

**Health Information and Quality Authority
Regulation Directorate**

Monitoring Inspection Report on children's
statutory residential centres under the Child Care
Act, 1991



Type of centre:	Children's Residential Centre
Service Area:	CFA DNE CRC
Centre ID:	OSV-0004175
Type of inspection:	Unannounced Full Inspection
Inspection ID	MON-0019011
Lead inspector:	Grace Lynam
Support inspector (s):	Ann Delany; Sabine Buschmann

Children's Residential Centre

The Health Information and Quality Authority (the Authority) monitors services used by some of the most vulnerable children in the state. Monitoring provides assurance to the public that children are receiving a service that meets the requirements of quality standards. This process also seeks to ensure that the wellbeing, welfare and safety of children is promoted and protected. Monitoring also has an important role in driving continuous improvement so that children have better, safer services.

The Authority is authorised by the Minister for Children and Youth Affairs under Section 69 of the Child Care Act, 1991 as amended by Section 26 of the Child Care (Amendment) Act 2011, to inspect children's residential care services provided by the Child and Family Agency.

The Authority monitors the performance of the Child and Family Agency against the National Standards for Children's Residential Services and advises the Minister for Children and Youth Affairs and the Child and Family Agency. In order to promote quality and improve safety in the provision of children's residential centres, the Authority carries out inspections to:

- assess if the Child and Family Agency (the service provider) has all the elements in place to safeguard children
- seek assurances from service providers that they are safeguarding children by reducing serious risks
- provide service providers with the findings of inspections so that service providers develop action plans to implement safety and quality improvements
- inform the public and promote confidence through the publication of the Authority's findings.

Compliance with National Standards for Children's Residential Services

The inspection took place over the following dates and times:

From:	To:
28 March 2017 10:30	28 March 2017 17:45
29 March 2017 09:00	29 March 2017 14:45

During this inspection, inspectors made judgments against the *National Standards for Children's Residential Services*. They used three categories that describe how the Standards were met as follows:

- **Compliant:** A judgment of compliant means that no action is required as the service/centre has fully met the standard and is in full compliance with the relevant regulation, if appropriate.
- **Substantially compliant:** A judgment of substantially compliant means that some action is required by the service/centre to fully meet a standard or to comply with a regulation, if appropriate.
- **Non-compliant:** A judgment of non-compliant means that substantive action is required by the service/centre to fully meet a standard or to comply with a regulation, if appropriate.

Actions required

Substantially compliant: means that action, within a reasonable timeframe, is required to mitigate the non-compliance and ensure the safety, health and welfare of the children using the service.

Non-compliant: means we will assess the impact on the children who use the service and make a judgment as follows:

- **Major non-compliance:** Immediate action is required by the provider to mitigate the noncompliance and ensure the safety, health and welfare of the children using the service.
- **Moderate non-compliance:** Priority action is required by the provider to mitigate the non-compliance and ensure the safety, health and welfare of the children using the service.

The table below sets out the Standards that were inspected against on this inspection.

Standard	Judgment
Theme 1: Child - centred Services	
Standard 4: Children's Rights	Substantially Compliant
Theme 2: Safe & Effective Care	
Standard 5: Planning for Children and Young People	Non Compliant - Moderate
Standard 6: Care of Young People	Substantially Compliant
Standard 7: Safeguarding and Child Protection	Compliant
Standard 10: Premises and Safety	Substantially Compliant
Theme 3: Health & Development	
Standard 8: Education	Compliant
Standard 9: Health	Compliant
Theme 4: Leadership, Governance & Management	
Standard 1: Purpose and Function	Compliant
Standard 2: Management and Staffing	Non Compliant - Moderate
Standard 3: Monitoring	Substantially Compliant

Summary of Inspection findings

The centre provided respite care both to children living at home and to children in foster care. For children living at home the provision of respite care for regular periods supported them to stay at home and provided breaks for families and children from difficult family dynamics. Foster care placements were supported to continue for extended periods when they were difficult for children and foster carers. The centre had the capacity to provide respite care for up to 15 children and young people. At the time of the inspection regular respite care was being provide to 8 children for differing periods of time and with varying regularity depending on their individual circumstances. At the time of the inspection, there were 2 children living in the centre.

During this inspection, inspectors met with or spoke to 2 children, managers and staff. Inspectors observed practices and reviewed documentation such as statutory care plans, child-in-care reviews, relevant registers, policies and procedures, children's files and staff files.

Inspectors also spoke with one young person by telephone. Five questionnaires completed by children were received following the inspection. Inspectors spoke with a parent and with social workers for the children.

Whilst there were only two children staying in the centre on the night prior to the inspection, two children were visiting the centre on day two of the inspection as part of their transition plan. There were four children in the process of being admitted to the centre. The transition plan involved the children and their parents or carers visiting the centre, the children staying for extended periods of time, and information gathering prior to the children being formally admitted for an overnight stay.

The staff team in the centre provided good quality, safe care to children who required regular, short breaks from either their own homes or their foster homes. This respite care supported foster care placements and maintained children in their own homes. Children presented as relaxed and happy in the centre. Children were safe and well cared for by the staff team. Inspectors observed that the staff team maintained contact with the families of all the children using the centre and not just those currently being cared for.

Children told inspectors that they liked coming to stay in the centre. They said that it was fun and that staff were kind and nice. Children told inspectors that they felt safe and they were given a say in important decisions about their lives. In addition, they said their opinions were listened to and they were aware of their rights. None could think of anything about the centre they would like to change. Children knew that records were held on them and how to access them. Some children had read their files. Children all had keyworkers allocated to them. They described their keyworker's role as making sure they were okay, helping them if they needed it and representing them. Families were satisfied with the care their children received in the centre.

The staff team were experienced and committed to the children and their families. Inspectors observed the staff in their duties and found they worked well together in the best interests of the children. Staff worked well together in the best interests of the children.

The centre manager provided good leadership to the staff team and was supported by a deputy. However, whilst there was some good external oversight of the management of the centre it required further development and attention to detail.

Inspection findings and judgments

Theme 1: Child - centred Services

Services for children are centred on the individual child and their care and support needs. Child-centred services provide the right support at the right time to enable children to lead their lives in as fulfilling a way as possible. A child-centred approach to service provision is one where services are planned and delivered with the active involvement and participation of the children who use services.

Standard 4: Children's Rights

The rights of young people are reflected in all centre policies and care practices. Young people and their parents are informed of their rights by supervising social workers and centre staff.

Inspection Findings

Children's rights were respected and promoted by the staff team. When children first came to stay in the centre they received an induction pack, which included information about their rights. Inspectors found that children were aware of their rights. Their families' rights were also respected by the staff team. Some children had accessed information held about them on their files.

Children were consulted regularly on some aspects of their care. Some children attended their own planning meetings. They were consulted about food preferences and individual interests, and these were integrated into the plans for their care. The Centre Manager had discussed with the Alternative Care Manager how best to involve children in the running of the centre and they had identified that further efforts should be made to formally consult children in all aspects of their care.

Some children had also met with representatives from a national organisation for empowering children in care who visited the centre to inform children about their rights and how to access them. Further visits had been scheduled so that children that were new to the centre also had this opportunity.

Inspectors observed that staff were respectful in their interactions with children and their families.

Complaints were well managed. There was a revised Tusla policy on complaints that guided practice in the management of complaints. There had been five complaints made about the centre since the last inspection and all of these had been appropriately investigated and closed off. Three of these complaints had been made by children using the service. There was evidence that staff learned from the outcome of the complaints process and made changes to practice as a result. Inspectors spoke with staff who knew how to manage and report complaints and encouraged children to complain when they had any issues. In addition to this, complaints were discussed as a standing item at team meetings so that staff were aware of what issues the children had and how

they had been resolved. However, not all staff inspectors spoke with were familiar with the revised policy.

Judgment: Substantially Compliant

Theme 2: Safe & Effective Care
Services promote the safety of children by protecting them from abuse and neglect and following policy and procedure in reporting any concerns of abuse and/or neglect to the relevant authorities. Effective services ensure that the systems are in place to promote children’s welfare. Assessment and planning is central to the identification of children’s care needs.

Standard 5: Planning for Children and Young People
There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. This plan states the aims and objectives of the placement, promotes the welfare, education, interests and health needs of young people and addresses their emotional and psychological needs. It stresses and outlines practical contact with families and, where appropriate, preparation for leaving care.

Inspection Findings

Admissions to the centre were planned. There were effective procedures in place for admissions to ensure placements were suitable and safe. The centre followed the national protocol for admission and discharge for Tusla residential centres. There had been 18 new admissions to the centre in the 12 months prior to the inspection.

At the time of the inspection there were four children receiving respite care in the centre and another four children were in the process of being introduced to the centre. Information was provided to the staff team prior to any child visiting the centre and where there were gaps there were efforts made by the staff to obtain the information from the children's social workers. Some children attended meetings that took place to plan their admission to the centre. The Deputy Centre Manager told inspectors that children were fully involved in whether or not they came to the centre for respite. The admission process included an induction period when children and their families could visit the centre. Children and families received information about the centre and about their rights as part of this induction process. Transition plans were developed which outlined the period over which the child would visit the centre- including overnight stays- to allow the child to settle in to the regular respite plan. The Centre Manager told inspectors that she made a decision about the appropriateness of the mix of children in the centre based on her knowledge of the needs of the current children availing of the service.

Discharges were planned in a child-centred manner. The centre Manager told inspectors that discharges were discussed at strategy meetings and the number of night's respite a child received was phased out by agreement with all relevant parties. Inspectors observed a staff meeting where the possibility of keeping places available for children

being discharged was explored alongside discussions about new admissions. There had been 13 discharges in the 12 months prior to the inspection.

All but one of the children's files contained all the statutory information required. The efforts of the staff team to procure the outstanding information were evident on the file.

Care Plans were contained in all children's files. They were of mixed quality, some contained more detail than others about the child's assessed needs. Children told inspectors they were involved in decisions that were important to them and that their care plans helped them. Members of the staff team attended care plan review meetings as appropriate for the children receiving respite care in the centre.

Placement plans were clear about the objectives of each child's placement and how these would be achieved. They reflected children's Care Plans and appropriately guided staff in the daily care of the children. The staff who spoke with inspectors were knowledgeable about the needs of the children and inspectors read records of their daily care which reflected this. Weekly placement progress reports were sent to children's social workers to keep them updated on the progress of the child in the placement. Placement Plans were regularly reviewed and updated to reflect the child's needs.

Children maintained good relationships with their families and friends as they only came to the centre for respite. Parents told inspectors they had visited the centre and had been welcomed. Inspectors noted that some children were placed long distances from their own communities and this resulted in issues in relation to transport for school. Some children did not know whether their friends could visit the centre or not.

Children's emotional and physical needs were assessed and met. Inspectors read accounts of individual keyworking sessions with children which reflected caring and natural interactions between the staff members and children. Staff members were observed by inspectors interacting respectfully and warmly with the children and heard them communicating in the same manner with their families.

Children's records were of mixed quality. Inspectors noted from file reviews that there was some good recording practice evident where records were factual and accurate. However, other files were not always legible, complete or well organised. Staff team members told inspectors that the templates used for recording the children's care in the centre did not always suit the circumstances of a respite situation. The Centre Manager and the Deputy Manager had identified this deficit through file audits carried out. They had agreed a plan, in principal, to address the recording system to ensure the deficit would be addressed.

Filing systems were not adequate. Files were maintained on each of the children receiving respite care in the centre but there was no standardised filing system in place that ensured that all files on each child were held together. Inspectors observed that, for example, separate folders containing records on children were loose in a filing cabinet.

Judgment: Non Compliant - Moderate

Standard 6: Care of Young People

Staff relate to young people in an open, positive and respectful manner. Care practices take account of young people's individual needs and respect their social, cultural, religious and ethnic identity. Staff interventions show an awareness of the impact on young people of separation and loss and, where applicable, of neglect and abuse.

Inspection Findings

Children were cared for in a manner that respected their individual choices and preferences. Inspectors viewed photographs displayed in the centre of the children engaged both in individual and group activities. Children told inspectors that they sometimes went on outings with members of the staff team. Files reviewed reflected that young people were invited and encouraged to take part in activities such as outings to the cinema. Individual achievements were celebrated in the centre such as birthdays and special occasions.

Nutritious food was readily available for the children and the provision of food was sympathetic to cultural needs of the individual children. Children told inspectors they helped staff with the shopping and that they sometimes helped to prepare meals. Inspectors observed that mealtimes were relaxed, social events where staff and children sat together. Children told inspectors they liked the food in the centre.

Staff were skilled and sensitive in meeting the children's diverse needs in relation to diversity, disability and communication. The staff team engaged the children in group sessions whereby topics such as the appropriate use of social media were discussed. In this way all the children learned about the issue without the focus being on any one child.

Children told inspectors they knew what the rules of the centre were and what was expected of them. They said that the staff would tell them if they were not keeping the rules. The centre followed the Tusla policy for the Dublin North East area for managing behaviour and restraint had not been used to manage behaviour in the twelve months prior to the inspection. Sanctions, when used, were fair and were explained to children. Incentives were used such as the opportunity to earn pocket money for completing a household job.

Staff were aware and adhered to missing from care procedures. There had been one occasion in the 12 months prior to the inspection when a child had been missing from care. The correct protocols had been followed in relation to this and the incident was well managed and appropriately reported. The staff team had appropriately attended strategy meetings and liaised with other professionals to ensure the child's safety.

Files reviewed by inspectors reflected that children had absence management plans in place to guide the staff team in managing such events. The centre's most recent governance report identified that all children had absence management plans in place in line with a national protocol.

Restrictive practices were not always used as a last resort and for the shortest duration possible. The centre used an alarm on children's bedroom doors at night as a safeguarding method and, whilst it was identified as a restrictive practice which was regularly reviewed, there were instances when it was used where it might not have been required. For example, when there was only one child staying in the house.

Judgment: Substantially Compliant

Standard 7: Safeguarding and Child Protection
Attention is paid to keeping young people in the centre safe, through conscious steps designed to ensure a regime and ethos that promotes a culture of openness and accountability.

Inspection Findings

There were measures in place to protect children and promote their welfare. Children were safe in the centre and all the children inspectors spoke with or who completed questionnaires said they felt safe. The centre had a designated liaison person (DLP) to whom all child protection and welfare concerns were reported. The DLP was familiar with a recently revised national child protection practice note. Staff inspectors spoke with were familiar with the reporting procedures required by Children First: National Guidelines for the Protection and Welfare of Children and the reporting requirements under the revised child protection practice note. Staff had conducted work with the children on bullying and the safe use of social media.

Staff inspectors met with were aware of the procedures for reporting concerns about colleagues practice but had not had reason to implement this procedure.

Child protection concerned were appropriately reported and investigated. There had been five child protection concerns reported in the 12 months prior to this inspection. Four of these related to the same incident. All concerns were closed.

Judgment: Compliant

Standard 10: Premises and Safety
The premises are suitable for the residential care of young people and their use is in keeping with their stated purpose. The centre has adequate arrangements to guard against the risk of fire and other hazards in accordance with Articles 12 and 13 of the Child Care (Placement of Children in Residential Care) Regulations, 1995.

Inspection Findings

The centre was fit for purpose. It was clean, homely, adequately lit and ventilated. There was sufficient communal space for children to have privacy or to spend time together. The centre provided respite care for up to fifteen children with four staying at a time. The bedrooms had ensuite bathrooms. There was a system in place to ensure that children's belongings were separated from those of others and that they were taken care of for them until they returned.

The centre had a health and safety statement but it was not up to date. Inspectors reviewed records that reflected that monthly health and safety checks were conducted throughout the centre. Risk assessments were completed when hazards were identified and appropriate controls put in place. Inspectors did not identify any safety hazards during the inspection.

There were adequate precautions in place against the risk of fire. Fire fighting equipment had been serviced and nine staff had been trained in fire safety in February 2017 so that all staff were up-to-date. All the children inspectors spoke with had participated in a fire drill. The centre had a fire certificate. The Centre Manager told inspectors that all children new to the centre completed a fire drill on their first night in the centre to ensure they were familiar with the drill. Inspectors reviewed the fire records which reflected that one staff member had not participated in a fire drill and there was no record of one child attending a drill.

The centre was generally well maintained. Inspectors reviewed the maintenance log book and found that maintenance issues were resolved in a timely manner. Inspectors observed that there were maintenance men working on the exterior of the centre during the inspection.

The centre was adequately insured and the centre vehicles were new vehicles and were road-worthy. The centre did not use a closed circuit television (CCTV) security system.

Judgment: Substantially Compliant

Theme 3: Health & Development
The health and development needs of children are assessed and arrangements are in place to meet the assessed needs. Children’s educational needs are given high priority to support them to achieve at school and access education or training in adult life.

Standard 8: Education
All young people have a right to education. Supervising social workers and centre management ensure each young person in the centre has access to appropriate education facilities.

Inspection Findings

Education was valued by the staff team and efforts were made to ensure that the children attended their schools. All the children attending the centre had school placements. Children attended school from the centre and staff facilitated their attendance at school by providing transport. Social workers also collected children from the centre to bring them to school. Some children attended schools that were not local so this involved long journeys for them. Inspectors reviewed files which reflected that the staff team liaised appropriately either school personnel, parents and other professionals about children's educational attainment. Staff supported and encouraged children to complete schoolwork. Some children told inspectors of their ambition to

attend college courses once they had completed their second level education.

Judgment: Compliant

Standard 9: Health

The health needs of the young person are assessed and met. They are given information and support to make age-appropriate choices in relation to their health.

Inspection Findings

Children's health needs were assessed and met insofar as the staff team were responsible for this aspect of their care. The children attending the centre were in the care either of their own parents or of foster carers who were responsible for their overall health needs being met. Children told inspectors that they had a general practitioner whom they could see when needed. Inspectors read files which reflected that children's health and wellbeing had improved due to individual work done in the centre with them. The staff team facilitated children's attendance at medical appointments in consultation with their parents and social workers. Inspectors reviewed a sample of children's records and found that children had medical examinations completed prior to their admission to the centre.

The staff team promoted a healthy lifestyle. Good quality individual work was completed with the children in addition to the groupwork that was carried out. Inspectors reviewed children's files which reflected that work had been completed with children around how to deal with bullying, drug awareness, smoking and good self-care. Files further reflected the positive impact this work had on the children.

Medication management practice required improvement. The staff team were using a HIQA guidance document to guide their medication management practices and the Centre Manager was trained in the safe administration of medication. There was a good medication reconciliation process in place and staff understood the need for good medication management and recording. There were appropriate arrangements in place for medical consent for administration of medication and emergency medical attention if required.

Judgment: Compliant

Theme 4: Leadership, Governance & Management

Effective governance is achieved by planning and directing activities, using good business practices, accountability and integrity. In an effective governance structure, there are clear lines of accountability at individual, team and service levels and all staff working in the service are aware of their responsibilities. Risks to the service as well as to individuals are well managed. The system is subject to a rigorous quality assurance system and is well monitored.

Standard 1: Purpose and Function

The centre has a written statement of purpose and function that accurately describes

what the centre sets out to do for young people and the manner in which care is provided. The statement is available, accessible and understood.

Inspection Findings

The centre had a statement of purpose and function to guide their care practice. There was also a child-friendly version of the Statement of Purpose and Function which was provided to children as part of their introduction to the centre.

The centre's statement of purpose and function stated that its aim was to support children from the ages of 12 to 18 years of age, in their current placements - either at home or in foster care - in order to prevent placement breakdown. The centre provided care for up to four children at a time and had up to eight children availing of respite care over a period of time. The centre staff sought to enable children and young people to meet their full potential by working with them and their families to meet identified needs and goals. The centre operated in line with the statement of purpose which was an accurate description of the day-to-day care provided by the staff team in the centre.

Judgment: Compliant

Standard 2: Management and Staffing

The centre is effectively managed, and staff are organised to deliver the best possible care and protection for young people. There are appropriate external management and monitoring arrangements in place.

Inspection Findings

There were effective management structures in place with clear lines of authority and accountability. The Centre Manager was competent and experienced and was supported by a Deputy Manager. The Centre Manager was clear about her roles and responsibilities. The Deputy manager covered for the manager in her absence. An Alternative Care Manager had external oversight of the centre. Inspectors spoke with staff and managers who were clear about their roles and responsibilities and inspectors observed them carrying out some of these responsibilities.

The Centre Manager and the Deputy provide good leadership to the staff team and worked well together to share the responsibilities of their roles.

There were some effective management systems in place. Communication was effective and was conducted through team meetings, supervision, informal daily contact and the formal daily handover to the staff coming on duty. Inspectors observed good teamwork and heard members of staff communicating with each other in a child-centred manner about the individual needs of the children.

Decision-making was clear and well-defined. Decisions made at team meetings were recorded and persons responsible for implementing them were identified. The Centre Manager had good oversight of actions agreed at team meetings and this was reflected in records inspectors reviewed. The Centre Manager had begun to monitor the quality of written records by conducting file audits. These had recently commenced and

required further development.

The Policies and Procedures for Children's Residential Centres, HSE, Dublin North East were the policies used to guide practice in the centre. The staff team were in the process of implementing revised national policies such as the revised child protection policy and procedure and the complaints policy. The Centre Manager told inspectors that it was a challenge to consistently implement all updates to policies and procedures.

The Alternative Care Manager (ACM) had external oversight of the centre and had some effective systems in place to ensure the quality and safety of the care provided in the centre. The ACM received governance reports every six weeks which provided them with up-to-date information on the centre. They also regularly visited the centre and conducted a number of systems checks which included reading of daily logs books and other records and observation of practice in the centre. However, the system checks had not identified the filing issue or the lack of consistency in supervision. The ACM told inspectors that they rarely identified issues in relation to the quality of record keeping. In addition, a National quality assurance programme was being implemented for which training was being provided in the month following the inspection prior to the implementation of the new quality assurance system.

There was a register of children in the centre which was maintained in line with the regulations and contained all the required information.

Significant events were notified promptly and managed appropriately. There had been 54 significant events in the twelve months prior to the inspection. Inspectors sampled records of these events which reflected that they were appropriately reported and managed. Safety plans were put in place when required and risk assessments carried out as appropriate. Some of these significant events were brought for discussion to a regional significant events review group (SERG) where suggestions for learning and improvement in practice were identified.

There were clear financial management systems in the centre. Inspectors reviewed the financial management records which reflected that receipts were kept and all expenditure was accounted for and reconciled.

Risk was well managed in the centre. Individual risk assessments were carried out for each child on admission to the centre in addition to collective risk assessments for the combination of children in the centre on each night. The centre maintained a risk register which risk reflected such risks as the risk of cyber-bullying to children and the risk of children smoking in the centre. All hazards identified on the risk register were rated between low to medium. Appropriate control measures were in place and these were regularly reviewed.

There were sufficient experienced and qualified staff in the centre to provide care to the young people. There was a stable, long term staff team of 13 full time staff which included social care leaders and social care workers in addition to the Centre Manager and the Deputy Manager. Inspectors reviewed a sample of staff files and found that An Garda Síochána (police) vetting was in place and qualifications were held on staff files. There were three unqualified staff working in the centre. There were no new staff employed in the 12 months prior to the inspection.

The supervision of staff required improvement. The Centre Manager, the Deputy Centre Manager and four social care leaders provided supervision to the staff team. All were trained as supervisors. Inspectors reviewed a sample of supervision records and found that supervision was recorded and signed appropriately. Discussion at supervision included updates on individual children, professional development and staff support and training needs. However, supervision was not always provided regularly in line with Tusla policy and the quality of recording was not consistent. Supervision records did not always include persons responsible for the actions agreed or the timeframes in which they were to be completed.

The provision of training required improvement. The Centre Manager told inspectors that a training needs analysis had been conducted early in 2017. Inspectors reviewed the centre governance record which reflected that staff were not up-to-date with all mandatory training. Whilst all staff had been trained in fire safety and manual handling, five had been trained in financial management, three staff had not received refresher training in Children First 2011 and none had received Dignity at Work training, Diversity training or training in medication management.

Judgment: Non Compliant - Moderate

Standard 3: Monitoring

The Health Service Executive, for the purpose of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements are in place to enable an authorised person, on behalf of the Health Service Executive to monitor statutory and non-statutory children's residential centres.

Inspection Findings

There were systems in place to improve the quality and effectiveness of the service. The Centre Manager had conducted a self assessment against the National Standards for Residential care in February 2017 as part of the National Monitoring and Quality assurance process. The external monitor had visited the centre in February but the report had not been issued at the time of the inspection.

Judgment: Substantially Compliant

Acknowledgements

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