

Health Information and Quality Authority Regulation Directorate

Monitoring Inspection Report on children's
statutory residential centres under the Child Care
Act, 1991



Type of centre:	Children's Residential Centre
Service Area:	CFA DNE CRC
Centre ID:	OSV-0004174
Type of inspection:	Unannounced Full Inspection
Inspection ID	MON-0017154
Lead inspector:	Niamh Greevy
Support inspector (s):	Una Coloe

Children's Residential Centre

About monitoring of Children's Residential Centre

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

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

The Authority monitors the performance of the Child and Family Agency against the National Standards for Children's Residential Services and advises the Minister for Children and Youth Affairs and the Child and Family Agency. In order to promote quality and improve safety in the provision of children's residential centres, the Authority carries out inspections to:

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

Compliance with National Standards for Children's Residential Services

The inspection took place over the following dates and times:

From:	To:
22 March 2016 14:00	22 March 2016 19:00
23 March 2016 08:30	23 March 2016 19:00

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

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

The table below sets out the Standards that were inspected against on this inspection.

Standard	Judgment
Theme 1: Child - centred Services	
Standard 4: Children's Rights	Requires improvement
Theme 2: Safe & Effective Care	
Standard 5: Planning for Children and Young People	Requires improvement
Standard 6: Care of Young People	Meets standard
Standard 7: Safeguarding and Child Protection	Meets standard
Standard 10: Premises and Safety	Requires improvement
Theme 3: Health & Development	
Standard 8: Education	Requires improvement
Standard 9: Health	Requires improvement
Theme 4: Leadership, Governance & Management	
Standard 1: Purpose and Function	Meets standard
Standard 2: Management and Staffing	Requires improvement
Standard 3: Monitoring	Meets standard

Summary of Inspection findings

The centre was a detached two story house located in a residential area of North Dublin. The service provided medium to long term care to four young people from the ages of 12 to 18 years. The area was well served by facilities like schools, public transport and shops. At the time of the inspection, there were 4 children living in the centre.

During this inspection, inspectors met with or spoke to 4 children, 1 parent, managers and staff. Inspectors observed practices and reviewed documentation such as statutory care plans, child-in-care reviews, relevant registers, policies and procedures, children's files and staff files.

Inspectors found that the centre provided a child centred service. Records and observations of staff interactions with children showed that children were respected and cared for. While overall, the quality of care provided by the centre was good, a number of areas required improvement within the relevant standard.

In a number of instances, areas for improvement were identified in relation to actions reportedly taken by the service, where inspectors were unable to verify these actions through written records. This is relevant to complaints, the management of behaviour that challenged and governance systems. Other areas for improvement related to some children not having identified educational supports, improvements being needed in relation to the management of medication and unqualified staff working in the centre.

Considerable efforts were made by staff to provide individualised care and support to children. It was evident during the inspection that children were happy living in this centre and that they had good relationships with staff. The service was provided by a stable and experienced staff team who had a unified approach to working with children from a strengths based perspective.

Inspection findings and judgments

Theme 1: Child - centred Services

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

Children's rights were promoted by the centre but some need for improvements were identified in regard to the recording of the outcome of complaints. Children were routinely given information about their rights on admission to the centre and the wishes of children informed decision making. The strengths based approach of the service fostered a warm and supportive environment. Children in the centre reported they were happy living there and got on well with staff.

Standard 4: Children's Rights

The rights of young people are reflected in all centre policies and care practices. Young people and their parents are informed of their rights by supervising social workers and centre staff.

Inspection Findings

Children's rights were respected and promoted within the centre. Children told inspectors that they felt listened to and inspectors found evidence the service was responsive to the needs of children.

Children were generally aware of their rights and supported to exercise them. As part of induction to the centre, children were routinely given information about their rights. Children had their own rooms and told inspectors that their privacy was respected. Children knew how to make a complaint and had access to independent advocacy services. Some children were appointed a Guardian ad Litem. Children had not accessed their records in the 12 months prior to inspection and some children did not know that they could do this.

Children were involved in decision making within the centre by participating in regular children's meetings, contributing to personal planning and participating in care planning. Children attended their child in care reviews, except where they made a decision not to attend. Where children had particular issues, they were supported to express their views to reach a fair solution.

Inspectors found that complaints records detailed how complaints were responded to but improvements were needed in relation to the recording of outcomes to complaints. While records showed that complaints had been dealt with, it was not always clear if the complaint was upheld, if the complainant was satisfied with the outcome of the complaint and where a complaint related to a number of issues, it was unclear from records if each aspect of the complaint was addressed.

Judgment: Requires improvement

Theme 2: Safe & Effective Care

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

The quality of care received by children was good. Inspectors found that a strengths based approach informed how the centre worked with children and this was effective in supporting children. Children were positive about their experience of living in the centre and their relationships with staff. Inspectors found that children were involved in planning for their care and there was evidence that plans were generally effective in improving outcomes for children. Inspectors also found that families were welcome in the centre and reported that they were kept well-informed. Some records did not reflect the level of work reported to be taking place in the centre to support children around behaviour that challenged. Overall, however, the service was proactive in taking measures to keep children safe and there was an increase in the reporting of significant events based on the findings of a recent monitoring inspection.

Standard 5: Planning for Children and Young People

There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. This plan states the aims and objectives of the placement, promotes the welfare, education, interests and health needs of young people and addresses their emotional and psychological needs. It stresses and outlines practical contact with families and, where appropriate, preparation for leaving care.

Inspection Findings

Inspectors found that admissions to the service were safe and in line with the centre's statement of purpose. Admissions and discharges to the centre were managed through a committee. Inspectors found evidence of pre-admission risk assessments that identified appropriate risks and control measures for children prior to their admission to the centre. Children understood why they were living in the centre and inspectors found that records clearly outlined the different stages of children's induction into the centre. For example, visits prior to admission, parents visits, being familiarised with their rights and rules in the house were at the front of files, marked off with dates of completion.

Children participated in planning for their care and inspectors found evidence that these plans had improved outcomes for children. Every child had an allocated social worker who they saw regularly. Care plans contained a good assessment of children's needs. However, the quality of actions based on the assessment of need was varied. For example, it was clear on some plans that actions were completed between child in care reviews and updated actions were included on the later plan. However, other plans contained out of date tasks and it was not always clear who was responsible for implementing actions. Inspectors found evidence of gaps where child in care reviews were overdue but on the day of inspection, all plans were up to date.

Inspectors found that relevant people were involved in planning for children and placement plans addressed actions identified in care plans. The centre was in the process of introducing a new placement plan format so current placement plans were not signed on the day of inspection. Placement plans were specific and gave clear guidance on what areas children needed support with.

Inspectors found that the centre valued contact with families and supported children's relationships with family and peers. Inspectors saw that family members were welcome in the centre and were kept informed of what was happening in their child's life. An issue that arose for one young person was the inability of staff to provide transport to and from contact visits with family. This issue was brought up at the young person's child in care review and the centre were expecting to reach a resolution. Children reported that friends were also welcome in the centre.

There were strong relationships between staff and young people, and it was apparent to inspectors that children were valued and respected by staff. Staff worked from a strengths based approach and advocated for children.

Inspectors found that discharges from the centre were appropriate and the centre was proactive in obtaining aftercare supports for children approaching 18 years of age. Children were being supported to develop independent living skills. Where young people were approaching 16 years of age, it was identified as part of their placement plan that staff should write to the social work department requesting a referral to aftercare and an aftercare needs assessment should commence. The centre continued to have contact with young people who had left their care and children were familiar with some past residents.

Inspectors found records to be of good quality and well organised, but some records did not reflect work reportedly carried out. Children's files were organised, up-to-date, stored securely and contained the necessary documentation. The centre manager reported that files were monitored regularly by the deputy manager but inspectors did not find documentary evidence of this. In addition to this, some records did not reflect the plans and direct work with children reported by the centre manager to be in place to manage behaviour that challenged.

Judgment: Requires improvement

Standard 6: Care of Young People
Staff relate to young people in an open, positive and respectful manner. Care practices take account of young people's individual needs and respect their social, cultural, religious and ethnic identity. Staff interventions show an awareness of the impact on young people of separation and loss and, where applicable, of neglect and abuse.

Inspection Findings

Children were encouraged in their hobbies and supported to get along with each other. Where children were in the centre, mealtimes were a relaxed, social point in the day

and for young people who spent much of their time away from the centre, dinners were set aside for their return. Children were supported to learn to cook, in line with their personal plan and they reported positively about the food available in the centre. Children were supported in relation to any diverse needs and work was carried out with young people where they showed discriminatory behaviour.

Staff worked in a co-ordinated way to address behaviours that challenged. The strengths based approach of the service underpinned how staff approached behaviours that challenged. Inspectors found evidence that this approach was effective in reducing incidents of some behaviours that challenged such as poor school engagement and children going missing from care. During the inspection, inspectors identified that there was room for improvement around the management of behaviour. In response to this, the centre manager outlined the efforts made to engage with children around behaviours that challenged and plans in place to manage this, but acknowledged that these efforts may not be fully represented by centre records.

No physical interventions had been used by staff in the 12 months prior to inspection but alarms were in use on bedroom doors during the night. Following inspection, the centre manager informed inspectors that they had been instructed by the acting alternative care manager to carry out individual risk assessments on the use of these alarms. An Garda Siochana had been called to the house once to manage an incident of behaviour. The last monitoring visit to the service identified that the threshold for calling An Garda Siochana was too high. On the day of inspection, inspectors found that clear direction had been given from the Regional Manager on this issue.

Ensuring the safety of children who were waiting for a placement in a secure setting was a challenge for the service. It was evident during inspection that the relationships between young people and staff were at the core of how the centre functioned, and that these relationships had endured incidents of behaviours that challenged. Inspectors found evidence that the safety of children had improved following their admission to the centre but some children were assessed as needing a secure placement in order to provide the structure needed to address their behaviour. The most recent inspection by the monitoring office had identified that the service were underreporting incidents of behaviour and inspectors found evidence that the centre had taken action to rectify this issue. However, inspectors found that the plan in place to address incidents of escalated behaviour did not contain sufficient detail to direct staff around how to safely de-escalate the situation. Inspectors discussed this with the centre manager who described in detail how incidents were being managed by the staff team and advised that this was planned for at the start of each shift. Inspectors did not find written evidence of this plan and the centre manager acknowledged that the crisis management plan could be improved to reflect the plan in place.

Judgment: Meets standard

Standard 7: Safeguarding and Child Protection

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

Inspection Findings

Appropriate measures were in place to safeguard and protect children. While inspectors found that no issues had been referred to the social work department in the 12 months prior to inspection, staff were aware of how to manage child protection concerns. Some staff had additional training in areas such as how to manage suicidal ideation, internet safety and disclosures of sexual abuse. Staff were also confident that any issues brought to management would be taken seriously. Incidents were being reported appropriately, strategy meetings were held in line with policy and there was evidence of good communication with An Garda Siochana. Inspectors found that a system was in place to track the number of absences from the centre and this system had been reviewed and improvements made as identified. Where it was identified that some children required a secure placement to meet their needs, the centre was managing their safety through individual plans, weekly reports to the social work department and communication with managers. On foot of the monitoring officer's visit to the service, an incident was risk escalated to senior management. Staff continued to engage with young people engaging in risk taking behaviour but as noted under standard six, inspectors did not find sufficient written evidence of individual work to address some behaviours that challenged.

Judgment: Meets standard

Standard 10: Premises and Safety

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

Inspection Findings

The centre was a well-maintained, spacious and nicely decorated two storey house. All young people had ensuite bedrooms and had the option of customising their room. The centre had an up-to-date health and safety statement and monthly health and safety audits were in place. The centre's vehicle was appropriately taxed and insured.

There were regular checks in respect of fire but recording around fire drills needed to be improved. Fire fighting equipment was serviced appropriately and fire checks were completed consistently. While fire drills took place regularly, there was no record of who took part in drills in order to ensure oversight of participation in drills. Appropriate signage was displayed in the centre and all staff currently working in the centre were appropriately trained in fire safety.

Judgment: Requires improvement

Theme 3: Health & Development

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

Overall, the health and educational needs of children were met by staff. The centre was working with children to maintain or improve their engagement in education but this was a challenge for the service where other issues in children's lives were impacting on their ability to engage in education. The service was successful in engaging children with therapeutic supports and was proactive in addressing any health issues that arose. Areas of improvement were identified in relation to the management of medication and having no identified educational placement for some children.

Standard 8: Education

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

Inspection Findings

Three out of four children were engaging in educational supports. The centre had a clear understanding of the children's educational needs and had plans in place to support children at appropriate levels. Where children did not have an identified educational placement, this was identified as a goal in their placement plan and needed to be addressed. Children's right to education was being promoted by the centre. Inspectors found evidence of good engagement between the centre, educational supports and parents. Some children had engaged in state exams and the centre was working with young people to engage them in mainstream educational supports, where this was not already the case. On moving into the centre children were supported to maintain their educational placement.

Judgment: Requires improvement

Standard 9: Health

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

Inspection Findings

Children accessed healthcare services appropriately and were supported to engage in therapeutic services. Children were encouraged to make their own appointments, as appropriate. The service promoted a healthy lifestyle, although these efforts were not always evidenced in records. Medical consent forms were on files.

Medication management practices needed improvement. The policy on administration of medication outlined the responsibility of the centre staff team to administer medication in line with how it was prescribed. However, the systems in place did not support safe medication administration practices. Medication was stored appropriately but records did not reflect when medication was returned. Some medications on site did not have a relevant administration sheet and the centre did not have a copy of prescriptions on site.

Judgment: Requires improvement

Theme 4: Leadership, Governance & Management

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

The management of the service provided good leadership to the centre. An ethos of respect, and a strengths based approach was evident in all aspects of work with children. The centre's statement of purpose reflected the service offered by the centre. A risk register was in place in the service but risk management systems were being further developed at the time of inspection. A governance report had been implemented in the centre, but inspectors were made aware of this following inspection. The service is provided by a stable and experienced staff team but not all staff had appropriate qualifications at the time of the inspection. While recording systems were good, some records did not reflect the work reportedly carried out by staff. Overall, the management team had developed good systems to provide oversight of the service, that identified areas where practices within the centre could be improved.

Standard 1: Purpose and Function

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

Inspection Findings

The centre had a statement of purpose that met the criteria outlined under the standards. The statement of purpose described the values that underpinned the approach taken by staff working in the centre. A shorter version of the statement of purpose was available for children. There was a discrepancy between the long and short form of the document in relation to the capacity of the centre. While the document provided a detailed outline of the type of supports offered by the centre, some areas needed to be described in a more generalised way, so as to broadly capture the support on offer.

Judgment: Meets standard

Standard 2: Management and Staffing

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

Inspection Findings

The centre was managed by a full time manager who also worked two nights per week. The centre manager was supported by a deputy manager, particularly in relation to administrative duties, and a number of team leaders who had supervisory

responsibilities. Staff within the centre reported to the centre manager who in turn reported to the alternative care manager. The alternative care manager reported to the regional manager, who reported to the national director of children's residential services. As part of this inspection, inspectors interviewed the acting alternative care manager, who was covering while the usual alternative care manager was unavailable.

Strong leadership came from the manager of the centre. Staff were aware of their responsibilities and were influenced by the manager in their approach to working with young people. The manager reported meeting regularly with the deputy manager to review issues arising in the centre, get updates in relation to audits and paperwork but written records were not kept in relation to these meetings.

Team meetings were used well to communicate regarding the needs of children. A comprehensive agenda was in place for these meetings but not all items on the agenda were discussed. While at times, this was due to having no update on some areas, at other times issues of risk were not discussed where there were relevant issues that warranted discussion. The needs of children were the subject of much discussion and there was evidence of consideration around how staff could support their rights. On the day of inspection, there was a gap in the records of team meetings for a period of six months in 2015 and an area for improvement was identified in relation to consistently recording decisions made.

There were good quality reviews of the management of incidents in the centre. The deputy manager held significant event review group meetings to look at all incidents that occurred in the centre. These meetings were held regularly and were clear in identifying any follow up actions needed and learning from events. There was also evidence that some of these actions were complete and reviewed at the following meeting. These records did not show how decisions were made to escalate incidents to the local area significant event review group and complaints made within the centre were not discussed by this group. Significant event notifications were sent promptly and where an issue regarding underreporting of incidents was identified by the monitoring officer, action was taken to resolve this.

Governance systems were being developed further in the area, but the alternative care manager provided good oversight of the service. The alternative care manager visited the centre regularly and was in at least weekly phone contact with the centre and deputy centre managers to discuss any issues within the service. The alternative care manager viewed documents on site during visits to the centre and also conducted various audits in relation to the centre. The acting alternative care manager told inspectors that the a governance report had been implemented in the service but inspectors did not have access to this document during the inspection. The centre held a register of children that contained all necessary information.

The centre had good risk assessments in place to manage various risks within the centre. A risk register was in place that identified appropriate controls and risk ratings for existing risks. There was an understanding that issues of higher risk needed to be escalated but the system in place to determine this threshold, was under development at the time of inspection. The acting alternative care manager advised that risks were escalated to the local risk register and from there to the regional risk register but inspectors did not have access to these documents for this inspection. A significant

incident occurred within the twelve months prior to inspection whereby the gardai were not called to manage an incident of behaviour that resulted in staff being assaulted. Following a visit by the monitoring officer, this incident was risk escalated and direction was given by the regional manager, that staff may not have any option but to call Gardaí where the safety of staff or children is in question.

Inspectors found administrative files were clear and orderly but sometimes management meetings were not recorded. For example, the centre manager reported having regular meetings with the deputy manager to discuss issues such as behaviour management, record keeping and staff issues but no written records of these meetings were kept. Clear financial management systems were in place.

The staff team was stable and experienced, but not all staff were appropriately qualified. The acting alternative care manager informed inspectors that efforts were underway to address this issue, but inspectors did not see documentary evidence of this. Staff were generally vetted by An Garda Síochána but some staff member's vetting did not have the necessary stamp. Job descriptions and contracts were not on staff files but there was evidence that the staff team engaged in ongoing training. A number of staff members had become team leaders, had undertaken supervision training and were in a position to guide the team if managers were unavailable. Due to the challenges present in the house at the time of inspection, agency staff were being used to provide additional support to the team. It was evident from the staff roster that the service were relying on the same agency staff in order to maintain consistency. One staff member was on long term sick leave at the time of inspection.

Overall, supervision took place regularly, with occasional gaps between sessions. The quality of supervision relating to the needs of young people was good. Goals and key working plans were sometimes discussed but individual work with young people was not consistently talked about. Progress against personal plans was not consistently discussed at supervision and performance management was not evident from records. However, training and development to broaden the skills of staff was sometimes discussed in supervision with evidence of plans to improve knowledge and understanding around key issues. Records could be improved to reflect clear decisions and actions arising from supervision.

Staff were up to date with respect to training, except for three staff who did not have up to date training in first aid and one staff who was overdue refresher training in behaviour management. Some staff had supervision training but inspectors did not have access to the centre manager's training records. Otherwise, staff had additional training in a range of areas relevant to the needs of children using the services, such as suicide awareness, smoking cessation, cultural diversity and drug use. It was evident from records that staff were engaging in ongoing training in relation to core areas and relevant issues.

Judgment: Requires improvement

Standard 3: Monitoring

The Health Service Executive, for the purpose of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements

are in place to enable an authorised person, on behalf of the Health Service Executive to monitor statutory and non-statutory children's residential centres.

Inspection Findings

The monitoring officer had visited the centre in January and February 2016 and inspectors found most changes were implemented in the centre based on recommendations from this visit. Inspectors did not see the report from this visit as it was in draft form but the monitor reported receiving prompt significant event notifications from the centre and found the centre was responsive to any issues identified.

Judgment: Meets standard