

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-0004177
Type of inspection:	Unannounced Follow Up Inspection
Inspection ID	MON-0017666
Lead inspector:	Catherine Vickers
Support inspector (s):	Una Coloe

Children's Residential Centre

About monitoring of children's residential services

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

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

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

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

Compliance with National Standards for Children's Residential Services

The inspection took place over the following dates and times:

From:

28 June 2016 10:00

To:

28 June 2016 16:00

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 2: Safe & Effective Care	
Standard 5: Planning for Children and Young People	Requires improvement
Standard 10: Premises and Safety	Requires improvement
Theme 3: Health & Development	
Standard 9: Health	Requires improvement
Theme 4: Leadership, Governance & Management	
Standard 1: Purpose and Function	Requires improvement
Standard 2: Management and Staffing	Requires improvement

Summary of Inspection findings

The centre was a detached 8 bedroom house with a front and rear garden in a busy Dublin city suburb. The centre provided medium to long term care for four children from the ages of 13 to 18 years. The aim of the centre was to work with children using a relationship model of care, to enable them to meet their full potential and to equip them with life skills for the future. 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, 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.

The purpose of this inspection was to review the actions undertaken as result of a full inspection (ID 742) of the service carried out on 14 to 15 October 2015. At the time of the last inspection, five standards were met, one standard was exceeded and four standards required improvement. Areas that required improvement included information provided on admission, placement planning, the Health and Safety Statement, medication management, the centre's register, risk assessments and the centre manager's supervision. This inspection found that children continued to receive good quality care in the centre and that their rights were well respected and promoted. Some actions remained outstanding since the last inspection such as placement plans, medication management and management systems.

Inspection findings and judgments

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.

Children received a good standard of care in the centre. Children were supported to maintain their relationships with families and peers. The premises was homely and well maintained. The last inspection identified a number of areas which required improvement and while some of these areas had been addressed by the centre, there were still some areas outstanding including information received by children on admission, placement planning and fire safety systems.

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

The last inspection identified a need to ensure children were provided with adequate and up-to-date information upon admission to the centre. Inspectors were provided with a copy of admission booklets for children. These showed that they remained unchanged since the last inspection.

Progress had been made in relation to placement planning however further improvement was required. There were four children living in the centre at the time of the inspection and records showed that they each had an individual placement plan on file. However placement plans for two of these children had not been updated since the last inspection. A third child's plan was developed by the centre whilst an up-to-date care plan was awaited, and inspectors found that it reflected their assessed needs. The centre manager told inspectors that a new placement plan was designed and was being implemented regionally on a pilot basis. Records showed that the centre had piloted this new template for a recent admission. Inspectors reviewed this plan and found that it did not reflect the actions set out in the child's care plan, tasks were not clearly identified and timeframes for their implementation needed to be reviewed to maximise their effectiveness. The centre manager said that staff were trained in relation to completing the new placement plans and that updated placement plans were due to be developed for all children using this new template.

The last inspection of the centre found that children's files stored for archiving were not kept in flame retardant filing cabinets and that this practice was not risk assessed. On

a walk around the centre inspectors found that these files continued to be stored in the centre, and the centre manager confirmed to inspectors that risk assessments had not been carried out.

Judgment: Requires improvement

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 continued to be well maintained since the last inspection and it provided a homely environment for the children living there. The last inspection identified a need to revise the centre's health and safety statement and to provide evidence of insurance. The centre manager provided inspectors with copies of the centre's health and safety statement which showed it was up-to-date and centre specific. Documentation reviewed by inspectors showed that the centre was adequately insured.

Inspectors reviewed records related to fire safety checks carried out by centre staff on a daily and weekly basis. They showed that although there were good systems in place to guard against fire, there were times when staff did not record carrying out daily checks of fire equipment. The centre manager told inspectors that they had oversight of these records but this was not evident in centre documents. Gaps in records of daily fire equipment checks were not completed retrospectively once they were identified, and this meant that they remained unaccounted for in centre records.

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.

The health needs of children living in the centre were appropriately assessed and met. Staff advocated for children and ensured that prompt medical attention was sought and received when required. There were improvements required since the last inspection in relation to policy on the management of medication and this remained outstanding.

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

Inspectors reviewed records related to children's health care needs and found that their

needs were well met. Records also showed that children had timely access to the services and treatments they required. Each child was registered with a general practitioner.

Care records reviewed by inspectors demonstrated effective direct working with children in relation to their health, and key working sessions were used to explore issues such as sexual and mental health and personal safety which promoted children's health and well being.

The last inspection identified a need to revise the centre's policy on medication management. The centre manager told inspectors that a national policy on medication management was in the process of being developed and once it was finalised it would be disseminated to all centres and staff would receive the required training. In the interim, inspectors found that there was no change to the centre's policy on medication management.

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 last inspection identified a need for improvement in relation to the statement of purpose, the centre register, risk assessments and the provision of supervision. This inspection found that although practice had improved in some areas, further improvements were required.

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 and function and it was identified during the last inspection that it needed to be reviewed to clearly reflect the level of complex needs the centre had the capacity to meet. The deputy centre manager provided inspectors with a copy of the centre's current statement of purpose and function and said that this had been reviewed and updated however the reviewed statement of purpose did not clearly identify the cohort of children whose needs it could meet and in turn, ensure that the centre was resourced to meet those identified needs.

Judgment: Requires improvement

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

This inspection found that there were improved systems in place to ensure the centre was well managed on a day to day basis, but further improvements were required in relation to risk management and systems of reporting concerns about children.

Inspectors found that there was a recently introduced system of monitoring the effectiveness of the centre by external managers. The centre manager told inspectors that they were now required to send reports to their line manager on aspects of the service related for example, to planning children's care, staff supervision and training, centre risks, significant events and concerns about children. The centre manager said that centre governance reports were introduced to the centre in April 2016 and that the centre completed backdated reports from January 2016 onwards.

Supervision of the centre manager had improved since the last inspection and inspectors were provided with documentation which showed that the centre manager was supervised in line with Tusla policy by the alternative care manager. A schedule of supervision showed that this was carried out on a six weekly basis.

The centre's register did not reflect a shared care arrangement which was in place during the last inspection. Although the child in question was now discharged from the centre, the centre manager assured inspectors that there was a new system of recording in place in relation to the centre's register. The centre manager said that this system would ensure all similar arrangements would be reflected in the centre's register in future.

Various risk assessments continued to be carried out by the centre and they were timely and of good quality. However some risk assessments were not carried out, for example in relation to safe storage of records awaiting archiving. Records showed that there was a system in place to review risk assessments to ensure risks were reduced. The centre had a risk register and this was provided to inspectors. It accounted for the majority of risks in the centre but not all, for example bullying and property damage. The register did not reflect the level or grade of each risk and therefore, it did not support the manager to identify reductions or increases in risks over time. The centre manager said that they were continuing to improve on practice in this area.

Records showed that staff training had improved since the last inspection. All staff were trained in core areas of practice and gaps in training were addressed. A training needs analysis had been carried out which took into account the individual needs of the children being cared for in the centre. The centre manager identified the need for staff training in medication management and said that this would be provided when the new national policy was finalised.

Inspectors found that there were improved systems in place to record, report and review significant events and child protection concerns. Records showed that the centre

manager had oversight of these reports and the centre manager told inspectors that they had recently introduced a system of formally reviewing each incident for practice improvements. Inspectors found a written record of these reviews in relation to some but not all incidents. The centre manager said that this was because this was a new system and that they were in the process of reviewing the remaining incidents. Reviews read by inspectors were found to be of good quality and included recommendations and follow up actions required, however they were not routinely signed by the centre manager. Centre reports clearly demonstrated the efforts of staff to ensure a prompt response from other professionals when required. There was evidence of good individual support and follow up work being carried out with children in relation to some significant events, but this was not found to be the case in relation to all.

Inspectors were satisfied that bullying was well managed by the centre staff team and manager and levels of supervision in the centre were adequate. However, systems of reporting concerns about victims of bullying were not adequate and needed to be more robust. While staff verbally informed social workers about incidents of children being bullied, these incidents were not formally reported to children's allocated social worker as significant events or child protection concerns.

Judgment: Requires improvement

Acknowledgements

The inspector wishes to acknowledge the cooperation and assistance of all the people who participated in the inspection.