

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-0004179
Type of inspection:	Unannounced Full Inspection
Inspection ID	MON-0017757
Lead inspector:	Catherine Vickers
Support inspector (s):	Niamh Greevy

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: 26 July 2016 09:30 To: 27 July 2016 16:30

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	Meets standard
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	Requires improvement
Standard 10: Premises and Safety	Requires improvement
Theme 3: Health & Development	
Standard 8: Education	Meets standard
Standard 9: Health	Requires improvement
Theme 4: Leadership, Governance & Management	
Standard 1: Purpose and Function	Requires improvement
Standard 2: Management and Staffing	Requires improvement
Standard 3: Monitoring	Meets standard

Summary of Inspection findings

The centre was a large purpose built detached six bedroom house located in the Dublin North East region. The centre provided medium to long-term residential care for up to four young people, male and female, between the age of 12 and 18 years old on admission. The aim of the centre was to provide a positive experience of care that met children's individual needs and fostered positive relationships. The key working model in place formed the basis of the therapeutic work within the centre. At the time of the inspection, there were 3 children living in the centre.

During this inspection, inspectors met with or spoke to 3 children, 2 parents, 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 also spoke with children's social workers.

In this inspection, HIQA found that of the ten standards assessed:

Four standards were met

Six standards required improvement

Children told inspectors that they were safe and well cared for in the centre. Children were aware of their rights and knew how to make a complaint if they wished to do so. They said that staff treated them well and consulted them on decisions about their lives. Staff was caring and respectful of children.

Children had allocated social workers who met with them in line with regulations and children said they had sufficient contact with their social workers. Children were clear about the plans for their care and participated in the development of these plans. However, care plans and placement plans required some improvements.

There was a considerable reduction in the number of significant events in the centre since the last inspection. Sanctions and restrictive practices were used in the centre and were found to be proportionate.

Education was valued by the centre staff and children were encouraged to reach their educational potential.

Children's health needs were assessed and they had access to health and specialist services however, improvements were required in relation to the management of medication.

The centre was well managed on a day-to-day basis and the management structure in place provided clear lines of responsibility and accountability. There was a full complement of experienced staff who had been working at the centre for some time. This provided a stable and consistent living environment for children. Risks in the centre were well managed. Significant events were appropriately recorded, reported and reviewed. Supervision in the centre was of good quality. Quality assurance mechanisms were in place but some required improvements.

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.

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 by staff in the centre and staff provided children with adequate information in this regard. Children told inspectors that they were aware of their rights.

Staff demonstrated a good knowledge of children's rights and supported children during one-to-one sessions and at children's meetings to exercise their rights. A staff member was allocated the role of Children's Rights Officer and was responsible for ensuring children were made aware of their rights upon admission. Children received a comprehensive induction which included information in relation to their rights and advocacy services available to them. Some information in relation to rights in the induction pack needed to be updated and staff said that this had been requested. Inspectors spoke with children's family members who said staff respected and promoted the rights of children and provided a child centred service. Family members advised that there was a focus on children's rights at the admissions meeting. Families were provided with written information which explained entitlements and the complaints procedure.

Staff encouraged children to actively participate in decision-making about their lives and the day-to-day running of the centre. Children's meetings occurred regularly within the centre and provided children with the opportunity to express their views about various aspects of their care including meal planning, activities and general requests. Inspectors reviewed the minutes of these meetings and saw evidence of requests made by the children being followed up. Children attended their child-in-care reviews and they said that their voices were heard at these meetings. Children were consulted by staff through one-to-one sessions and regular opportunity led discussions. Inspectors found evidence of a meeting being held as an opportunity for one child to air their particular grievances at that time. There was appropriate follow-up arising from this meeting.

Some children met with representatives of an independent advocacy service and this was supported by the staff team. Each child had two allocated keyworkers from the

staff team who they could confide in and who advocated on their behalf. Social workers told inspectors that children's rights were respected at the centre and that staff supported children to prepare for their child-in-care reviews and any other meetings held in relation to them.

Children had their own bedrooms, space to store their belongings and their right to privacy was respected by staff.

Complaints were effectively managed at the centre. Children told inspectors that they were clear about how to make a complaint and were supported to do so. Children were aware of alternative avenues for addressing concerns including speaking with their allocated social workers and external advocacy services. Children were provided with information relating to complaints upon admission. There was a complaints register which recorded complaints and their date of conclusion. There were 13 complaints made in the 12 months prior to inspection. Inspectors found that these were dealt with in a timely manner, referred to external professionals such as the children's social workers and that appropriate follow-up work was carried out with children. Inspectors found appropriate details were recorded about each complaint including; the outcome of each complaint, satisfaction of the complainant and details of any follow up action taken. There were managerial systems in place for the oversight of all complaints.

Judgment: Meets standard

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.

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

Planning for children was generally of good quality but there were some areas identified for improvement.

Admissions were managed through a central referrals committee and there was a clear policy and procedure to guide this process. The centre manager said they received adequate information in relation to referrals from social workers and that the staff team gave input in relation to decisions made about admissions. Clear and comprehensive

pre-admission collective risk assessments were completed in consultation with children's social workers and the centre manager. Inspectors reviewed pre-admission risk assessments and found that they were of good quality and explored all relevant risks and benefits of the placement, the potential impact of the risks on the child and other residents and the actions needed to manage each risk. Transition plans were put in place for each child deemed suitable for admission, which consisted of extended day visits and overnight stays over a two week period. This was to give children the opportunity to become accustomed to the environment and to further determine if the placement was suitable. Relevant family members also visited the centre as part of the transition plan. Children told inspectors that they received an information pack and a full induction upon admission to the centre. There were four admissions to the centre in the 12 months prior to the inspection. The children currently living at the centre were appropriately placed.

There were four discharges from the centre in the 12 months prior to the inspection. There were no records available in the centre for inspectors to review in relation to these children but the centre manager said that although some discharges were not in accordance with the children's original care plan, they were discharged in a planned manner. Although efforts were made by the centre to ensure discharges happened in a positive way, one social worker said that a child who they were allocated to was discharged from the centre in an untimely way, and that this was a negative experience for the child. The social worker said they were given time to source a suitable alternative placement to meet this child's needs, prior to discharge taking place. The social worker said they would have supported this child's placement to be sustained at the centre, but acknowledged the impact this would have had on other children living there. There was evidence that staff attended debriefing sessions following the breakdown of this placement, which provided an opportunity for staff to reflect and share learning from this experience.

All children had allocated social workers and records showed that children were visited in line with regulations. Children told inspectors that they were satisfied with the frequency of social work contact. Social workers, who spoke with inspectors about children currently living at the centre, said they were satisfied with the quality of care being provided and that staff kept in regular contact with them in relation to progress being made. They said that staff were proactive in ensuring that the needs of children were met and that there was a positive rapport between children and staff.

Children had up-to-date care plans on their files but these varied in quality. Some care plans were detailed with clear actions identified however others were brief, unspecific and did not cover the main issues of the child's life. Care plans on file were not always signed by the relevant parties. One social worker said that the centre had made a request for more details to be added to a child's care plan.

Child-in-care reviews occurred in line with regulatory requirements and children and their families participated in these. When a child chose not to attend their child-in-care review, staff from the centre and their allocated social workers met with them to ascertain their views and put these views forward at the meeting on the child's behalf. Inspectors found evidence of a child's views about access being discussed at their child-in-care review and then taken into consideration when developing the access plan.

After care planning for young people over the age of 16 was of good quality. One young person over the age of 16 had an allocated after care worker and a comprehensive after care plan was in place. Records showed that an appropriate after care placement and a further education course had been identified and secured. This young person said that they were satisfied with their after care plan and they were clear about what to expect. Staff supported and encouraged this young person in the development of independent life skills on a day-to-day basis and through regular individual keyworking sessions. There was also an ongoing proactive approach to support children of all ages to develop life skills such as budgeting, household chores and cooking. One of the children had an occasional part-time job and said that they enjoyed this.

There were placement plans on file for each child however the quality of these varied. One placement plan did not reflect the most recent care plan and did not contain current information about the child. The placement plans for the two recent residents were in the process of being drawn up on new placement plan templates. Staff had received training in relation to the completion of these templates. These placement plans were in the early stages and contained good details about actions needed, however they were not fully completed and further information was required for several sections. This did not affect the good level of care being received by the children.

Staff supported and promoted access with family and friends in line with the arrangements set out in children's care plans. Records showed that family members visited the centre as appropriate and that children were facilitated to meet with them outside the centre. The staff team provided transport for access when required. Children's views were taken into consideration in relation to the amount of family contact they wished to have. Children told inspectors that they were satisfied with the current access arrangements. Inspectors spoke with some family members who said that they felt access plans were going well and they felt welcome when they visited the centre. Social relationships with friends were encouraged and promoted and children were supported to see their friends from home, engage in activities in the local community and participate in group activities with other children living in the centre.

Children were referred to appropriate external services according to their needs including mental health and therapeutic services. Records showed that staff engaged with external professionals and ensured that children availed of appropriate and effective supports.

Centre records were found to be of good quality and managed in accordance with legislation. However, inspectors found some information about children held on other children's files. This was brought to the attention of the centre manager and was rectified. Records were detailed, legible and well organised. Children's files were held securely and there were appropriate systems in place in relation to archiving.

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 well cared for in the centre. Staff members encouraged children to keep up their hobbies, to try new activities and expand their interests. Children told inspectors about activities they were supported to participate in, such as girl guides, horse-riding and sports. Records showed that children engaged in activities of their choice. During the inspection, inspectors observed children being taken on outings to leisure facilities by staff. Staff members spoke positively about children's talents and encouraged their participation in activities on an ongoing basis.

Children received a basic rate of pocket money and were provided an opportunity to earn more by completing extra tasks. Children received an allowance for clothing and were facilitated to buy clothes in line with their tastes and preferences.

Children participated in meal planning and had a nutritious and varied diet. Children had input in relation to choosing the weekly menu and the menu was decided at the children's meetings. Children were encouraged by staff to participate in the preparation and cooking of meals. Staff said that meal times in the centre were a positive and social event and inspectors observed children spending time together in the kitchen with staff.

Achievements and special occasions were acknowledged at the centre. Birthdays were celebrated and one family member told inspectors that they were invited to such a celebration. A leaving dinner was held for a child who was recently discharged.

Children spoke positively about staff and said they felt comfortable living in the centre. Inspectors observed staff and children interacting and found that staff treated children in a respectful and caring manner. Records showed that regular one-to-one and key working sessions were carried out with the children and that they were emotionally supported by staff on an ongoing basis. Inspectors spoke with family members who said there was a warm and nurturing environment in the centre and that their children's emotional needs were met by staff.

There were longstanding issues of behaviour that challenged, including bullying, in the centre and in February 2016, managers made the decision that this could no longer be safely managed. Plans were put in place to find suitable alternative placements for some children. The number of incidents of behaviour that challenged, including bullying, considerably decreased in recent months, and this was reflective of the mix of children who currently lived at the centre. Records showed that staff took the issue of bullying seriously and that this issue was escalated to appropriate parties and referred to external professionals such as the children's social workers and the Child and Family Agency Monitoring Officer. Records showed that proactive approaches were taken to attempt to resolve the issue of bullying including increased supervision, individual work with children and provision of respite for children. Records showed that victims of bullying were emotionally supported in one-to-one sessions and that referrals to external professional supports were made. Children, staff and the centre manager said

that bullying was no longer an issue and that the current mix of children was working well.

The centre had a model of behaviour management in which staff were trained. There were plans in place for each child to guide staff on how to respond to any event or crisis that may occur such as placement support plans, individual crisis management plans and individual absence management plans. However, inspectors found that some individual crisis management plans were not signed or reviewed in a timely way. The centre contacted An Garda Síochána (Ireland's National Police Service) due to behavioural management issues on some occasions. The centre manager and staff said that the decision to call Gardaí would be made if a child was deemed to be at risk of harming themselves or of harming someone else. Inspectors reviewed an incident in the centre where the Gardaí had been called and found that this was an appropriate action in the circumstances.

Sanctions were in place in the centre and they were well recorded on children's files. Inspectors found that house rules and sanctions were clearly established with children during the admissions process. Sanctions records documented the reasons for the sanction, the details of the sanction used, the duration, how it was intended to address behaviour, where external appropriate professionals were informed and the child's response. Inspectors reviewed sanctions records and saw that sanctions used were proportionate and well recorded.

Restrictive practices were used in the centre, such as physical restraints. Inspectors reviewed the register of physical restraints and found that physical restraints had been used by staff on four occasions in the previous 12 months. Inspectors found that the use of physical restraints in these incidents was appropriate and was recorded and reported adequately.

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

There were effective systems in place to safeguard children and protect them from abuse. There was a safeguarding policy in the centre which was in line with Children First: National Guidance for the Protection and Welfare of Children (2011). The majority of staff had received updated training in Children First (2011) however some staff members required a refresher course. Staff demonstrated a good knowledge about their role in safeguarding children.

Staff implemented safe care practices and there was a good level of supervision of children. There were arrangements in place for staff to know where children were at all times and to keep in contact by phone. Keyworking and one-to-one sessions were carried out with children in relation to keeping themselves safe. Staff were aware of the

safeguarding issues in relation to social media and children's access to technology and this issue had been risk assessed with control measures put in place. Children said they felt safe living at the centre and that they would go to a staff member if they had a concern. Inspectors spoke with parents and relatives of the children who said their children were kept safe in the centre and that they received regular updates from staff about any issues going on for the children.

There was a system in place to report child protection concerns to social work departments and to make notifications to other professionals. The centre manager was the designated liaison officer as per Children First (2011) and was aware of their responsibilities in relation to child protection. Inspectors saw evidence that child protection concerns were discussed at staff team meetings as part of the agenda. Child protection concerns were well recorded on children's files and in a child protection notification folder. There had been two child protection concerns in the previous 12 months. One of these child protection concerns was notified by the centre to a social worker and the other child protection concern had been reported to the centre by a social worker. The child protection notification folder did not reflect the incoming child protection concern reported to the centre by a social worker. It would benefit the centre to broaden the scope of the child protection folder to include all child protection concerns in the centre, in order to ensure that this information was easily accessible. Both child protection concerns were adequately followed up by the centre and social workers, and they had been concluded by the time of this inspection. While one of these child protection concerns indicated that there had been gaps in supervision and vigilance at the centre, these gaps were subsequently addressed in an appropriate and timely manner.

The previous inspection identified that some risk assessments carried out did not reflect the potential for abuse by staff. The centre implemented appropriate changes in relation to how such risks would be recorded. There had been no allegations against staff in the 12 months prior to inspection.

Social workers told inspectors that the centre was in regular contact with them and provided regular and timely updates about children. Records showed that social workers were included in the development of safety plans.

Some staff members recently had their Garda vetting updated however, several staff members did not have up-to-date Garda vetting on their files. The centre manager said that they were in the process of applying for up-dated vetting for all staff.

As an additional safeguard, alarms were placed on each child's bedroom door. Staff told inspectors that the purpose of this was to alert sleeping staff of when children left their room at night. The centre had carried out a general risk assessment in relation to the use of the child protection alarm system, however this did not include risk assessments for the use of this practice for individual children. Inspectors found that there was no evidence of rationale for this practice with the current children living in the centre.

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 was purpose built and provided a spacious and homely environment. On a walk around the centre, inspectors found it was well maintained and in good condition. The centre was appropriately lit, heated and ventilated with adequate furnishings. Children had their own bedroom and there was space in the house to provide them with a place to have quiet time or to meet with their family and social workers in private.

Inspectors reviewed the health and safety statement and found that it was up-to-date and centre specific.

A staff member was the allocated health and safety officer of the centre and inspectors found that monthly health and safety checks were carried out consistently. The health and safety checklist recorded hazards in the centre that needed to be addressed by staff or maintenance and was signed by the centre manager. However, it did not clearly record if the required tasks identified had been carried out or the dates of completion of these. The alternative care manager had implemented a new system of carrying out health and safety audits in the centre. One health and safety audit had recently been carried out by the alternative care manager at the time of the inspection. As this health and safety audit system was in its early stages, it was not possible for inspectors to assess its effectiveness.

There were effective fire safety systems in place in the centre. The centre had a fire safety register which contained all required information and an up-to-date inspection had been carried out by a fire safety officer. On a walk around the centre, inspectors found that fire safety equipment was in place and appropriately maintained. Monthly inspections of fire fighting equipment were carried out consistently by the deputy manager and any faults identified and actions taken were clearly recorded. Emergency lighting and fire alarms were tested on a quarterly basis by a qualified fire safety contractor. Weekly fire checks were consistently carried out by staff and records were up-to-date. Attendance at fire safety training was reviewed by the deputy manager and staff members recently attended this.

All staff had received up-to-date training in First Aid.

The centre manager had a system for ensuring that maintenance issues in the centre were carried out in a timely way, however this was not clearly recorded.

There was no formal emergency plan available in the centre. The centre manager said that in the case of emergency, staff knew to contact the manager on-call and suitable arrangements would be made.

The centre vehicle was appropriated taxed and insured and copies of up-to-date staff

drivers licences were kept on file.

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.

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

Education and training was valued at the centre and staff encouraged and supported children to attend. Children were supported to complete state examinations at secondary school and to participate in further study. Records showed that appropriate educational assessments were carried out in relation to identifying children's individual learning needs with appropriate supports put in place.

Staff were ambitious for children to complete formal examinations and participate in further education and encouraged children to do so. Staff were proactive in identifying appropriate school placements for two children who recently moved to the centre. One young person was engaged in a vocational training course in an area of their interest. Staff worked with this young person to identify and secure further educational opportunities.

Staff communicated with school personnel and attended meetings in relation to educational placements. There were copies of school reports and examination results on children's files. Individual work was carried out with children in order to encourage and promote their engagement in full-time education.

Inspectors spoke with family members who said staff were supportive of children's attendance at school and that children's educational needs were met in the centre. Social workers said that staff were proactive in helping to secure educational placements for children.

Judgment: Meets standard

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's health needs were assessed and they had access to health services and specialist services as required. A healthy lifestyle was promoted in the centre on day-to-day basis and through individual work with children. Medical records were stored securely in children's files and care plans and placement plans provided an overview of children's health needs.

Children had access to general practitioner, dental and optical services as required. Specialist services such as mental health services, occupational therapy and therapeutic supports were available and utilised as necessary. Records showed that children were supported to attend follow-up medical visits.

Children had medical cards on file. There were immunisation records on file for each child.

Systems to improve medication management practices were recently implemented in the centre, however this was in its very early stages. The centre kept a central log of medication and children had individual medication files. Staff did not always sign or co-sign relevant forms when they administered medication and there were gaps in some records. The centre manager acknowledged this and provided inspectors with new in-house guidelines that had very recently been developed. The centre manager said that these new guidelines would be used while the centre was awaiting the implementation of a new national policy and training in relation to medication management. These new centre guidelines contained information in relation to recording information, storage of medication, prescriptions, over-the-counter medication and the self-administration of medication. As this system was only recently introduced, it was not possible for inspectors to ascertain its effectiveness.

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.

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 which specified the nature of the service, its basis in legislation and the model of service delivery. However, it did not include the date of approval or date for review.

While the statement of purpose contained details about the admissions process, it did not clearly identify the level of complex needs of children that the centre was resourced to meet.

At the time of inspection, the centre was operating in line with its statement of purpose and all the children living at the centre were appropriately placed.

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

There was an effective governance structure in place with clear lines of responsibility and accountability. The centre was managed on a full-time basis by a suitably qualified and experienced manager who had been in the role since 2004. The centre manager was well supported by a deputy manager. The centre manager was line managed by the alternative care manager who reported to the regional manager for residential services. Leadership in the centre was strong and staff said they felt supported in their roles. There was a regional on-call system in place to provide support to the centre outside of office hours.

There were systems in place to provide oversight of the performance of the centre. The alternative care manager regularly visited the centre and reviewed care practices during on-site visits. Inspectors found that there was a recently introduced system of monitoring the effectiveness of the centre by external managers through a centre governance report. The centre manager provided inspectors with the most recent governance report which provided an overview of planning for the young people in the centre, staff supervision and training, centre risks, significant events and concerns about the young people.

There were quality assurance mechanisms in place in the centre. The centre manager and deputy manager monitored care practices in the centre on day-to-day basis and they routinely reviewed and signed off on records such as children's files, the risk register, staff meeting minutes and health and safety checks. However, there were gaps in some records being signed such as some significant event notifications, care plans and the handover book. Regular audits were carried out in the centre, however these varied in quality. Audits of centre records such as the centre register and the significant events register were carried out to ensure quality of practice. However, these

audits did not result in a written report being developed in order to support learning. Other audits were carried out in relation to staff supervision and these audits clearly recorded what was required and identified areas needed for improvement. A new system had been put in place for the alternative care manager to carry out health and safety audits at the centre. At the time of the inspection, one health and safety audit had been carried out by the alternative care manager and inspectors reviewed this. This audit looked at various health and safety items, the actions required and dates for completion. The completion of audits provided an opportunity to assess practice and drive improvement in the centre.

Following the breakdown of a placement of a child with complex behaviour, debriefing sessions were organised for staff which provided opportunities for learning and identified further areas of required training.

Where new national policies were awaited in relation to care practices, the centre put interim measures in place in order to drive improvements in practice, for example, the development of in-house guidelines in relation to medication management.

The centre maintained a register of children who lived in the centre. This was reviewed by inspectors and was found to meet the regulations. The register included required details including places of discharge for past residents and details about archived files.

There were systems in place for the management of risk in the centre. The centre had a risk register and risk assessments in relation to risks to children in the centre including aggression and violence, self-harm and bullying. Each risk was graded in relation to the likelihood and impact of the risk and there were comprehensive existing and additional control measures in place. The risk register was regularly updated and reviewed. Health and safety risk assessments were carried out in relation to various risks in the centre such as smoking in bedrooms and medication. Each health and safety risk was also graded in relation to the likelihood and impact of the risk and appropriate control measures were in place. There were clear procedures in place to escalate risk if necessary and inspectors reviewed several risks which had been appropriately escalated and responded to by external managers.

There were appropriate systems in place to record, report and review significant events. Inspectors reviewed the significant events register and saw that the number of significant events had recently decreased considerably and this was reflective of the current mix of children living at the centre. Records showed that significant events were well managed in the centre and notified to all relevant parties. Significant events were reviewed both at a local level by the centre manager and staff, and at a regional level. At local significant event reviews, decisions were made about whether to escalate the incident to external managers or to refer it to be reviewed at a regional level. Several significant events at the centre were reviewed at a regional level. Inspectors found that recommendations made at reviews were implemented by the centre.

Inspectors reviewed a sample of staff files and found that they were well maintained and contained the information required. There was a full complement of experienced staff who had worked at the centre for some time. The team was well established and provided consistency of care and a stable environment for children. Inspectors reviewed the staff rota and found that there was a sufficient number of staff with an appropriate

skills mix on shift on a daily basis. However the rota did not record staff members full names and did not clearly identify which manager was on-call.

Staff had supervision contracts on file and they received regular supervision in line with policy. When there were delays in supervision taking place, the reasons were clearly recorded. Supervision records were of good quality and consistently signed. There was evidence that issues discussed at one supervision were followed up at the next supervision. Records showed good discussions about the needs of young people during supervision of staff who were keyworkers of children. Supervision at the centre was found to promote accountability for practice.

There were systems in place for good communication in the centre. The centre manager and alternative care manager attended regional management team meetings and inspectors saw evidence that information from these meetings was fed back to staff at regular team meetings. Team meetings held at the centre had good attendance by staff. Minutes showed that team meetings were used as a forum to discuss the children, daily plans, significant events, feedback from significant event review group meetings, child protection concerns, bullying, health and safety issues and training. The minutes of the team meetings were typed and well presented. Records showed that there were other effective systems in place to communicate across the team including at handover meetings and through the use of the handover book, communications book and daily logs.

The staff team engaged in on-going training and inspectors reviewed training records for staff members. Staff received mandatory training however, while the majority of staff attended Children First (2011) training in 2015, some staff members required a refresher course. Staff received additional training in order to enhance their skill set in areas such as report writing, sexual health and smoking cessation. Most staff received training in crisis management plans and post crisis response training and several staff members received training in areas such as parenting plus, cultural, ethnicity and diversity and mindfulness. Inspectors found that training needs were discussed on an ongoing basis at team meetings, supervision and regional management meetings. A training audit had been carried out and a schedule of training was developed for 2016. However, a formal training needs analysis had not been carried out to inform the training programme in the centre.

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 centre was monitored by a Child and Family Agency monitor who carried out routine visits to assess the service against the National Standards for Children in Residential Care and Child Care Regulation (1995). The Child and Family Agency

Monitoring Officer visited the centre in the 12 months prior to this inspection. A monitoring report was provided following this and was dated 19th November 2015. During their visits, the monitoring officer met with children and staff, accessed information and quality assured the children's files. They also had contact with external managers and children's social workers. They found that the centre had made significant progress in addressing actions from the previous HIQA inspection which took place on 25th June 2014. Their findings included that children were well cared for in the centre and that staff were committed to achieving positive outcomes for children.

Judgment: Meets standard

Acknowledgements

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