



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

# Report of a Children's Residential Centre

Name of provider:	The Child and Family Agency
Tusla Region:	South Region
Type of inspection:	Announced
Date of inspection:	20 and 21 April 2021
Centre ID:	OSV 0004187
Fieldwork ID	MON 0032317

## About the centre

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

The centre was a community-based residential centre run by the Child and Family Agency Tusla in the South region. The centre was a two-storey building on its own grounds located in a rural area but close to a large town, thus providing privacy for the young people together with proximity to amenities. Four young people of mixed gender and between the ages of 13 and 17 on admission, could be accommodated in the centre which included a living room, games room, chill-out room and a kitchen diner. All the young people's bedrooms had en-suite facilities.

The centre provided residential care to young people aged 13 to 17 years who have displayed problematic behaviours. The aim of the centre was 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 communities. The staff team worked in conjunction with a psychologist to provide therapeutic interventions to address the problematic behaviours. The purpose of the centre was to promote wellbeing and reduce risk so that young people could return to their communities. This was achieved through a supportive nurturing and holistic living environment that promoted wellbeing, safety, rights, education and community involvement.

Number of children on the date of inspection:	4
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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.

For this inspection the inspector spoke with three parents, three staff, the deputy centre manager, the Regional Manager and the Deputy Regional Manager for Children Residential Services for the South region. Children chose not to speak with the inspector but two children provided written responses to four basic questions about their experience of living in the centre.

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 remotely during the following times:**

Date	Times of inspection	Inspector	Role
20 April 2021	9:00hrs to 17.00hrs	Grace Lynam	Inspector
21 April 2021	9:00hrs to 17:30hrs	Grace Lynam	Inspector

## What children told us and what inspectors observed

Overall, children were content living in the centre where they received good quality, safe care which promoted their rights and respected their diversity. Participation of children and their families in the planning of their placement was promoted and facilitated. Trusting relationships between children, staff and their families were the foundation of the care provided. Children were supported to develop their capacity to promote their own wellbeing.

This inspection was conducted remotely due to the COVID-19 restrictions. While this did not allow for onsite observation of children and staff in the centre, the inspector spoke directly with staff, family members and external professionals to capture their experience of the quality of service being provided.

Children chose not to speak with the inspector but provided written answers to four questions about their experience of living in the centre. Children were asked what it was like to live in the centre. They said that it was "good" and "grand". When asked if they received regular visits from their social worker they had different views. Some said they did and others described visits as infrequent. Children were asked what they knew about their rights and some of the things they said included "I know everything" and "everything".

There were opportunities within the centre for children's views to be heard. Meetings were held regularly to allow children to express their views. Some children did not wish to attend, so a separate arrangement was in place for them to talk with a staff member. This gave them an opportunity to express their views and raise any issues they had.

Feedback from several sources provided to the inspector about the centre was very positive. The inspector spoke with three parents of children living in the centre. All parents said their children received good care from the staff team. They described the care as "very good" and said that their child was minded "very well" and was happy in the centre. Parents had "no complaints and wouldn't say anything bad" about the staff team. They felt their children were safe there and that the staff team treated their children with respect. They described staff as kind and friendly and as "very good people". Parents told the inspector that "this house excels at supporting families" and that staff "had a unique ability to support the family".

These parents were of the view that their children experienced good relationships with the staff team and they explained that the staff were good and deserved "full credit" as "they put the work in" to make sure they had good relationships with the children and

their families. They said that the "most important thing is they are passionate about" the children and "really want them to do well in life".

Parents were complimentary about how well staff communicated with them about their children. They said that the staff team kept in touch through telephone calls and texts. They were aware of everything that was happening with their children and said that they were well informed on how their child was getting on.

In relation to the premises, parents said they liked it and that it was "presented very well", and " nice, cosy and homely". They said the house was clean and that their child had their own room. Several parents had visited the centre prior to their child moving in and they were made to feel welcome. They were given information about the centre and how it was run. Parents agreed that the staff promoted children's rights and that the team had the skills to meet their needs. None of the parents could think of any way in which the centre could improve.

The staff team promoted healthy eating, and good food was provided to the children. The children were encouraged to cook their own meals in preparation for independent living. Children were supported to gain an education and the staff provided transport to school, and encouraged children to attend. Home schooling was facilitated where necessary.

The inspector spoke with several social work professionals about the care provided in the centre. They were satisfied that good quality care was provided by the staff team to the children which focused on their individual needs. The team was described as well-trained and experienced. The staff team worked closely with social workers to ensure children were kept safe. Social workers were assured that children were fully informed of their rights, including their right to see their records. The staff team treated the children with respect and advocated on their behalf. They listened to the child's opinions and wishes and acted on them, doing everything they could to facilitate their individual preferences. In addition, COVID-19 was well managed in the centre and children were kept safe.

In summary, children, their parents and social workers described the centre as a cosy, welcoming house where children were safe and well cared for by a staff team who respected them, and who met their individual needs with kindness, care and attention.

The next two sections of the report present the findings of this inspection in relation to governance and management arrangements in place in the centre, and how these arrangements impacted on the quality and safety of the service being delivered.

## Capacity and capability

Overall, effective governance arrangements of the service were in place which ensured that service provision was underpinned by a shared vision of continuous improvement and development of the service, focusing on best outcomes for children. In the centre, there were effective management systems in place which ensured good quality, safe care was provided to children. These included systems for continuous quality improvement, risk management and effective communication. The centre was well-run and adequately resourced with a clearly defined management structure in place. Individualised child-centred care was provided by a competent and committed staff team in a manner which respected and promoted children's rights.

The centre was last inspected by HIQA in December 2019. At that time, one of the deficits related to interim posts, which did not provide stability to the management team. This was partially addressed at the time of this inspection, as the deputy centre manager post was not filled on a permanent basis.

This inspection found that the centre was well-managed, thus ensuring that children received the best possible care. The centre performed its functions in line with legislation, regulations, national policies and standards to protect and promote the welfare of children, relating to the areas covered by the inspection. Staff demonstrated an understanding of the relevant legislation and standards appropriate to their role and reflected this in how they spoke about children and their daily practice in caring for them.

Staff were kept informed of changes to policy and practice. The inspector reviewed the minutes of team meetings and found there was a standing agenda where all aspects of children's care and the running of the centre were discussed. Feedback from senior management meetings at a regional level was also provided to the staff team. Staff ensured they were kept informed by reading the minutes of meetings they were unable to attend. Regional management meetings were held and were well attended by senior managers. Meeting minutes reflected discussions and planning for the service regionally, including updates on the management of COVID-19, workforce planning, development and training.

Tusla had developed a suite of national policies and procedures for its residential services and there was a plan in place for their full implementation by April 2021. Staff confirmed that they had received briefings and completed e-learning modules on these new policies. There was no child-friendly version of these national policies and procedures but a national working group had been set up to address this.

The centre was well-led and managers provided good leadership to the staff team within a learning culture that supported continuous improvement. There were clearly defined management arrangements in place that were understood by staff. Staff were aware of their roles and responsibilities and responsibility for decision-making was clear to everyone. The centre manager was responsible for the day-to-day operation of the centre and was supported by a deputy centre manager, who also deputised for the manager in their absence. The deputy centre manager was clear about their delegated duties, and, although employed on an interim basis, had been on the staff team for a number of years so the impact of this on the stability of the team was minimal. Both the centre manager and the deputy centre manager were accessible to staff and provided oversight of the service on a daily basis. Staff described managers as approachable, available and responsive.

Risk was well managed in the centre and the regional management team maintained oversight of risk in the service. There was a risk management system in place to identify, assess and manage risk and this was regularly reviewed to ensure risk was effectively managed. Risk was recorded in a number of ways. There was an organisational risk register, a center-specific health and safety document which included the risks specific to the centre and a young person's risk log with associated risk assessments. The regional manager was satisfied that all relevant risks were identified and were being appropriately managed. Risks could be escalated to the Regional Director, and in turn, to the National Director, through formal process called the Need To Know notification system. There was one Need To Know (NTK) report escalated to the regional director at the time of this inspection. This NTK process had only recently been implemented in the centre and staff were still becoming familiar with it.

The centre had an up-to-date statement of purpose and function that accurately described the service provided and contained all the information required by the standard. It described the day-to-day operation of the centre and the policies underpinning practice. It was reviewed on an annual basis and was signed appropriately. Staff understood the aims and objectives of the service and described how they applied the model of care in their work with children. Although there was not a child-friendly version of the statement of purpose and function available, all the information contained within it was included in the welcome pack that children and families received as their introduction to the service.

Continuous quality improvement was a priority for the service at regional level. Management and staff were committed to the continuous improvement of the safety and quality of the service to ensure the best possible outcomes for children. There was a regional service development plan in place for 2021 and a national programme of audits commenced in the centre in November 2020. This schedule of audits against the National Standards for Children's Residential Centres provided



oversight of the safety and quality of care provided and identified gaps in compliance. Audits were completed on every aspect of the service including children's care records, health and safety, infection control and staff supervision. When deficits were identified, actions plans were put in place to address the deficits. In 2021, managers of the service intended to drive improvement in the centre through collation and analysis of formal feedback from children on their experience of care in the centre. This in turn would inform good decision-making and support reflective practice to ensure that each young person's goals were met.

In addition, the centre had undertaken three self audits in relation to safe, child-centred and well-led care, under Tusla's Quality Improvement Framework. Actions arising from these audits were either completed or in progress. The service did not have a centre-specific annual review of compliance with the services objectives but the Regional Manager told the inspector that a regional review was completed for all the residential centres in the region. In addition, the schedule of audits would reflect compliance or otherwise with the national standards once a full cycle had been completed. Furthermore, the reviews of children's placements that were conducted reflected whether the centre had met their goals in relation to the outcomes for individual children. Staff described a culture of shared learning and demonstrated a commitment to continuous improvement within the centre so that the best outcomes would be achieved for the children. This included a new initiative brought in by the Regional Manager whereby social care leaders would meet on a quarterly basis to promote and share learning.

The centre had managed the COVID-19 pandemic well, minimising the risk both to children and staff by ensuring good infection prevention and control measures were in place and good contingency planning of the workforce and of rosters.

The centre implemented Tusla's "Tell Us" complaints process. Information about how to make a complaint was provided to children and their families as part of their introduction to the centre. There were no complaints about the centre in the 12 months prior to the inspection.

There were sufficient numbers of competent, experienced staff working in the centre who demonstrated a good mix of skills and expertise. Parents had acknowledged to the inspector how this ensured that their children's individual needs were met. The centre was fully staffed with a stable team and there were no vacancies at the time of the inspection. This ensured continuity of care for the children living in the centre. The centre did not use agency staff but had the ability to draw on agency resources if required. During the first period of restrictions for the COVID-19 pandemic, additional staff resources were allocated to the centre as part of staff contingency planning. These additional resources were still in place at the time of the inspection. The staff team comprised a centre manager, a deputy

centre manager, four social care leaders and seventeen social care workers. Various shifts were worked to ensure there were always sufficient staff on duty to meet the diverse needs of the children. However, whilst there was an on-call arrangement in place for COVID-19 related issues, there was no formalised procedures for on-call arrangements at evenings and weekends under normal circumstances. This was a national issue for some centres in the region and was being progressed.

Staff were recruited who had the necessary qualifications and/or experience, competencies and skills to provide good quality care to the children in the centre but there were some gaps in the staff files maintained on them. The centre manager had sufficient management and practice experience to manage the centre and meet its aims and objectives. The centre manager did not hold a management qualification, as required by the standard, but plans were in place to get them qualified. As part of inspection activity, four staff files were sampled for safe recruitment practices. These files are held centrally. The inspector found that staff qualifications and up-to-date vetting by An Garda Síochána (Irish police) were in place. However, a sufficient number of references was not on file for all four members of staff for their current positions.

**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**

The centre operated in compliance with relevant regulatory requirements and national standards. A full suite of up-to-date national policies for children’s residential centres was currently being rolled out, along with a programme of training for all staff.

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 and management provided good leadership to the staff team. There were clearly defined governance arrangements in place that supported a competent and confident staff team, thereby ensuring sustainable provision of child-centred, individualised care. Regional managers supported the centre management and staff to achieve their goals and objectives.

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 and function accurately and clearly described the service provided.

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.

Management and staff were committed to the continuous improvement of the safety and quality of the service to ensure the best possible 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 was fully resourced with sufficient numbers of competent, experienced staff, who demonstrated a good mix of skills and expertise. The stability of the staff team ensured continuity of care to children. Contingency planning was in place to ensure sufficient numbers of staff were available to provide care for children. However, there were no formal on-call arrangements in place.

Judgment: Substantially 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 was staffed by a competent and experienced workforce with the necessary experience and skills to provide quality care to children. The centre manager did not hold a management qualification, as required by the standard, but plans were in place to get them qualified. Staff files did not contain all the necessary documentation required.

Judgment: Substantially compliant

## Quality and Safety

Good quality care was provided by a competent staff team whose skills and experience complimented each other and ensured that the diverse needs of the children were met. The care provided in the centre respected the diversity of children and protected their rights. Children's parents felt included in their children's care and felt supported as a family. Children were treated with dignity and respect.

Staff were committed to achieving the best outcomes for children in a way that included the child and respected their individuality. Families noted this and appreciated being included in the care of their children. Parents acknowledged how well staff communicated with them. Staff practiced a rights-based approach in their day-to-day activities with the children and described how they encouraged the children to exercise their rights. For example, one child had been supported by a staff member to read and reflect on a portion of their care record which they had enquired about. Children told the inspector they knew about their rights and professionals were assured that children's rights were promoted in the centre.

Staff spoke respectfully about the children and it was clear that they spent time getting to know them and developing caring relationships with them. This in turn facilitated staff in their individual work with the children. This attention to detail had a positive benefit for the children, even those that found it difficult to settle into the placement and to engage with the staff. When children were not ready to engage formally, staff were creative in using everyday opportunities to engage children in conversations that helped them reflect on their experiences. For example, one staff member used technology well to encourage a child to engage better, and to provide them with information on wellbeing. This created an opportunity to connect with the child in the moment and enhanced communication with them.

Children's diversity was respected and their individual needs, including specific dietary requirements, social and cultural values and individual preferences were taken into account in the daily activities of the centre. Staff transported children to school and home on visits, encouraged learning and supported home schooling as appropriate. Staff were committed to helping children meet their full potential.

Children's views were valued. The model of care practiced in the centre was grounded in a rights-based approach with a particular focus on promoting participation. Children and their families were consulted on what the outcome of the placement should be for the child. An overall assessment of the child's wellbeing was completed with input from the child, their parents and other professionals who worked with them. The assessment identified areas of the child's wellbeing which needed strengthening. Individual pieces of work were conducted with each child which focused on helping them to build their capacity to improve their own wellbeing. A placement plan was

developed and this was reviewed and evaluated every three months to see how well the placement was achieving its objectives. This model of care had been introduced in the centre in February 2020 and staff were continuing to embed it into their daily practice. Regular evaluation of the model had commenced and would support positive outcomes for the children living in the centre.

Children were facilitated to share their views and opinions about the running of the centre through regular children's meetings. When children chose not to attend these meetings and staff consulted them individually about whether they had issues they wished to raise. An example a child's request was for additional stations to be added to the television subscription during restrictions for COVID-19, when outdoor activities were curtailed.

Children's right to information was upheld from the time they were introduced to the centre. Children and families were given information about the centre and visits were facilitated. Children received a welcome pack which included information about the centre and how it was run, their rights, the complaints procedure and how they could participate in decision-making about their own care. There was also information in the pack about the National Standards for Children's Residential Centres and agencies who provided services and advocacy for children and young people. All this information was presented in a child-friendly format. Children confirmed they knew about their rights. Staff told the inspector they encouraged children to make complaints and one child who had expressed dissatisfaction with aspects of the service was encouraged to make a complaint, but chose not to. Staff respected the child's right to information as demonstrated by the fact that they had facilitated a child to read sections of their file.

In summary, the care provided in the centre was child-centred and individualised to the needs of the child. Participation of children and their families was facilitated. Children's rights were promoted and upheld.

**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**

Inspectors found that the children living in the centre received care and support which respected their diversity and protected their rights. Children and their families were involved in planning their placements and their views were valued

Judgment Compliant

<p><b>Standard 1.4</b> Each child has access to information, provided in an accessible format that takes account of their communication needs.</p>
<p>Children’s right to information was upheld from the time they were introduced to the centre and they had access to information in an accessible format.</p>
<p>Judgment: Compliant</p>

**Appendix 1 - Full list of standards considered under each dimension**

Standard Title	Judgment
<b>Capacity and capability</b>	
<p><b>Standard 5.1</b> 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.</p>	Compliant
<p><b>Standard 5.2</b> 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.</p>	Compliant
<p><b>Standard 5.3</b> The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.</p>	Compliant
<p><b>Standard 5.4</b> 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.</p>	Compliant
<p><b>Standard 6.1</b> The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.</p>	Substantially compliant
<p><b>Standard 6.2</b> The registered provider recruits people with the required competencies to manage and deliver child-centred, safe and effective care and support.</p>	Substantially compliant
<b>Quality and safety</b>	
<p><b>Standard 1.1</b> 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.</p>	Compliant
<p><b>Standard 1.4</b> Each child has access to information, provided in an accessible format that takes account of their communication needs</p>	Compliant

