communication profiles and recording information appropriately.

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 Pauls special school), intimate care plans, and risk management plan signatures.

- 6 monthly review timelines not met in all PCP reviews.

Health & Safety Outcomes

Health and Safety Audit scores were consistently high (average score: 97 %). 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. In 2021 the MMUH Health and Safety Manager joined the Committee and are an invaluable assets. 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 2023. Many questionnaires were completed and returned, and the feedback/suggestions included:

⇒ Need for further recruitment to avoid closures and cancelations and allow for annual

leave

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 2023 demonstrated 98% compliance. Non-compliance related to medication file in fire bag not being most up to date copy.

In 2020 Health Information Quality Authority released new guidelines in relation to fire safety. The service reviewed its practices against these guidelines and have complete an action plan to ensure full compliance. Some initial steps have been taken including: training all staff in the service to be fire wardens, completing an inspection on all fire doors in the Designated Centres, the introduction of a “grab bag ” to support children if they are needed to be evacuated in case of fire. The action plan could be reviewed on request. Following feedback from a HIQA inspection in one of our Designated Centre we implemented a new system where children practice evacuating from both the upstairs of each Designated Centre and the downstairs during twice yearly fire drills. This has been implemented and working well.

Staff have annual training and also in person fire extinguisher training annually.

Hygiene and Environmental Audit

The centre is homely and clean. Each child has their own bedroom. There is play equipment in the garden which the children appear to really enjoy. There are three 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.

As mentioned, the Centre is clean- there are cleaning schedules in place and bi-monthly Hygiene and Environmental Audits are conducted. Cleaning is now carried out more frequently since the COVID-19 pandemic and a professional deep clean will take place in the near 2024. Staff have received training in Infection Prevention and Control in light of the pandemic.

The Hygiene and Environmental Audit scores have been consistently high over the past 12 months (92 % bi-monthly average audit score). Some areas were found to require improvement and actions were taken including painting, broken rad cover outside weeds and the purchasing of new equipment. 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 Dromawling, there was a total of 12 (this year) incidents in the 12 month period. The majority of incidents related to challenging behaviour that presented low/medium risk. Others related to falling, personal injury and fire alarms. The learning outcomes from these incidents identified the need for:

- Staff to monitor and understand baseline behaviours and to use communication passports and other risk assessment tools and information to deal with service users individually based their needs.
- Effective management of challenging behaviours particularly during transitions or when managing in different environments (e.g. house v outdoors or on service transport).
- Risk assessment and Management Plan completed.
- Restrictive practices reviewed implemented and frequency and duration charts completed to monitor behaviours.
- Use of communication/transition aids

Overall recommendations and learning generated from incidents are shared with all

staff in the service. Slight increase in incidents, due to a particularly short period of time where challenging behaviour was present and proactive strategies developed to deal with the same.

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 must 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 2023 included

- Safety Devices on service transport.

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 March 2023. The documentation pertaining to two Restrictive Practices was audited and an Observational Audit was also undertaken (score: 90%). 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 updated safety intervention training and adaptations to documentation used to Records of the use of RP to ensure most relevant data is gathered to validate either continued use of RP or validate trailing non-use.

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 1 of the 18 children that attend the Centre and it is reviewed every six months. The Psychologists in the service also conduct a yearly review of Positive Behaviour Support Plans. The most recent audit took place in March/ April 2023 and the audit score was between 85 - 100% across the different elements of the audit. The overall score of 90%. 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. Staff were judged to be in a state of “watchful waiting” making appropriate use body language. They responded to service user at a level appropriate and connected emotional state. Staff followed service user’s lead and allowed space and time to settle. Visual supports were available and appropriate as was a schedule.

In terms of what required improvement, nothing the approach of staff is fully understood and agreed. Positive behaviour support is not prescriptive- in the mood and personality of the service user is a key determinant that needs to be incorporated into any child-centred experience.

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

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	

Your findings:

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. There is currently one Medical Plans in place for one child who attends the Centre.

Medication Management

All staff in St. Paul's Dromawling are trained in the Safe Administration of Medication. Staff undertake three competency assessments following training to ensure safe administration of medication.

There is a monthly Medication Process Audit in place. The average audit score from November 2022 to October 2023 was 98%. 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; and home addresses and photos.

The total number of medication variances over the last 12 months was 9. A Review of the Medication Variances found that the majority were of low risk.

The variances alerted the need for:

⇒ Largely due to issues around labelling from pharmacy, from dose matching Kardex, and prescription, to expiring dates and labels noted on refill medication. Labels is the responsibility of parents and staff to make sure the prescription have the same instructions as the label, identify the same child, route, administration time and are in date. On-going guidance for parents, prescribers, and staff as to their role in compliance with the Safe Administration of Medication Policy.

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 Dromawling are up to date with the requirements for Cardio Pulmonary Resuscitation Training (CPR). 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 Dromawling over the last 12 months has been 97%. Areas of deficiency where out of date Normasol expired 23 Medi swap, and eye patches.

Basic First Aid training took place in September 2022 and further training is scheduled for December 2022 and is scheduled for November 23 as a refresher.

Training in the administration of emergency medication such as Midazolam occurs once a year to ensure competency in this area. Anapen training has also provided to staff by the Medical Director to meet the needs of a child attending respite service.

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 gleaned 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 LAMH signs)
- Brushing teeth
- Toileting

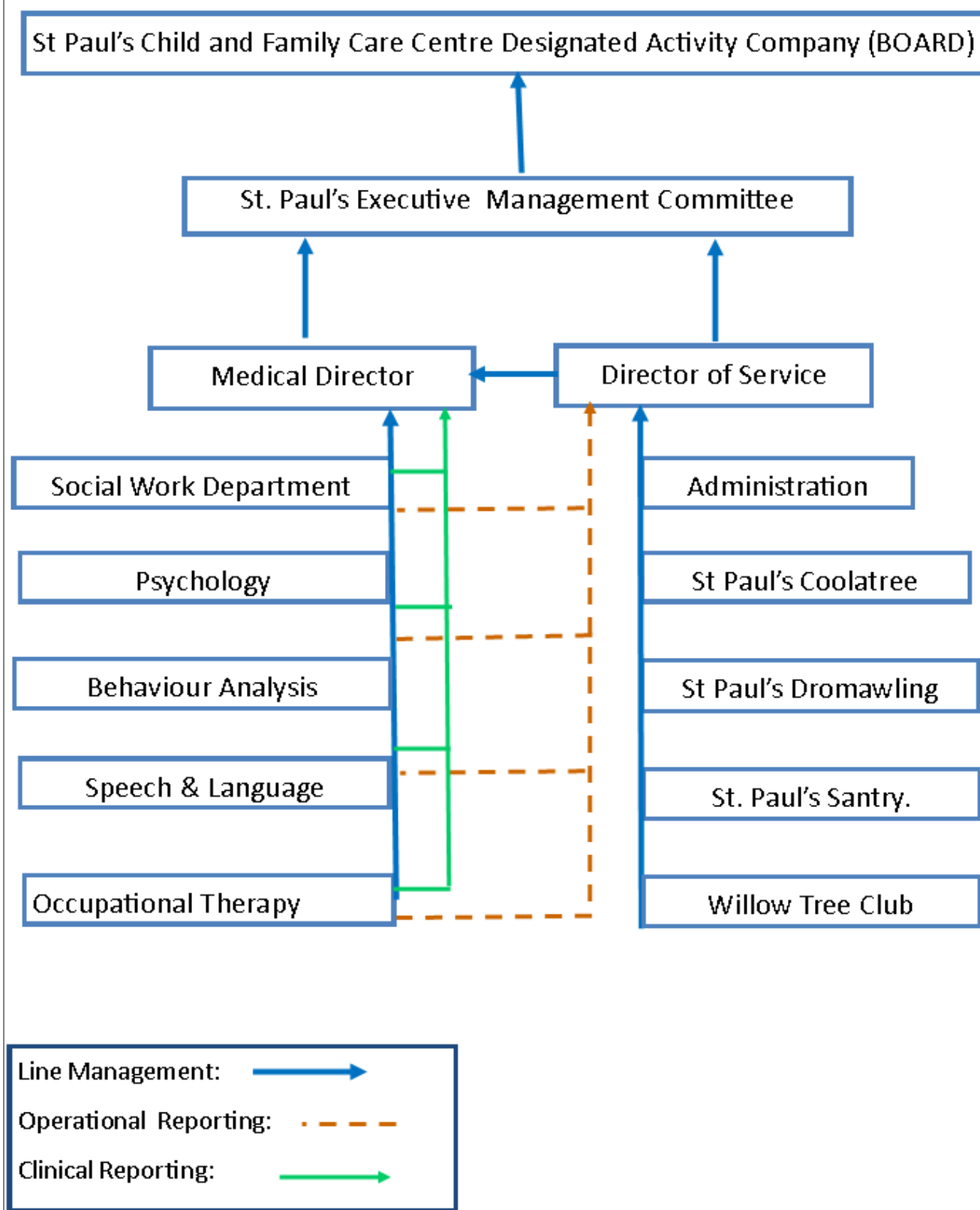
Improvement Plan	Action/Resources	Timescale
Assessing peer groups to optimise peer suitability and positive risk taking opportunities, including goal setting and achievements.	<ul style="list-style-type: none"> • Peer interaction. • Community participation • Risk assessments • Discussions with stakeholder (parents, children, school etc) 	12 months

Section 2 Capacity and Capability		
Theme 5: Leadership governance and management		Quality improvement required? Y/N Where yes complete
Standard 5.1	The residential service performs its functions as outlined 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.

St. Paul's Service Organogram



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 below.

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 Dromawling.

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 24 children / families on the 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 will assist the Director with ensuring a quality, safe and expanding service is delivered.

In April of 2022 HIQA visited St. Paul's Dromawling and carried out announced inspection. The feedback was very positive, concerns regarding bathroom noted and due to be looked at and funded by service.. This report can be viewed on the [HIQA website](#).

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 Dromawling 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 2023

Theme 6: Use of resources		Quality improvement required? Y/N Where yes complete improvement
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

Your findings: Use of Resources

The service has managed to deliver 92% service delivery for residential respite during this period November 2022 – October 2023. No COVID – 19 outbreaks occurred. We continue to review our use of resources to ensure a safe and quality service is provided. Staffing has issue in 2023 and the service have adapted its services to match this challenge. Recruitment campaigns have progressed during this year.

Multi-Disciplinary Team Input

Members of St Paul's Clinical Team provide support to St Paul's Dromawling 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 service Senior 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 provide 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 providing evidence-based behavioural consulting services to assist staff 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. Individualised PBIS coaching sessions may also be delivered to caregivers where appropriate. Support and advice is also offered to staff, through the Person in Charge (PIC) and via attendance at monthly respite house meetings as well as during respite house meetings for all children in the service. The Behaviour Specialist will also link with PICs, key-workers and staff about specific issues on a needs basis.

Speech and Language Therapy (SLT)

The work of the Speech and Language Therapist involves assessment of speech, language and communication skills and provision of therapeutic input, which may be in the form of consultative, collaborative and/or pull out sessions in the therapy room. Therapeutic input also involves individual and group training for families and staff, coaching on specific communication techniques, support at home, in school or in respite, and introduction of and training on the use of alternative and augmentative communication systems and techniques. The SLT Department support the school staff with implementing Attention Autism group activities as well as a weekly aversive feeding group. 2020 has seen the introduction of tele-therapy in St. Paul's with many families availing of this alternative means of intervention. We also have a Speech and Language Therapy students on placement with us in St. Paul's.

The SLT's can provide training on many aspects of communication to respite and school staff. Communication. Audits are conducted annually. SLT is also involved in Person Centred Plans, Individual Education Plans and also supports the integration of communication skills development into the child's day. SLT liaises regularly with respite staff, teachers and parents and attends annual case conferences to provide feedback to the team and discuss communication goals. The SLT Department encourage all staff working in the service to

create a Total Communication environment for the children which includes using Lamh, visuals, Objects-of-Reference and assistive technology.

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.

OT does this by considering the following 3 components:

1. **The child:** their current strengths and challenges, their current motor skills, sensory processing skills, social skills, play skills, and their interests and motivations.
2. **The environment:** the everyday physical, natural and social environments a child uses.
3. **The child's occupations:** the everyday activities they need to or want to do (e.g. dressing, feeding, toileting playing, school work)

There are three levels of OT support:

Universal- At this level OT supports St. Paul's Special School and St Paul's CFCC respite services in ensuring the environments support participation. Over the last 12 months examples of this have been supporting the respite houses in developing and resourcing sensory spaces in the environments, supporting the school in purchasing equipment for PE and working collaboratively with teaching, speech and language therapy and psychology to develop a progress monitoring system for pupils which was shared with school principal in Sept 2022. OT also provided advice for the purchasing of some resources of the day respite services which is currently being established.

Targeted- OT, along with speech and language therapy (SLT) and psychology, meet with class teachers in St. Paul's Special School half termly to discuss current barriers and to prioritise and plan therapy at that time. Over the last 12 months examples of targeted

interventions have included class based programmes to enhance play skills, to develop handwriting skills, to develop independence in toileting and to motivate participation in PE lessons and whole group lessons. Alongside SLT, OT also introduced the Fun with Food programme to 5 of the classes in school which saw all participants, approx. 30 children, make notable progress in terms of their confidence to be around and try new foods. In addition to contributing to the annual induction workshops for new families to the service OT also worked with psychology and the behaviour specialist practitioner to provide a 3 part parent workshop series on the topic of understanding and addressing challenging behaviour and worked with SLT to provide training sessions for parents and respite staff in understanding and addressing feeding related difficulties.

Intensive- At this level OT works directly with a child and family to carry out assessment and/ or to address significant barriers to participating in daily activities. The ability to offer this level of support was initially limited this year as full service delivery gradually returned following the removal of Covid-19 restrictions. Over the last 12 months OT provide direct blocks of assessment and intervention to support parents to understand and support their child's sensory processing differences to 2 families, provided consultation and intervention to support a young person return to school after an extended period of school refusal, provided consultation to 3 families in understanding behaviours they were experiencing at home that were causing distress or concern and implementing interventions to reduce the negative impact they were having on the child and families well-being.

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 Dromawling staff comprises of 1wte Child Care Leader (PIC), 3 wte Staff Nurse, 1 wte Child Care Workers & 2 wte Care Assistant (one vacancy is currently being recruited for).

Recruitment

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

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'. In 2022 the service reviewed and updated the Supervision Policy and in 2021 developed a Performance Achievement Framework and Policy in line with the new HSE Framework. All within St Paul's CFCC completed HSE Training in this area. The new "Performance Achievement policy is being implemented in the service.

Sick Leave

Average absenteeism for the period November 2022 to October 2023 average 4.6% of which 2.5% is LONG TERM SICK LEAVE by 1 WTE. Real time sick leave 2.1%. Covid Leave is 3% (NOT included in total SM).

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 2022/ 2023, Dromawling staff completed additional training and educational courses such as Clinical Hand Hygiene, Fire safety, safe administration of medication, PICA support, 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 being supported to complete their level degree in social care whilst working in Dromawling house.

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 Dromawling 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, a Twitter page, and an App (Siilo) 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.

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 Dromawling 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 Dromawling is committed to the provision of a quality and safe service to the children and their families and a safe place for staff to work in. The on-going commitment from parents and staff is acknowledged and without whom the service could not continue to grow and develop.