



**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 East
Type of inspection:	Unannounced
Date of inspection:	24 th & 25 th January 2023
Centre ID:	OSV0004187
Fieldwork ID	MON_0039058

About the centre

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

The centre is managed by the Child and Family Agency and can accommodate up to four children or young people, both male and female, at any one time, aged between 13 and 17 years of age. The centre aims to provide a residential care placement for children and young people who have displayed problematic behaviours. The centre aims to promote well-being and reduce risk in order that the young people can return to their communities.

The centres objective is to provide a high standard of care and interventions to enable the young person to address their life experiences, to develop alternative skills and coping strategies in order to live safely in their community. This is achieved through a supportive, nurturing and holistic living environment that promotes well-being, safety, rights, education and community involvement.

The following information outlines some additional data of this centre.

Number of children on the date of inspection:	4
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To prepare for this inspection the inspector or inspectors reviewed all information about this centre. This included any previous inspection findings and information received since the last inspection.

As part of our inspection, where possible, we:

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

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

1. Capacity and capability of the service:

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

2. Quality and safety of the service:

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

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

This inspection was carried out during the following times:

Date	Times of inspection	Inspector	Role
24/01/2023	09:00 hrs – 18:00hrs	Hazel Hanrahan	Lead Inspector
25/01/2023	09:00 hrs – 17:00hrs	Hazel Hanrahan	Lead Inspector
30/01/2023	10.30 hrs – 12.00hrs	Hazel Hanrahan	Lead Inspector

What children told us and what inspectors observed

The centre is a large two storey house set on a large area that includes a garden. The centre is served by a main motorway to a neighbouring city and towns that offer access to schools, community groups and a range of activities such as sports, library and arts. The centre has access to three vehicles to support children to and from activities, school and contact with family members.

The inspector spoke with three children, one family member and one parent and listened to their experiences of the service.

The premises had access to a lot of natural light however, the sitting room, games room and hallways were cold looking and did not offer a warm feel to the house. Although the staff and managers had added cosy accessories to the space to make it warm, for example; lights, a stove, paintings, rugs, the cold feel to the house remained. A child who returned to the centre from school was heard by the inspector saying 'it's freezing in here'.

The premises had a games room that had video games, a television and games that catered to meet the children's needs through play. Additionally, there was a dedicated area in the sitting room that had a bookcase filled with books for different age ranges along with dvds. The games room also had a wall that was used as a blackboard for children to express themselves through drawings or words. The premises had a devoted sensory room for children. The sensory room was a combination of dark and relaxing and bright and engaging colours. Staff told inspectors that this offered a safe space for children that provided comfort and calm in times of distress. Similarly, the safe nature of the sensory room provided time away for children when they were feeling overwhelmed. It was clear from the inspector's observations and speaking with staff that managers had considered the positive impact a child's living environment can have on them and had recently installed a stove in the sitting room. The centre had a big outdoor space which was equipped with a large trampoline which was enjoyed by children.

There were four children living in the house at the time of the inspection and conversations were heard throughout the house when the children arrived back from school. The inspector was greeted by children who wanted to say hello and to speak with the inspector. The children told inspectors that they 'liked music' and spoke with excitement, had a big bright smile, about a musician whose music they listened to. The inspector was shown a personalised video that the children had received from the musician thanking them for their support. The children showcased their singing talent to the inspector by performing a verse of a song. Staff told inspectors that they had reached out to the musician because it was one of the children's goals to

meet them. Staff said that the musician had made a surprise video message to the children to thank them for their support. It was clear that the approach taken by the staff to help the children reach one of their goals created a positive life experience.

The inspector spoke with three children who described the staff and the service as follows;

- 'staff bring me to the cinema, [the beach] and drives'
- staff 'cook something different' if some of the children don't like the meal
- 'much better than where I was living'
- 'more relaxing'
- 'talk to all of them [staff]'
- 'don't ask about what else I would like to do'
- 'can be very annoying'.

Children told the inspector that they were not always listened to when new rules were introduced into the centre.

The children told inspectors that they knew what their rights were, with one child telling the inspector that staff talked to them about the topic. A child showed the inspector the weekly meal plan in the kitchen and said that staff cook food that children like. The staff showed the inspector the meal for dinner and how they had made two different types to cater for the dietary needs of all the children.

Maintaining family links for children was promoted and central to the work undertaken by staff and managers. A child told inspectors that 'ya I can see them'. Managers also recognised the importance of friendship groups to children and promoted keeping this contact. The children described their rights to the inspector as;

- 'I have a right to do this and that, school, see friends'
- 'can make decisions, see friends and family'
- staff 'ask do I want to go' to meetings.

Two children said to the inspector that they had a social worker. Both children had different experiences of their social worker by describing their contact as;

- 'social worker good with contact'
- 'listens to me'
- 'don't see [social worker] much anyway'.

Staff and managers promoted children's right to access information held about them on their case file with one child stating that 'staff ask me all the time if I want to read my file but I haven't'.

The inspector spoke with two family members who described their experience of the service. The feedback received was mixed with the following statements made;

- 'like staff, lovely'
- 'can call whenever I need them'
- 'have great support from staff with [child] being there'
- 'not very happy with how [staff] treat child'.

The inspector found that the views from family members on whether they felt that the children were kept safe and that their needs were met while living at the centre was also mixed with the following statements made;

- 'I do feel [child] is safe'.
- 'I think the [child] feels they are safe too'
- [child] 'is isolated'
- 'not getting looked after'
- 'definitely meet [child's] needs'
- 'supportive in every way'.

The inspector spoke with two social workers who spoke positively about the staff and managers and the care and support provided to the children. They said;

- 'absolutely child centred'
- 'open communication'
- 'they provide information in a child friendly way'
- 'inclusive to children's needs'
- 'respect children's choices'
- Staff 'take time to talk with [child] and [child] voices how they are feeling'
- 'staff willing to do anything'
- 'focus is very much on [child], supporting and protecting them'
- Staff 'are good at promoting children rights, child knows how to make a complaint'
- '[child] has access to reading their file'
- 'support given to [child] is huge'.

Capacity and capability

The service had a centre manager who was supported by one deputy centre manager. The centre had a full staff team made up of social care leaders, social care workers, and relief staff. There was stability in the staffing in the service so that children's continuity of care was not disrupted. At the time of the inspection the centre manager was out on leave. The deputy centre manager acted as the alternative centre manager for this period of time. The deputy centre manager was visible and accessible to staff on the ground. A deputy regional manager had responsibility for the operational management of the overall service. There were clear and effective management structures in place where roles and responsibilities and lines of reporting were clear. Staff and managers who spoke with the inspector were clear of their role in the delivery of the service and were committed to providing a safe, nurturing and stable environment to each child.

From document review and interviews it was evident that a culture was instilled in the staff team that promoted positive engagement with social workers and agencies involved in children's lives and staff were all clear about the positive impact that collaborative working had on outcomes for children.

The inspector found that the centre manager had oversight of the management of the centre which included oversight of records and the implementation of children's placement support plans. The inspector found that the centre manager reviewed staff performance, through a range of audits, in order to have a comprehensive understanding of the children's journeys to ensure positive outcomes were achieved. There was a collaborative leadership approach in the service where social care leaders had ownership of undertaking assigned audits. However, it was found from document review and interviews that managers did not always feedback information from audits findings to staff through the different platforms available. This approach did not always create a consistent culture of learning that provided staff with the space to reflect, challenge and identify areas for further improvement.

The manager maintained a complaints register for the service with two complaints having been received in the 12 months prior to the inspection. There were examples of good practice where complaints raised by children were resolved swiftly by the centre manager. The handling of complaints was child friendly with the centre manager meeting with the child in a one-to-one setting to discuss the child's concerns. The concerns of children were listened to and acted upon for example; changes made to children's daily plans and routines, complaint discussed at team meetings. Children were given feedback on the outcome of their complaint

and the decisions made. This practice helped inform and influence service improvements for children.

Managers undertook risk assessments and risk management in the centre to identify and evaluate sources of potential harm and the management of the identified risks. The service had a system in place to notify reportable events in line with Tusla national policy and procedures. The inspector found that the managers approach was open, honest and collaborative however, they lacked the knowledge and oversight of all decisions made related to children's care planning. The inspector found, from document review and speaking with staff, that further work was needed in the safety planning and risk management of cases where children presented with complex needs, to ensure that approaches for addressing risk was consistently applied. For example; lack of identification of risks from online safety and the needs and protective factors to mitigate against such risk, inconsistent approach to the undertaking of risk assessments, risks and needs were not regularly monitored and reviewed.

During the inspection, assurances were sought by the inspector from the deputy centre manager, with the overall responsibility, accountability, and authority for the delivery of the service while the centre manager was absent, on the assessment and management of care needs and risks for children presenting with complex needs. A response was received that evidenced that the appropriate risk assessment had been undertaken that identified the nature of the risk and risk factors. Additionally, evidence was provided that placement support plans were updated to capture all areas of need and an action plan was put in place.

The inspector found that at times there was ineffective leadership in understanding children with complex needs and to develop the staff team to gain the skills and experience that enabled them to actively support each child. For example; lack of training in how to keep children safe online.

The centre had a statement of purpose and function in place that clearly outlined the service it aimed to provide and the age range for children it catered for. The statement of purpose and function was up to date and was due to be reviewed in February 2023. From speaking with staff, the inspector found that they were familiar with the contents of the statement of purpose and were confident that it reflected the model of care provided to children. The inspector found that a child-friendly version of the statement was available to children as part of their induction welcome pack to the centre. Additionally, user-friendly versions of the document were made available to families, foster carers and supervising social workers.

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.

Leadership was not at all times effective at all levels in the residential centre and further improvement was needed in the identification, assessment and management of risk.

Judgment: Substantially Compliant

Standard 5.3

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

There was a detailed statement of purpose and function which described the full extent of the service and facilities provided to children.

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.

The managers and staff undertook assessments and audits as part of the ongoing review of the service to evaluate outcomes for children. Further work was needed to strengthen how the care provided to children was monitored and reviewed.

Judgment: Substantially Compliant

Quality and safety

Admissions into the centre were well planned with the managers and staff working together with the child's social worker to make the transition for the child as comfortable as possible. This included organising visits to the centre with the child and social worker to meet the other children living there, along with staff. This helped to support the child to become familiar with their new surroundings. The option to have overnights at the centre was also made available to children. Managers completed collective risk assessments for all children prior to children residing in the centre. However, it was found that further work was required as the collective risk assessments lacked detail and information about the child, their experiences, their family, their activities and their behaviours to provide the staff with

the identified internal or external risk factors. Additionally, it did not assess the impact and possible risk a child being admitted to the centre would have on the children already living there or the risks presented to the child being admitted into the centre. The deputy centre manager told the inspector that a new collective risk assessment was scheduled to be piloted in the centre.

From document review, the inspector found good practice where staff and managers undertook daily risk assessments and put in place actions to reduce or prevent the risk. These included a whole range of actions dependent on the risk for example; having children's phones charged, having the location of where children were meeting with friends. These daily assessments were regularly monitored and reviewed by the centre manager. The staff team had received adequate training pertinent to their role in areas such as the model of care that underpinned their practice, child protection and safeguarding and the model of behaviour management that was in place. However, the inspector found that further improvement was needed in the area of managing and responding to online safety and mental health needs to support staff in the management and prevention of risk occurring and prepare them to respond should a risk emerge.

The inspector found that staff and managers at the centre possessed a good understanding and knowledge of children's rights and how their rights were promoted in the service. Children were made aware of their rights from the beginning of their admission to the centre, where a welcome pack was provided that included information about what their rights were. From document review and interviews, staff supported children to become aware of and to understand information about their rights and to know how and where to get support to access them. This was done by each child's individual keyworker who would build a relationship with the child and complete key pieces of activities with them either formally or informally. Additionally, staff and managers arranged for a children's advocacy agency to attend the centre to speak with children about their rights when in care and how to contact an advocate to support them to have their say. Children told inspectors that their right to access information about them was promoted by staff and their keyworker. Children said that staff continually promoted awareness through keywork sessions and provided children with the choice to decide. Some children said that they chose to view information about them while other children chose not to. Children told inspectors that they were made aware by staff of the reasons why their personal information was gathered and shared with other professionals.

Each child's privacy was promoted by staff and managers in the service. For example; each child had their own bedroom which the child could go to for privacy. Each bedroom contained an ensuite that afforded children further privacy and the bedrooms contained a safe to store personal possessions. Staff told the inspector

that awareness talks were held with children about the importance of keeping their own information private for example; not taking pictures without consent and posting them online. The service provided space for children to meet privately with their social worker, family or other relevant professionals as the centre was made up of a number of rooms.

The staff and managers promoted different platforms for children to exercise the different rights available to them. For example; children had a say in the way the centre was run such as being involved in deciding the menu, discussing rules and having children's meetings. Children were supported to maintain relationships with their family and friends, as agreed in their care plan, by staff bringing the children to and from contact visits. Additionally, opportunities were provided to children to socialise and pursue their interests such as sports activities, youth groups, beauty appointments and meeting their friends. From document review and interviews it was found that staff offered children information, new experiences and opportunities to develop new skills that increased the choices they could make and support the development of their potential. This included children participating in providing feedback to a national focus group in designing and creating the *'Welcome to Residential Care, Our Guide To Help You, for young people in care, written by young people in care'* and trips to different locations. Staff brought children to and from the launch of the publication as they were part of the process for creating the above document.

Child protection concerns were reported via the Tusla portal, in a timely manner and in line with Children First. The centre manager held a log of child protection concerns, including status and outcomes of referrals. All staff had up-to-date training in *Children First: National Guidance of the Protection and Welfare of Children (2017)*. There was good communication between the social workers and the centre. Records reviewed showed regular phone contact between staff and the children's social workers. Where there were concerns in relation to specific risks, inspectors found the centre managers had held professional meetings with social workers to manage these risks.

As well as having a duty of care to children, staff and managers promoted building trusting and respectful relationships with children through keywork sessions and activities. This work undertaken by the staff at the centre was underpinned by an approved model of care. Staff and managers explained that this model of care supported the staff to promote physical, emotional safety and hope around the ongoing needs of the children. Each child's placement support plan was informed by the model of care and children were allocated a keyworker who completed direct work with them. The inspector reviewed two children's files and found that one child had an up-to-date placement support plan that reflected their care plan. The

placement support plan was of good quality and detailed the expectations and routines of the child, as well as how their needs would be met.

However, the inspector found for one child their placement support plan was not up-to-date and did not identify or address all of their care needs. Where some needs were identified and assessed, the staff and managers worked collectively with other professionals and agencies in sharing knowledge and information in the best interests of the child. Additionally, staff and managers advocated for and supported referral pathways to services for the child. However, when faced with challenges in promoting the rights of and meeting the needs of children presenting with mental health needs, staff and managers did not always respond effectively. For example; signs of distress were not always acted upon in a timely manner and the staff and managers did not always assess the impact cumulative harm may have had on the child's well-being.

The staff were trained in an approved method of managing behaviour. This was reflected in the behaviour support plans that were in place for each child. One out of the two plans reviewed was up-to-date and focused on the child's needs. The behaviour support plan for this child provided staff with the opportunity to work with the child, for example, in how to develop healthy behaviours. However, another child's behaviour support plan did not identify all safety concerns and risks and this could impact on the staff's ability to interact with and to help de-escalate situations. Without an up-to-date behaviour support plan to inform assessments and decision-making, staff may not always be able to make the right decisions, for the child, at the right time.

Inspectors found that there was a recording mechanism in place that monitored, recorded and reviewed the use of restrictive practice in the service. In the 12 months prior to the inspection there were three closed restrictive practices that were recorded. It was found that the three restrictive practices that were put in place were assessed, recorded appropriately and were used for the least amount of time. However, the inspector found one restrictive practice that had recently been put in place that was not identified or recorded appropriately. The restrictive practice limited children's right to play, for example; socialising with friends outside of the service and attending activities that were important to them. The inspector found that there was no assessment undertaken to determine the impact of this restriction on children and the importance of play for a child's development as it organises a child's thinking, feelings and relationships to support learning. Documentation was available that indicated that children were consulted with about the restrictive practice however, the recording process was poor and did not capture the children's voices. Staff said to the inspector that children 'were not happy' at the children's meeting when it was discussed. Children told the inspector that they found the practice to be 'unfair', they were not heard and that there were

contradictions in the decision-making of managers. There was no available evidence that the staff and managers worked meaningfully with the children to take account of their wishes and feelings and to implement a child centred approach to ensure that the restrictive practice was only used as a last resort.

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

Staff and managers had a good knowledge of children's rights and promoted children's rights from the point of a child's admission to the centre. Staff and managers talked to children about their rights and helped children to understand them.

Judgment: Complaint

Standard 1.2

Each child's dignity and privacy is respected and promoted.

The dignity and privacy of each child was respected by staff and managers. Each child had their own bedroom that was respected and provided personal space for their belongings. Through keywork sessions children were informed about who their personal information was shared with and the reasons why. Additionally, children were provided with opportunities to view their case file.

Judgment: Compliant

Standard 2.1

Each child's identified needs informs their placement in the residential centre.

The admission process to the centre was implemented by the staff and managers effectively. Staff and managers worked collaboratively with the social workers that promoted information sharing to promote positive outcomes for children. However, further work was needed in the undertaking of collective risk assessments for all children as the information recorded was limited and provided limited evidence that the needs and rights of the children already living there were considered.

Judgment: Substantially Compliant

Standard 3.1

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

Staff acted appropriately to incidents of child protection concerns in line with Children First. Staff demonstrated knowledge in how to manage child protection concerns and how to report if they occurred. Staff and managers in the centre had undertaken training pertinent to their role that helped them to understand and implement safeguarding policies and procedures. However, further improvements were needed in the area of online safety and children who presented with mental health needs in the prevention, detection and response to these safeguarding concerns.

Judgment: Substantially Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

There was one restrictive practice in place at the time of inspection that restricted a child's right to play. It was found that there was no effective mechanism in place that monitored, recorded and reviewed the use of the restrictive practice. Although children were consulted with as part of the decision-making process further work was needed to make the process more meaningful.

Judgment: Substantially Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
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.	Substantially Compliant
Standard 5.3 The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.	Compliant
Standard 5.4 The registered provider ensures that the residential centre strives to continually improve the safety and quality of the care and support provided to achieve better outcomes for children.	Substantially Compliant
Quality and safety	
Standard 1.1	Compliant

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.	
Standard 1.2 Each child's dignity and privacy is respected and promoted.	Compliant
Standard 2.1 Each child's identified needs informs their placement in the residential centre.	Substantially Compliant
Standard 3.1 Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.	Substantially Compliant
Standard 3.2 Each child experiences care and support that promotes positive behaviour.	Substantially Compliant

Compliance Plan

This Compliance Plan has been completed by the Provider and the Authority has not made any amendments to the returned Compliance Plan.

Compliance Plan ID:	MON_0039058
Provider's response to Inspection Report No:	MON_0039058
Centre Type:	Children's Residential Centre
Service Area:	South East
Date of inspection:	24 th & 25 th January 2023
Date of response:	27 th March 2023

This document sets out the standards where it has been assessed that the provider is not compliant with the National Standards for Children's Residential Centres 2018.

It outlines which standards the provider must take action on to comply. The provider must consider the overall standard when responding and not just the individual non-compliances as outlined in the report.

The provider is required to set out what action they have taken or intend to take to comply with the standard in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that standard, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. It is the provider's responsibility to ensure they implement the actions within the timeframe.

Compliance plan provider’s response:

Capacity and capability	
Standard: 5.2	Judgment: Substantially Compliant
<p>Outline how you are going to come into compliance with 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.</p> <p>The Deputy Regional Manager will complete a training input with the staff team on risk assessment and risk management, drawing particular attention to our national suite of policies and procedures, and the Safeguarding statement. To be completed on 15th March 2023.</p>	
Standard: 5.4	Judgment: Substantially Compliant
<p>Outline how you are going to come into compliance with 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.</p> <p>The Deputy Regional Manager will consolidate a bespoke Service Improvement Plan to combine the current recommendations of internal audits and service reviews. These recommendations will become a standing item on the agenda for team meetings to support a learning culture and inform future practice within the centre. A regional service development review will take place in mid Q2 and Q4 2023. Commenced on 1st March 2023</p>	

Quality and Safety	
Standard: 2.1	Judgment: Substantially Compliant
<p>Outline how you are going to come into compliance with Standard 2.2: Each child's identified needs informs their placement in the residential centre.</p> <p>A new collective risk assessment template and process was introduced to CRS South into the CRS South Referral Pathway in November 2022, which provides a more robust system for evaluating the possible impact of potential admissions to CRS centres. Implemented on 22nd November 2022.</p>	
Standard: 3.1	Judgment: Substantially Compliant
<p>Outline how you are going to come into compliance with Standard 3.1: Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.</p> <p>Risk assessments will be completed for all young people in the centre and for all future new admissions in relation to the use of electronic equipment and online safety. The introduction of a new collective risk assessment at point of entry to the service will also support services in highlighting known risks. Risk assessments will be reviewed more regularly with the social work department in the event of complex case management. To be completed by 7th March 2023.</p>	
Standard: 3.2	Judgment: Substantially Compliant