



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Report of a Children's Residential Centre

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| Name of provider: | The Child and Family Agency |
| Tusla Region: | South |
| Type of inspection: | Announced |
| Date of inspection: | 24-25 February 2021 |
| Centre ID: | OSV 4181 |
| Fieldwork ID | MON 0031966 |

About the centre

The following information has been submitted by the centre and describes the service they provide.

The centre can provide residential care for up to four male children in the care of Tusla aged between 13 and 17 years, who display problematic behaviours. Referrals are approved through the South Region's selection and matching process. The young person must be aware of the reasons for their referral and be agreeable to their placement. The centre does not provide emergency care.

The centre aims to provide a high standard of care and interventions to enable the young person to address their life experiences, and to develop alternative skills and coping strategies in order to live safely in their community. This is achieved through a supportive, nurturing and holistic living environment that promotes wellbeing, safety, rights, education and community involvement. The centre works in conjunction with other professionals, and has access to a psychologist for ongoing support with therapeutic interventions.

The centre has adopted Tusla's national model of care for its residential services. Each child has an individual programme of care and is encouraged to maintain links with their family and friends. The centre seeks to promote children's privacy and dignity, and support them in the practice of their religion. Consultation with, and the participation of, children is at the heart of assessment and care planning; with a range of social activities, hobbies and leisure interests on offer to help build personal relationships and achievements.

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| Number of children on the date of inspection: | 2 |
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How we inspect

To prepare for this inspection the inspector or inspectors reviewed all information about this centre. This included any previous inspection findings and information received since the last inspection.

As part of our inspection, where possible, we:

- speak with children and the people who visit them to find out their experience of the service
- talk to staff and management to find out how they plan, deliver and monitor the care and support services that are provided to children who live in the centre
- observe practice and daily life to see if it reflects what people tell us
- review documents to see if appropriate records are kept and that they reflect practice and what people tell us.

In order to summarize our inspection findings and to describe how well a service is doing, we group and report on the standards and related regulations under two dimensions:

1. Capacity and capability of the service:

This section describes the leadership and management of the centre and how effective it is in ensuring that a good quality and safe service is being provided. It outlines how people who work in the centre are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service.

2. Quality and safety of the service:

This section describes the care and support children receive and if it was of a good quality and ensured people were safe. It includes information about the care and supports available for people and the environment in which they live.

A full list of all standards and the dimension they are reported under can be seen in Appendix 1.

This inspection was carried out during the following times:

| Date | Times of inspection | Inspector | Role |
|------------------|---------------------|------------|-----------|
| 24 February 2021 | 07.30-17.00 | Sue Talbot | Inspector |
| 25 February 2021 | 09.00-16.30 | Sue Talbot | Inspector |

What children told us and what inspectors observed

From what children, their family and social workers told us, children felt well supported, cared for and listened to in the centre. Children's rights were actively promoted, and children were fully engaged in discussing their individual needs, what mattered most to them, and in mapping strategies to address risk and improve their outcomes.

The inspection was undertaken remotely given the current Covid-19 restrictions. While this did not allow for observation of young people and staff in the centre, the inspector spoke directly with young people, staff, family members and external professionals, to capture their experience of the quality of the service being provided.

Two children were living at the centre at the time of the inspection. The inspector spoke with both of them. The children had high regard for the staff, and valued the support they received. Their comments included:

"Staff are amazing."

"Staff are there to help you through difficult times."

"Staff are very nice to me, and try to do everthing they can to help me."

"They [staff] will speak up for you at your review meetings."

"They [staff] check out if I am up for a chat, and look out for what is happening for me".

"Staff take time to listen".

Children said that they were offered a broad range of activities and that staff members would always help them get to where they needed to go. They felt they were aware of and had coped well with the COVID-19 restrictions. Children said that the centre staff had clearly set out for them what to expect in terms of house rules, routines and behaviour within this context.

Children reported positively on being able to keep in touch with or visit their family, and that their health needs had been met. They said that they were able to make suggestions about day-to-day life in the centre, and that felt their views and wishes were listened to. Both children were aware of how to make a complaint, and said that any issues raised by them had been quickly sorted, in a fair way. They said that they got on well with each other and the inspector found that this impacted positively on their experience of living in the centre.

Children identified aspects of centre life that they would like to see improved, such as internet access. They also commented on the location of the building, which has been an ongoing concern raised by HIQA in previous reports.

Parents were complimentary about the care their children received. Some of their comments were:

"Staff listen to my son, they give him a voice, and he trusts them".

"He gets on well with the staff team, and has plenty to do".

"They [staff] have helped to get him back on track".

Family members reported an open and supportive relationship with centre staff, and that they were encouraged to share their ideas about their child's care, and raise any concerns they had. Parents had been made welcome at the centre when they visited.

Social workers and other external professionals were complimentary of the quality of relationships and the support given to children by centre staff. They commended the availability of staff, and their commitment to wanting the best for the children. Social workers reported regular and good communication with the centre team, and partnership working and openness to working together in the child's best interests. Social workers also said centre staff engaged well with and supported children's families and involved other agencies to carefully plan the next steps for each child.

In addition, social workers identified that the children had responded well to staff guidance and support. They were of the view that the centre staff recognised the individual and diverse needs of each child, and built on their strengths and capacity to grow and learn. They were satisfied that the staff team actively promoted children's rights, advocated on the child's behalf as needed, and contributed to the child's care plans and reviews. Social work staff were particularly assured by the experience and balanced approach taken by the centre team and managers, in addressing risks to children's safety and wellbeing. Social workers also reported positively about the way centre staff had responded to an emergency placement while other placement options were considered.

In summary, children felt safe and well supported by the centre's caring and responsive team. Everyone the inspector spoke to complimented the quality and levels of support given to the children placed there. There was an overarching view that children had benefited from a strong child-centred ethos, within a clear structure and caring approach, delivered by an experienced and committed staff team. This is reflected in the findings of this inspection in relation to how the centre was managed and the quality of care children received.

Capacity and capability

The centre was well run and managed. It benefited from having a stable and suitably experienced staff team who clearly understood their roles and accountabilities. A strong child-centred ethos underpinned decision-making and care delivery. Governance of the centre had been measurably strengthened since the last inspection. A clear system of regular weekly and monthly reporting was in place to enable ongoing monitoring and benchmarking of the centre's performance. Regional directors actively supported the work of the centre, working collaboratively with the whole staff team to address ongoing organisational operational challenges, while also starting to map the new direction for the service and its workforce.

Centre staff clearly understood their individual professional responsibilities for delivering a safe and high-quality service to children and their families, in line with relevant legislation, regulations, national policies and standards. The centre managers had taken appropriate action to address areas of non-compliance identified in the last inspection in September 2019. They also had plans in place for areas that required a longer-term strategic response.

Centre managers and regional directors had a strong shared ambition to deliver the best possible outcomes for children placed in their care. The centre has completed self-assessments of its performance in October and November 2020, against Tusla's national quality improvement framework. It had rated its performance in all areas as '*In Place and Effective*' against each of the domains relating to Well-Led, Safe and Child-Centred provision, and this concurred with the findings of this inspection.

A programme of internal audits was in place to track progress and assess the impact of improvements made. This included supervision audits, audits of the quality of children's records and health and safety audits. Managers reported evidence of continuous improvements in practice, with ongoing checks to ensure a consistent and sustained high standard of performance. Information management systems were being continuously developed to reduce duplication and provide for more efficient ways of analysing and sharing performance reports.

The centre management team submitted weekly and monthly reports to regional directors, which enabled ongoing tracking of the outcomes achieved and risks to children, including child protection concerns. The process enabled review of the effectiveness of the day-to-day management of the centre, and of workforce capacity and capabilities. COVID-19 related assessment activity was well managed, with good control measures in place to safeguard children, staff and visitors to the centre. Taken together, these reports enabled continuous improvement in the centre's work and helped inform future workforce planning and service development activity.

Tusla was in the process of rolling out a new suite of policies and procedures for its residential care centres. There was a plan in place, supported by additional training for frontline managers and staff, with the goal of full implementation by the end of April 2021. This had been an area for improvement identified in the previous inspection. The centre had a clear and embedded system for ensuring staff were aware of changes to policies and procedures, reinforced through team meetings and supervision.

Management oversight had been strengthened since the last inspection and met the expected standards of practice. Arrangements for team, social care leader and manager meetings had been reviewed at centre and wider regional level, with clear agendas and recording of meetings. Staff and managers told the inspector they had taken steps to strengthen the quality of recording within children's records. Staff reported they had good peer support, with senior managers providing feedback on the quality of their work, including reporting of significant events, to help promote continuous improvement in the standard of practice.

The centre was at the start of a period of transition at the time of this inspection and this was well managed. A working group has been established to design and implement plans to re-locate the centre, and to move to a respite model, whilst maintaining continuity and planning for the children currently placed there.

At the time of the inspection there were 7.5 full-time equivalent (FTE) social care workers, five social care leaders, a deputy and centre manager, and an administrator. Seven members of agency staff were also regularly employed. Staffing levels had been enhanced to ensure the needs of all children could be met, and although staffing was adequate at the time of inspection, a few permanent posts had not yet been filled. A recruitment process was ongoing.

The centre and deputy centre manager had undertaken a range of training relevant to their roles and responsibilities, but they had not accessed a formally accredited management development programme. There was appropriate cover in place for the other's absence. The roles and responsibilities of social care leaders had been further defined and strengthened since the last inspection, which made them an important additional support in the day-to-day management and continuous improvement of the work of the centre. Managers recognised the need to move to a more sustainable model of emergency and on-call arrangements while retaining continuity of management decision-making at the centre.

The centre had not yet adopted Tusla's national approach to rostering its staff team, but full implementation was expected within the coming months. Regional directors recognised the importance of having a stable team and employing staff with relevant skills and knowledge responsive to children's individual presenting, diverse and changing needs.

Centre managers and regional directors clearly understood their duty to appoint staff in line with safe recruitment practices and possession of the required evidence of good character and suitable qualifications to work with children. Staff retention, at a time of significant change overall was good; with staff responding enthusiastically to the challenge of enhancing their roles to support the proposed new model of care delivery. The same workforce employment standards applied to the appointment of agency staff members, and this was well monitored. The process had flagged the absence of a relevant qualification for one team member and this was being addressed at the time of the inspection.

This inspection included a review of a sample of staff records related to various posts. This showed that staff were appropriately vetted and recruited. These records were held centrally by Tusla, and one discrepancy was identified between the centre and Tusla's nationally held records. This was brought to the attention of the centre manager and rectified immediately. Employee career progress was appropriately tracked and further checks were undertaken on appointment to new roles, and periodically over time.

The centre's statement of purpose and function had been recently reviewed and updated. It provided a detailed picture of the centre's care approach, facilities and staffing. It recognised the individuality of each child and the complexity of their behaviours, and contained clear objectives to promote their safety and wellbeing. The SOP had been reviewed and updated following the last inspection. It had been further reviewed and updated in October 2020 to provide for an emergency placement. This was authorised by the Tusla National Director for Residential Care Services. Children and their families were given a centre booklet and model of care leaflet in accessible formats, to help them understand what to expect and how the centre could help them.

The centre had implemented Tusla's risk management framework, and had clear systems in place for escalating and monitoring risk at a range of levels. The voice and experience of children informed learning from significant event notifications and complaints. The centre's risk register was appropriately managed and monitored. Areas of ongoing risk were clearly mapped and weighted. The centre's risk management approach also included a strong focus on prevention. In addition, there was an effective system in place to escalate individual concerns to senior managers. This resulted in the identification of wider organisational risks in relation to the shortfall in national specialist residential provision.

The centre had a comprehensive safety statement and systems that provided clear guidance for managers and frontline staff in key areas, such as health and safety, staff wellbeing, the management of risk and emergency planning. Health and safety processes were well managed and there were noted improvements since the last inspection. The centre had relevant protocols and procedures for infection control,

including the management of COVID-19 related issues; with good access to personal protective equipment.

Complaints were well managed within the centre. All complaints were closed and had been effectively dealt with. The management of complaints was also routinely tracked by managers and action plans were put in place and outcomes monitored where the need for improvement was identified.

Managers supervised and supported the work of the centre team through regular communication and meetings. While adapting levels of on-site monitoring to comply with public health measures, they maintained good oversight of risks to children and of the contribution of other professionals and agencies. There was a strong focus on working together to address children's specialist needs and in promoting risk-reduction in the incidence of challenging behaviours.

Frontline staff gave positive feedback to the inspector on the leadership and management of the centre. They reported strong and effective team working. They had a clear understanding of their role and accountabilities, and that of their managers in balancing risk and safety, while also promoting children's rights and wellbeing. They demonstrated they were familiar with and confident in the use of organisational policies, procedures and guidance.

Mandatory training, currently undertaken as e-learning, helped reinforce key messages about professional accountabilities for keeping children safe and the effective day-to-day management of the centre. The limits to e-learning were recognised, and a return to face-to-face training was planned when it was safe to do so. The centre manager had carried out a training needs analysis of the centre workforce in July 2020. Learning and development priorities included report writing and record keeping, continuous professional development, substance misuse, trauma and attachment. There had been limited capacity to progress these areas of learning to date due to public health restrictions.

Centre managers received regular supervision and support from their line managers and peers. Supervision of frontline social care workers was undertaken by social care leaders. The process had been strengthened since the last inspection and was in line with Tusla policy and guidance. Social care leaders highlighted the need for additional training and development to help them implement personal development plans (PDPs) for all team members. Centre managers had set a goal that all PDPs be completed by the end of March 2021, but recognised this was not likely to be met.

Managers maintained a strong focus on the quality and safety of therapeutic interventions and the potential impact for the staff team in their ongoing care of children with complex needs. External support and advice had been sought to ensure

care interventions were safe, effective and responsive to children's individual needs, and to enhance staff knowledge, confidence and expertise. Staff had received relevant training in crisis intervention and followed key actions set out in children's individual behavioural management plans. Incidents were promptly reported, recorded and reviewed by both centre and the regional management team through the significant events reporting system.

Frontline staff and managers gave high priority to seeking and learning from the feedback and experience of children through a range of daily 'check-ins' and review of the children's records. There was a process in place when children were leaving the centre to ask if there was anything they felt the staff team could have done better.

Children's meetings were scheduled on a weekly basis, however, there were some gaps in records over the past year. Managers and staff advised the inspector that this had been routinely offered. Children were actively supported to have their voice heard at internal and external meetings, but some children had been reluctant to participate in the past, and centre records had not consistently reflected this. This had been identified by the centre as an area for improvement. Children's meetings were working well at the time of this inspection.

Standard 5.1

The registered provider ensures that the residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect and promote the welfare of each child.

Regulation 5: Care practices and operational policies

Centre managers and staff clearly recognised their responsibilities for the delivery of care in line with relevant legislation, regulations, national policies and standards. The recent introduction of a comprehensive suite of up-to-date policies and procedures had enhanced organisational capacity.

Judgment: Compliant

Standard 5.2

The registered provider ensures that the residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability to deliver child-centred, safe and effective care and support.

The centre was well led, managed and governed. There were a range of systems in place to provide assurance of the quality and safety of care delivery within a clear structure for driving service improvement. The voice and experience of children was at the heart of management decision-making.

Judgment: Compliant

Standard 5.3

The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.

The centre's statement of purpose was child-centred and met the requirements set out within the National Standards for Children's Residential Centres (2018). It provided a clear outline of the aims, objectives and ethos of the centre and of the accountabilities of frontline staff and managers for providing a safe, well run service.

Judgment: Compliant

Standard 5.4

The registered provider ensures that the residential centre strives to continually improve the safety and quality of the care and support provided to achieve better outcomes for children.

All centre staff paid good attention to promoting the quality, safety and continuity of care to children. The model of care was well developed and had led to better outcomes for children.

Judgment: Compliant

Standard 6.1

The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.

Regulation 6: Staffing

The centre had appropriate arrangements in place for planning, organising and managing its workforce to meet children's individual needs, keep them safe and promote their personal growth and resilience.

Judgment: Compliant

Standard 6.2

The registered provider recruits people with the required competencies to manage and deliver child-centred, safe and effective care and support.

The centre recruited people with the required competencies. Additional management screening and support was needed to ensure full compliance with information held on staff records. Work was needed to progress implementation of personal development plans for all staff.

Judgment: Substantially compliant

Quality and safety

The promotion of children's rights, equality and diversity was at the heart of the centre's approach to care delivery. Direct work with children paid good attention to ensuring they understood their rights, were suitably informed about opportunities for their ongoing development and enjoyment, and were able to access support from others who may be able to help them. A strong child-centred culture was evidenced within care practice. Children recognised and feedback positively on feeling respected and well cared for by all centre staff.

A strong child-centred, multidisciplinary approach underpinned direct work with each child. The staff team gave priority to promoting open and supportive relationships with children, their families and partner agencies. Care practice aimed to help children achieve their ambitions, recognise and build on their strengths and promote their rights; while also being mindful of risks to their safety. Staff offered a wide range of activities to children to help explore their interests and learn more about themselves to equip them in forming positive relationships and becoming more independent. Staff recognised their role in advocating for children to ensure their additional needs or potential barriers to progressing their placement and care plans were addressed.

The management team had implemented a 'visualisation' process to build the awareness of staff about what it might feel like to a child to be placed within the centre. Children's right to keep in touch with their family and friends were strongly promoted. Children's individual faith, culture, dietary and communication needs were identified and met. Children were able to access health services when they needed to. Medication was sensitively managed to promote children's dignity and privacy. Children were advised and supported to read their care records and ask any questions they had about their care. Additional children's rights and equalities training had been made available to centre staff to support implementation of Tusla's *'Equality, Diversity and Inclusion'* strategy.

All staff the inspector spoke to were vigilant in their approach to promoting children's engagement, wellbeing and safety; whilst recognising their need for privacy and space. The impact for a specific child, other children, and the wider operations of the centre was carefully explored and monitored in shared efforts to prevent and reduce risks, and promote their independence and personal control. Children were informed about and supported to contact independent advocacy agencies and organisations.

The previous inspection highlighted gaps in risk assessment of the use of night time alarming of children's bedrooms doors. At that time, the practice had not been reviewed or used for the shortest time possible in line with the expected standards for the management of restrictive practice. This practice continued in the centre, but was risk assessed on a daily basis and monitored by managers. The inspector was assured by managers that this practice would cease immediately on the reduction of risk.

Staff ensured in everyday conversations with children, and through regular keyworker sessions, that children understood the reason for a specific care intervention. Children were helped to explore what they wanted and where they might need further information or support to move forward. An open and supportive culture underpinned the care approach, with staff team members using each other's knowledge and relationship with each child, to ensure appropriate management of their personal information while maintaining their privacy and dignity.

Standard 1.1

Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child.

Regulation 10: Religion

Regulation 4: Welfare of child

Care and support provided by the centre respected children's diversity and protected their rights. Staff were sensitive to and closely monitored the use of restrictive interventions.

Judgment: Compliant

Standard 1.4

Each child has access to information, provided in an accessible format that takes account of their communication needs.

Children were supported to be active players in their care and support plans; with a strong emphasis on promoting their awareness and understanding of relevant information to promote their ongoing safety and development.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

| Standard Title | Judgment |
|--|-------------------------|
| Capacity and capability | |
| Standard 5.1 The registered provider ensures that the residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect and promote the welfare of each child. | Compliant |
| Standard 5.2 The registered provider ensures that the residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability to deliver child-centred, safe and effective care and support. | Compliant |
| Standard 5.3 The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided. | Compliant |
| Standard 5.4 The registered provider ensures that the residential centre strives to continually improve the safety and quality of the care and support provided to achieve better outcomes for children. | Compliant |
| Standard 6.1 The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support. | Compliant |
| Standard 6.2 The registered provider recruits people with the required competencies to manage and deliver child-centred, safe and effective care and support. | Substantially compliant |
| Quality and safety | |
| Standard 1.1 Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child. | Compliant |
| Standard 1.4 Each child has access to information, provided in an accessible format that takes account of their communication needs | Compliant |