

Report of a Children's Residential Centre

Name of provider:	The Child and Family Agency
Tusla Region:	Dublin North East
Type of inspection:	Announced
Date of inspection:	19 and 20 November 2020
Centre ID:	OSV 0004200
Fieldwork ID	MON 0031155

About the centre

This was the first inspection of the centre since it reopened as a respite service in December 2018.

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

The centre is a Child and Family Agency residential respite service located in the North of the country. The centre provides a respite and support service for children between the ages of 5 and 17 years who are living at home or in foster care, that have been identified as requiring additional supports to maintain their placement in a family environment. The centre can offer respite and day/outreach support for up to 20 children and their families, with capacity for up to 4 children to stay overnight.

Number of children on the date of inspection:

3

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 summarise 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
19 November 2020	9:00hrs to 18:00hrs	Sabine Buschmann	Inspector
20 November 2020	10:00hrs to 17:00hrs	Sabine Buschmann	Inspector

Views of children who use the service

The centre was a large detached bungalow on a spacious site located on the outskirts of a town. The centre consisted of four bedrooms with a large front and rear garden and provided a spacious environment. The centre was clean, warm, and homely and had recently been refurbished. The inspector observed that close attention had been paid to the internal decorating of the centre creating a relaxed and comfortable atmosphere. The children had their own individual bedrooms with a wardrobe to store their belongings. There was a playroom, a sensory room, a beauty room, and a visitor room with a separate kitchen. Children told the inspector they enjoyed being in the centre and that they found the house to be "cosy" and "comfortable".

This inspection found that children experienced good quality care in the centre. Children were listened to and activities provided in the centre were based on children's interests, fostering existing hobbies as well as providing children with new experiences. The staff team was proactive and innovative in providing care to the children and to ensure they could pursue hobbies and activities they enjoyed.

The Inspector met with two children and spoke on the phone to a third child who were accessing the centre for respite care. Children told the inspector that they liked coming to the centre and that they found the staff to be nice, easy to talk to and that they could confide in staff when they needed to talk about personal issues. The children described how much they enjoyed the activities offered by the centre which included horse riding, trips to the cinema, surfing, go-carting and attending the gym. Children told the inspector that they were consulted on all the activities that were on offer in the centre and their likes and dislikes were discussed at children's meetings or in private with their respective keyworkers.

Children told the inspector that due to the recent COVID 19 restrictions in September 2020, activities had been based at the centre, but that they still enjoyed these activities which included baking, cooking, art work, sewing, spending time in the make-up room or as one child explained it, "chilling out in the sensory room and listening to my favourite music." Another child talked about making a cottage pie with brussels sprouts and how much they enjoyed this activity.

The inspector also spoke with three foster carers, three social workers and one guardian ad litem over the phone during the course of the inspection. Social workers and the guardian ad litem said that the service provided by the respite centre was well organised and child-centred. They also said that the staff team were good advocates for children and that the respite facility was providing the families with extra supports to manage day to day life when the children were at home. One social worker told the inspector that the centre was instrumental in guiding a child to pursue a particular path in education that

was most appropriate to the child's current needs and abilities. Foster carers told inspector that the children loved going to the centre and that the centre was like "a second home" for children. They also spoke positively about the staff team who they described as committed and that they really listened to the children's views.

Capacity and capability

The centre was well managed and the governance arrangements in place ensured that the service provided to children was safe and of good quality. There was a management structure in place with clearly defined lines of authority and accountability. The centre manager was experienced and competent. The manager was supported by an equally experienced deputy manager and six social care leaders. The centre manager reported to the alternative care manager, who had overall responsibility for the quality and effectiveness of services provided. Staff and managers were clear about their roles and responsibilities and the management team provided strong leadership and support to the staff team.

There was an experienced and qualified staff team in the centre to provide care to the children. The centre provided respite care for up to four children on any given day. The centre had six social care workers and six social care leaders in addition to the centre manager and the deputy manager. The centre did not use agency staff but employed two qualified relief workers in the centre. While most staff had a qualification in social care, two social care leaders who had transferred to the centre in the last two years, did not have formal social care qualifications. While it was evident that ongoing skills training for these staff members had taken place, there were currently no plans in place for the staff to gain the required qualifications.

Strong leadership and governance arrangements are underpinned by current and relevant policies, procedures and guidelines, but Tusla had not updated the full suite of policies and procedures for children's residential centres since 2010. As centre practice was ahead of policies and procedures, managers' capacity to monitor practice and performance effectively against policy and procedure was hindered. The lack of updated national policies had been added to the risk register and as such identified that the management's capacity to monitor practice was hindered.

The centre had a statement of purpose and function which had been reviewed in February 2020. This was a comprehensive document which accurately described the full organisational structure, the ethos and philosophy of the centre, the model of care, the management and staff employed in the centre and the policies and procedures that inform the daily care practice in the centre. A child friendly version of the statement of purpose and function was displayed in the centre and a copy was given to children and families availing of the services provided by the centre.

There were effective systems in place to manage risk in the centre. The centre maintained a risk register that was reviewed regularly and when a risk occurred. Risks were described and appropriate control measures were in place to mitigate these risks. Risks assessments completed included general risks to children, for example suicidal ideation, managing behaviours that challenged or risks associated with the impact of COVID-19. From a review of files inspectors found that individual and collective risk assessments were detailed and of good quality and gave consideration to children's individual needs, vulnerabilities and in case of a new admission how these would impact on the children living in the centre. There were clear procedures in place to escalate risk if necessary.

The centre had a systematic approach to auditing practice, which was tracked on an electronic spreadsheet. Managers read and signed off on children's daily logs, key working reports and all other care records generated by staff. They carried out audits on file content and the quality of care records. The manager used an audit tool to record audits and the improvements which were required, and dated and signed off on actions when they were implemented.

The alternative care manager had good oversight of the centre. She provided regular supervision to the centre manager, visited the centre, met the children and attended staff meetings on several occasions. She received frequent updates on the activities and performance of the centre, including significant event notifications, minutes of all staff meetings and monthly operational reports.

There was a register for children maintained in the centre that contained all the information required by the regulations.

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 management and governance arrangements in the centre ensured that the care and support delivered to children was child-centred, safe and effective. All aspects of care were subject to regular review. Effective risk management systems were in place and where risks had been identified there were effective risk assessment and management plans which were reviewed regularly. The centre did not have up to date operational policies and procedures in line with national standards.

Judgment: Substantially compliant

Standard 5.3

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

The centre had a statement of purpose and function which clearly described the model of service that it delivered. There was also a children's version available, which provided children and families with information about life in the centre.

Judgment: Compliant

Quality and safety

The care provided to children in the centre was of good quality and catered to the individual needs of the children. Inspectors found that staff were skilled and sensitive in responding to the children's needs. All of the children who spoke to the inspector said that they loved coming to the centre and that the centre was a place that was peaceful and where they could "chill out". The centre operated a therapeutic model of care that focused on the development of healthy relationships which challenged and supported children without judging them. Children were involved in activities relevant to their interests and hobbies. Activities were planned on a daily basis, in line with the children's placement plans. Staff were proactive and innovative in supporting children to pursue their hobbies and interests.

Children also had the opportunity to participate in the running of the centre in relation to the care they received. The centre had introduced feedback forms which provided children with an opportunity to provide feedback and make suggestions. Regular children's meeting were held fortnightly using a child friendly template, which enabled children to

participate in the running of the centre as a group. In addition, children shared the task of minute taking and chairing meetings to learn new skills. The minutes of the children's meetings were presented to the staff team meeting for discussion and feedback was provided to children's meeting.

Inspectors found that there was good communication between the centre and the relevant people in the children's lives. Staff had contact with schools, training centers, social workers and relevant professionals as required. Social workers told inspectors that they were updated on the children's behavior and activities during their stay at the centre. Foster carers told inspectors that they received regular up-dates from the staff in the centre and that communication with the staff team was 'excellent'.

The centre had measures in place to promote the safety of children. Staff responded appropriately to child protection concerns by referring them to the relevant social work department. Staff and managers who spoke to the inspectors had good knowledge of their obligations under Children First 2017. The centre had a safeguarding statement and a range of protective measures, which included collective and individual risk assessment to any new risks that emerged. The inspector reviewed the child protection register and found it contained two child protection concerns which were open and were reported in line with Children's First 2017.

The centre had a system in place to manage complaints in line with Tusla policy. Children who spoke to the inspector knew their rights and were familiar with the complaints policy. Complaints were recorded, managed, reviewed and investigated and had been addressed in a timely manner. Information about children's rights was prominently displayed on noticeboards.

Significant events were responded to appropriately. Records of these events were well maintained and significant events were reported to social workers, the monitoring officer, guardians' ad litem and parents/guardian. From a review of the centre's SEN log the inspector found that incidents for the centre were very low and when they occurred they were notified in a timely manner. The centre manager attended Tusla's significant event review group (SERG) meetings for the Dublin Mid Leinster service area. This allowed for independent monitoring of selected significant events occurring in the region, and recommendations from the SERG group were shared and discussed at staff team meetings. This promoted learning amongst the staff team.

All children had up to date care plans and their individual goals were reviewed regularly or as required. Placement plans were up-to-date at the time of inspection and were based on the goals identified in the care plans provided by the social work department. Placement plans were based on a therapeutic model of care and were detailed and of good quality, outlining the children's needs and supports required to assist in meeting those needs. Children who spoke to the inspector said they were consulted in the development of their

placement plans. The inspector reviewed children's records and found that the aims and objectives of the placement plans were reflected and acted upon in key working sessions and planned activities. In addition, staff who spoke to the inspector had very good knowledge of the needs of the children and this was clearly reflected in the daily records of the children.

The inspector found that the health, wellbeing and development of each child was promoted by the staff within the centre. Staff were skilled and sensitive in responding to the children's needs and focused on the positive elements of the children's lives. The inspector observed that staff encouraged children to participate in decision-making of their daily activities. Children told the inspector that they were able to choose their activities during their respite stay. Children enjoyed surfing, hiking, sports baking, while other children liked cooking, baking, beauty room activities, horse riding, going to the cinema, and this was facilitated by the staff team. The inspector found that children participated in the planning of their respite stay and staff worked in collaboration with children to develop individual activity plans.

Children's mental, physical health and wellbeing was also promoted in the centre. This was achieved through direct work with children on relevant topics such as keeping safe during the COVID-19 crisis, one to one key working sessions, physical activities, and through informal discussions when issues arose.

The centre held relevant health and medical records for children on file. All children had a general practioner and there was details in relation to medical consent on children's files. There was a medication management policy and procedure in place for the centre. This policy guided staff in the management, recording and administration of medication. All staff had received training in medication management.

All children who were using the respite service were in full time education. The staff team supported the children's educational development by providing assistance with homework and offering practical support such as transport to and from school during their stay.

The majority of staff were trained in an approved approach to managing behaviours that challenged. The centre manager told the inspector that due to COVID-19 restrictions the practical training had been suspended, and two staff had been unable to complete the full training. The centre manager was awaiting an update as to when the training would resume. Both staff had completed the online component of the training module.

Restrictive practices such as physical interventions were not used within the centre. Children were not subject to any unnecessary restrictive procedures in the centre. The centre manager told the inspector that restrictive practice would only be utilised when an individual risk presented, was appropriately risk assessed and would be used for the shortest possible time with ongoing review.

Standard 2.2

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

The care and support that children received in the centre was based on their assessed needs. Children were consulted in the development of their placement plans and had input into the day-to-day running of the centre.

Judgment: Compliant

Standard 3.1

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

Children were safeguarded in the centre and their care and welfare was protected and promoted. The centre had an up-to-date safeguarding statement and staff had a good understanding and working knowledge of Children First: National Guidance on the Protection and Welfare of Children (Children First), 2017.

Judgment: Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

The centre had implemented a model of care that promoted positive behaviours and restrictive practice was not used in the centre. However, two member of staff had not completed the practical component of an approved model of managing behaviours that challanged as the component was cancelled due to the COVID 19 pandemic

Judgment: Compliant

Standard 4.1

The health, wellbeing and development of each child is promoted, protected and improved.

Inspectors found that the health, wellbeing and development of each child was promoted by the staff within the centre. Staff were skilled and sensitive in responding to the children's needs and focused on the positive elements of the children's lives.

Judgment: Compliant

Standard 4.2

Each child is supported to meet any identified health and development needs.

The centre had interventions in place to support children's health and development needs. The centre had appropriate medication management systems in place. There was a medication management policy and procedure in place for the centre.

Judgment: Compliant

Standard 4.3

Each child is provided with educational and training opportunities to maximise their individual strengths and abilities.

All children who were using the respite service were in full time education. The staff team supported the children's educational development.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
Standard 5.2	Substantially compliant
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.	
Standard 5.3	Compliant
The residential centre has a publicly available statement	
of purpose that accurately and clearly describes the	
services provided.	
Quality and safety	
Standard 2.2	Compliant
Each child receives care and support based on their	Compliant
individual needs in order to maximise their wellbeing and	
personal development.	
Standard 3.1	Compliant
Each child is safeguarded from abuse and neglect and	
their care and welfare is protected and promoted.	
Standard 3.2	Compliant
Each child experiences care and support that promotes	
positive behaviour.	
Standard 4.1	Compliant
The health, wellbeing and development of each child is	
promoted, protected and improved.	
Standard 4.2	Compliant
Each child is supported to meet any identified health and	
development needs.	
Standard 4.3	Compliant
Each child is provided with educational and training	
opportunities to maximise their individual strengths and	
abilities.	