Report of a Children’s Residential Centre

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<th>Name of provider:</th>
<th>The Child and Family Agency</th>
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<td>Tusla Region:</td>
<td>West</td>
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<td>Type of inspection:</td>
<td>Announced</td>
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<tr>
<td>Date of inspection:</td>
<td>20 – 21 April 2022</td>
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<td>Centre ID:</td>
<td>OSV-0004199</td>
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<td>Fieldwork ID</td>
<td>MON-0036676</td>
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The following information has been submitted by the centre and describes the service they provide.

The aim of the centre as outlined in their statement of purpose and function is to provide a specialist residential treatment programme for up to four males aged 13 to 16 years with complex behaviours.

The objective of the centre is to provide a high standard of child-centred care and a range of interventions to support the young person and enable them to address their life experiences and risk-taking behaviours, and to develop alternative skills and coping strategies in order to return to and live safely in their community. This is achieved through a supportive, nurturing and holistic environment that promotes wellbeing, safety, rights, education and community involvement and the provision of an integrated treatment programme.

The following information outlines some additional data of this centre.

| Number of children on the date of inspection: | 3 |
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:

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<th>Date</th>
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<th>Inspector</th>
<th>Role</th>
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<tr>
<td>21 April 2022</td>
<td>09:00hrs to 16:15hrs</td>
<td>Lorraine O'Reilly</td>
<td>Inspector</td>
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<tr>
<td>21 April 2022</td>
<td>09:00hrs to 16:15hrs</td>
<td>Mary Lillis</td>
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Overall, the inspectors found that the young people received a safe, individualised, and child-centred service. Young people’s rights were respected and promoted and the three young people, resident at the time of inspection, were supported by dedicated and experienced staff. Staff encouraged young people to achieve their potential and work through their individualised treatment programmes.

The residential centre was based in a large detached house in a rural area, a short distance from a city. On the grounds of the house there were recreational facilities including a tennis, and basketball court, age-appropriate playground equipment and a sensory garden. There was sufficient on-site parking for visitors. The centre also had access to public transport.

The centre itself was large, bright, spacious and welcoming. On the ground floor, there were three communal sitting areas, a large kitchen/dining area, a utility, a toilet and a staff office. The large lounge area had new sofas and armchairs. A smaller games room had brightly coloured bean bags on the floor and posters on the wall. The games room was reported to be the most used, as the three young people living there at the time of the inspection enjoyed playing video games. There was a pool room, which had a pool table, DVDs and a study desk. There were structural works planned for the building which included replacing the windows and doors and making changes to the layout to make the best use of the available space. A date had yet to be set for these works but it had been approved at senior management level.

The three young people had their own bedrooms located upstairs. There was a fourth bedroom, which was unoccupied at the time of the inspection. The young people reported that they could decorate their own rooms. Two young people showed inspectors their rooms which were decorated to their personal taste. They displayed personal items on their walls, such as Lego collections and sports medals. There were two bathrooms upstairs.

A family room for visits and a treatment room for psychology sessions were situated outside the main building, across a small courtyard. Both of these rooms had sofas and armchairs and they had artwork on the wall.

All three of the young people spoke with the inspectors. They all agreed that they felt safe in the centre. They were able to identify their keyworkers and other staff they could speak to about any issues. The young people told inspectors there was no bullying within the centre.

The young people knew why they lived in the centre and knew about their programmes of care. Two of the three young people reported that they were happy with the support they received, in particular weekly psychological support which they described as
“helpful”. When speaking about their social workers one young person reported that their current social worker was “the best social worker I’ve ever had”, while another reported that they had just been allocated a new social worker.

The young people had mixed views about living in the centre. When asked about living there, they told inspectors “it’s alright”, “it’s getting a bit boring” and they would “rather live at home”. When asked what they would change about living there, they said they would like access to online gaming.

Young people knew how to make a complaint. One young person described making a complaint and said “it helped”. The young person explained that they met with staff and “discussed the situation and it got sorted”.

Young people were supported to develop their life skills. One young person explained that they planned to make chicken for dinner having shopped on their own for the ingredients. Young people described getting the bus into town and making their own medical appointments while being supported by staff when required.

The young people described how they spent their free time, which included gaming, reading and watching television. All the residents attended a local community youth club on a weekly basis. The residents also went on outings to local restaurants and engaged in volunteer work. One young person said they had asked to take part in community sports activities and this had not yet occurred. Staff told inspectors that this was being explored.

When asked what advice they would give to a new young person coming to the centre, one young person advised that you “keep your head down and do your work”. Another young person said “be mindful that the staff can get naggy” and gave the example of being told repeatedly to put away their cups and being regularly reminded of how much time they had left when playing video games.

Overall, the young people felt supported and safe. They experienced individualised care from an experienced and skilled team, which had a positive impact on their development.

Inspectors also sought the views of parents, social workers and a guardian ad litem as part of this inspection. One parent told an inspector that social care staff shared information with them on a regular basis. They spoke about being invited to and attending meetings with social workers and staff and described the centre as being ‘very safe’. They were aware of what key working sessions were. These were meetings between staff and a young person to provide them with advice and support through discussing various topics. They described staff as welcoming and approachable.

Social workers told an inspector they were very happy with the service provided to young people living in the centre. They described staff as "very good", "supportive", "very respectful and mindful". They described the service as "absolutely outstanding".
and described their communication as "fantastic". They also described the service as "very child friendly and child centred". A guardian ad litem told an inspector that the centre was "very welcoming", there was good communication and the centre made good use of the various spaces within the house.

**Capacity and capability**

This inspection found that the centre had good governance and oversight which ensured a safe service was provided to young people. The centre was last inspected in February 2021 against eight standards. All eight standards were found to be compliant. The current inspection found continued good levels of compliance in the centre.

Management structures were clearly set out and staff said they felt supported in their roles. There was one full-time centre manager and one deputy social care manager. A deputy regional manager oversaw the operation of the centre. The centre was adequately staffed by a consistent staff team. There was also a local protocol in place which included on-call arrangements, for accessing a member of the management team, out of hours. At the time of the inspection there were four full-time social care leader positions and 10 full-time social care worker positions. Two social care leader positions were vacant at the time of the inspection. Staff were flexible in covering shifts as required to ensure safe service delivery for young people. The centre had a cook and a housekeeper.

The centre manager told the inspector that in the months prior to the inspection, staffing had been impacted by the COVID-19 pandemic. The team managed this by being flexible in their working hours. When staff were on sick leave, others were flexible in covering shifts to ensure the centre continued to provide a safe service. The centre manager and deputy manager also rostered themselves into the work schedule to fill gaps where required. Staff who spoke with inspectors spoke about their managers in a positive manner.

The centre had an up-to-date comprehensive statement of purpose which contained adequate information as required by the standards regarding aims, objectives, services and it detailed the model of care being provided to young people. The specialised programme of care, services provided, policies that informed practice and the management and staffing arrangements to meet the specific care and support needs of the young people, were outlined in detail.

A child-friendly statement of purpose was provided to young people in an information booklet prior to their admission. This meant that young people had information about the centre made available to them before they moved in.

The centre had adopted and implemented a model of care that focused on meeting the individual needs of young people with particular consideration given to their lived
experiences. This model of care was embedded in practice within the centre. Staff working in the centre were competent, experienced and knowledgeable on the model of care and the individual needs of young people.

**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 clearly described the model of service delivered in the centre in line with the national standards.

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**

There was an appropriate number of staff employed in the residential centre with regard to the number and needs of the young people living there. Staff were organised and managed effectively and delivered a high standard of care and support to young people.

Judgment: Compliant

**Quality and safety**

Young people in the centre received good quality, individualised, person-centred care. The centre was homely and a safe place for them to live. Young people were supported to maintain regular contact with their families and significant others. Staff encouraged young people to pursue activities and to develop skills for their future. The staff team worked collaboratively with all relevant people in young people lives to promote their safety, care and welfare. Staff worked with young people to address issues in their lives and ensured that the safety of each young person was their main priority.

Two of the three young people, resident at the time of inspection, had an allocated social worker. The third young person was allocated to a principal social worker due to staff shortages. However, this did not have a negative impact on the young person's life as they were fully supported by the principal social worker. Social workers visited young people as required. Young people were given the opportunity to attend their child in care reviews if they wanted to and completed pre-child in care booklets to express their views and opinions on their care. Up-to-date care plans and child-in-care reviews took place in line with regulations for two young people. There was a three-month delay in the child-in-care review for the third young person and staff told inspectors this was due to COVID-19 sick leave. This delay did not have a negative impact on the care
provided to the young person as their placement support plans were reviewed regularly by the social care staff at the centre.

Placement plans were drawn up for each young person at the beginning of their placement. They described in detail how the young person's needs would be met during their placement. Placement plans reflected young people's care plans and were of good quality. Placement support plans were up to date and set out specific guidance for staff on their responses to the young people's needs. Progress in working towards set goals were measured on a regular basis with the involvement of the young people and the professionals working with them. Placement support plans were reviewed monthly, or more frequently when additional needs emerged, and updated in respect of progress. These monthly reviews were attended by residential care staff, social workers and guardians ad litem, as well as other relevant professionals.

Young people were supported by staff to maintain appropriate contact with their family and community, as well as significant others such as friends and foster carers. They could phone their families and friends. Families and friends were welcome to visit the centre and these visits were planned with social care staff and social workers. Young people, in agreement with their social workers, also made plans to stay with relatives at times. Staff maintained logs of all contacts with parents/guardians, family members and significant others.

The safety of the young people was the main priority of managers and staff. The centre had a safeguarding statement and there was a national policy and procedures on safeguarding and child protection. Both staff and young people reported no incidents of bullying at the centre. All staff had up-to-date training in Children First: National Guidance of the Protection and Welfare of Children (2017). Staff who spoke with inspectors were aware of their responsibilities as mandated persons and were also familiar with the policy on protected disclosures.

Child protection concerns were reported and managed appropriately. Child protection concerns reviewed by inspectors were referred to Tusla through the portal, and in line with Children First. Staff who spoke to inspectors were knowledgeable of their responsibilities in relation to reporting child protection concerns and confirmed that all staff had access to the Tusla portal. The centre manager held a log of child protection referrals, including status and outcome of referrals, and inspectors saw they communicated with social workers regarding outcomes as needed.

Safety measures within the centre were well maintained. Staff were trained in fire safety and adequate fire precautions, including fire and smoke alarms, were in place. Fire safety training was impacted by COVID-19 and this meant not all staff had up-to-date training in fire safety. Inspectors confirmed that this training had been scheduled to occur in the months following the inspection. Staff completed fire checks as required and fire drills with the young people occurred on a regular basis. When an issue with the emergency lighting was identified during a fire check, it was addressed in a timely
manner. Cars used to transport the young people were roadworthy, regularly serviced and insured.

The centre was clean, adequately lit and ventilated. It was generally well maintained and sufficiently large for its purpose and function. Works had been undertaken around the centre during the previous year. Staff and young people had created a sensory garden and new furniture had been bought for the living areas. The service had further plans to completely refurbish the centre and although there was no specific time frame for this, it had been agreed by senior management and was likely to occur later in the year.

Risks were managed appropriately in the centre. Prior to each admission, a risk assessment considered potential risks in relation to the young person being admitted as well as the potential impact on the current residents. Individual risk assessments were then carried out in relation to specific young people depending on their needs. Managers and staff collaborated well with external professionals to ensure the safety of young people living in the centre. There was regular communication with social workers and guardians ad litem, as well with the service psychologist. Risk assessments occurred as required to ensure activities and outings were safely managed. Social workers told inspectors about a strong interagency approach and said that they worked well together to prioritise young people's safety.

The centre had a risk register which was reviewed regularly. Systems were in place for identifying and managing risks in the centre, as well as escalating risks that they could not manage. Systems were also in place for the notification of accidents and incidents, and significant events notifications (SENs) were sent to senior managers and copied to the young people's social workers. The significant events were also subject to review at regional management meetings.

The staff team adopted a restorative approach to the management of behaviour. The team built respectful relationships with the young people and developed an understanding of how each young person behaved in the context of their own personal experiences. All staff received training in a Tusla-approved approach to managing behaviour that challenges. There was no incidence of physical restraint in the centre in the 12 months prior to the inspection. There was clear oversight and review of the use of restrictive practices so that managers could be assured that the least restrictive measures were in place for reasons of risk and for the shortest duration possible. When necessary, managers reported incidents to the local Garda Síochána.

Each young person had an individual crisis management plan and an absence management plan based on risk assessments. These set out the interventions to be used by staff. Inspectors sampled some of the significant events records and noted these were appropriately managed with good oversight. There were no missing from care episodes for several months prior to the inspection.
The health and developmental needs of the young people were identified prior to admission and these were addressed in the centre. Inspectors reviewed the health needs of three young people and found their needs were identified and addressed in a timely way. Access to a specialist psychological service was provided within the centre with the young people attending appointments on a weekly basis. Inspectors found that young people were supported to attend health services in a timely way as needed and young people also told inspectors that this was the case. Key working records also showed that young people were supported to develop knowledge and understanding around their health, including sexual health.

Systems were in place to ensure that medicines for young people were well managed. Most staff were trained in the safe administration of medicines and management kept a tracker of those who had yet to complete training. There were comprehensive medication management policies and procedures to guide them. Accountability for medication management involved daily counts of the stocks of medicines and monthly audits. The manager's monthly audit identified errors when counting medication and one error in the administration of medication. While these errors did not have a negative impact on the young people, they were subsequently discussed with staff at team meetings to ensure the safe administration and management of medications. Controlled drugs were managed securely. Young people who could manage self-administration of medication were facilitated to do so and this was decided on an individual basis.

Two of the three young people attended a school which was located close to the centre. Staff liaised with the school as required and parents were invited to parent-teacher meetings. The young people's individual needs were met in the school. Details of their educational needs were outlined in their placement plans. The third young person was supported to undertake voluntary work on a weekly basis and spoke positively about this.

Young people were supported by staff to develop independent living skills. All young people were supported to develop skills for life, including cooking, budgeting and general self-care. Young people were supported to take the bus on their own into town to go to the shops and attend a local youth centre. They were supported to organise meals for themselves which included planning the meal, going to the shop by themselves to buy the ingredients and to cook the meal.

There was good transition planning for young people when they were moving out of the centre. Staff continued to offer support to young people for six-to-eight weeks after they moved out. This involved staff visiting young people and taking them out on activities, as well as being available by phone for all young people who had lived in the centre. This meant that young people continued to feel supported while settling into their new placement or returning home. Young people were asked for their feedback when they moved out of the centre. Inspectors reviewed one exit questionnaire and the
young person said they felt listened to, they always had someone to talk to and they had a voice in their care planning.

While the staff at the centre provided good transition planning, there was an issue with the timely identification of appropriate onward placements for some young people. Although the identification of an onward placement was not the responsibility of the team within the centre, it did impact on their service. This resulted in delayed discharges from the centre and it meant that young people were unsure about where they would be moving to. This had an impact on one young person, at the time of the inspection, who had been residing at the centre for longer than required having completed their treatment programme.

Two of the young people resident were over 17 years of age and had allocated aftercare workers. One young person had recently met their aftercare worker for the first time. Staff and managers told inspectors about how it would benefit the young people to be allocated aftercare workers at an earlier age to give them more time to build a relationship with them, to have more time to assess their needs and plan for their future. There was evidence in young people’s files that this suggestion had been communicated to social workers by centre staff. They advocated for young people to have aftercare plans in place earlier to support progress in their placement and to assist the young people moving to adulthood.

**Standard 1.5**
Each child develops and maintains positive attachments and links with family, the community, and other significant people in their lives.

**Regulation 8: Access arrangements**
Young people were supported to maintain contact with their family and other significant people in their lives. Staff were proactive in engaging young people in their personal interests and preferred activities and facilitated links with their local communities.

**Judgment: Compliant**

**Standard 2.2**
Each child receives care and support based on their individual needs in order to maximise their wellbeing and personal development.

**Regulation 23: Care Plan**
**Regulation 24: Supervision and visiting of children**
**Regulation 25: Review of cases**
**Regulation 26: Special review**

Care practices took account of the young people’s individual needs in a respectful manner. Programmes of care were based on each young person’s needs to support them in the most suitable manner.

**Judgment: Compliant**
### Standard 2.3
The children's residential centre is homely, and promotes the safety and wellbeing of each child.  

**Regulation 7: Accommodation**  
**Regulation 12: Fire precautions**  
**Regulation 13: Safety precautions**  
**Regulation 14: Insurance**  

The centre had a homely atmosphere which promoted the safety and wellbeing of the young people residing there. The management team showed commitment in striving to improve the centre further, with plans in place for a full refurbishment of the centre.

Judgment: Compliant

### Standard 2.6
Each child is supported in the transition from childhood to adulthood.

The young people were supported to develop their social and independent living skills as part of the care provided by the staff, which was aligned with young people’s interests and preferences.

Judgment: Compliant

### Standard 3.1
Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.

Safeguarding and child protection policies and procedures were effectively implemented in the centre. Young people were supported to develop their understanding and skills for their own protection.

Judgment: Compliant

### Standard 3.2
Each child experiences care and support that promotes positive behaviour.

A positive approach to the management of behaviour that challenges was promoted in the centre and was supported by appropriate policies and procedures that guided practice. Staff were knowledgeable and had a good understanding of each young person’s behavioural support needs. Records demonstrated consistency in behaviour management approaches.
Judgment: Compliant

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<th>Standard 4.2</th>
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<td>Each child is supported to meet any identified health and development needs.</td>
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<td>Regulation 9: Health care</td>
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<td>Regulation 20: Medical examination</td>
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| The health, wellbeing and development of each young person was actively promoted by the centre. Young people had access to all appropriate medical and health services as required. |

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