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:	Dublin North East
Type of inspection:	Announced
Date of inspection:	9 and 10 March 2021
Centre ID:	OSV-0005624
Fieldwork ID	MON-0032079

About the centre

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

The centre is a medium- to long-term Child and Family Agency Children's Residential Centre located in Dublin providing a residential service to separated children between the ages of 12-18 years who are seeking asylum in Ireland.

The centre aims to support each young person who are placed there, to adapt to living in Ireland and to support their integration into the community without prejudice or stigma. The centres philosophy describes that all young people shall be treated equal regardless of their gender, ethnic origin, nationality, colour or religion. The model of care is a participatory rights based model which conceptualises Article 12 of The United Nations Convention on the Rights of the child.

Number of children on the date of inspection:	6

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 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
9 March 2021	09:00 – 17:00	Sabine Buschmann	Inspector
10 March 2021	09:00 – 17:00	Sabine Buschmann	Inspector

What children told us and what inspectors observed

The centre was a safe space for children who were seeking asylum in Ireland. It was well led and managers and staff were sensitive and creative in the ways in which they protected the children's vulnerabilities, and promoted their health and wellbeing. Children were well supported to integrate into their local community.

Children's rights were promoted and supported through good care practices and policies of the centre. The centre took a rights-based approach to care and this approach and a national model of care, was well embedded within the residential centre. Children said that staff listened to them, took their views seriously and supported them in many aspects of their lives in order to settle them into their new home.

Following their admission, children were given a welcome pack. The welcome pack contained written information which was explained to the children by staff through the use of an interpreter. Inspectors reviewed the welcome pack which included information on the guiding principles of children's international rights, the centre's mission statement, house rules, complaints procedures and other key information relevant to the child and their care. Following on from the previous inspection in 2018, the welcome pack had been translated into five of the most relevant languages spoken by children seeking asylum in Ireland.

There were six children living at the centre at the time of the inspection and all engaged in the inspection process through a video link. The children appeared to be in good spirits, smiling and laughing during the conversation. Inspectors observed that staff had warm and respectful relationships with the children when staff were setting up the video call. Children appeared to relate to staff in a positive manner and were relaxed in their company.

The staff team was proactive and innovative in how they provided care to the children and they ensured they could pursue hobbies and activities they enjoyed. Children spoke very positively about the centre and the care they received and below are some of their comments:

"Staff are great, they help me with my homework."
"Staff cook lovely dinners for us but we are much better cooks, hahaha."
"We have our own bedroom and we were able to decorate them ourselves."
"Staff explain things to us that we don't understand and at the beginning we had an interpreter to help."
"Staff take us to a special shop to buy food that we can't buy in a supermarket."

Children said that they were offered a wide range of activities and that staff members would provide transport to get to those activities. They said that due to the recent COVID-19 restrictions in December 2020, activities had been more home-based again. However, they said that they still enjoyed these activities which included artwork, sewing, knitting, using the home gym, and playing video games. The children showed the inspector some of the artwork and paintings they had created and talked about how much they enjoyed doing artwork in the centre.

Children said that they were able to make suggestions about day-to-day life in the centre, and they felt their views and wishes were listened to. They told the inspector that they were aware of their rights, how to make a complaint and that they had been provided with information about a national independent advocacy service for children in care. Children told the inspector that they had their own bedrooms and the house had enough communal space for them to spend time together or be on their own if they wished. Children said they were able to decorate their own rooms in a way that reflected their cultural heritage. Furthermore, the staff team was skilled and sensitive in responding to the children's needs. For example, periods of fasting at the children's request in line with their cultural beliefs were supported. A prayer room was created which was designed and decorated by the children. Staff provided children with specific specialty ingredients and meals from their country of origin.

Children spoke about things that were difficult about being in care. Some factors negatively affecting the quality of life for separated children, and they explained that they had little or no contact with their immediate family, and wider support networks by virtue of their pathway into care. Children also expressed concerns about experiencing delays in confirming their immigration status and the impact of this delay on their health and wellbeing.

The children expressed concerns for their future and their uncertainty as to where they would live when they reached 18 years. At the time of the inspection, this was an imminent reality for some of them. While children said that they were happy living in the centre and were well cared for and supported, they also said that they did not have any hope and dreams at the moment, and that this was an anxious time in their lives. This meant that children found it difficult to focus on planning for their future and moving into young adulthood in a new country.

Children identified aspects of centre life that they would like to see improved, such as improved internet access, which was important for them to engage successfully in online education programmes and participating in virtual meetings, when opportunities to attend face-to-face meetings were limited due to COVID-19 restrictions. Poor internet access had been escalated to Tusla’s National Office in July 2020 and remained unresolved at the time of the inspection.

Social workers spoke highly of the staff team and they were satisfied that the centre provided a good quality service to the children living there. They said that the staff team was committed to children and were good advocates for them. They were of the view that the model of care in place was child centred and empowering. Social workers were aware of the children's anxieties and the impact of their current situation as separated children, and the lack of certainty about their lives. They advocated for the children and supported them through the asylum seeking process.

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 well-defined management structure which clearly outlined lines of authority and accountability. The centre manager was experienced and competent and was supported by an equally experienced and capable deputy manager and four social care leaders. Roles and responsibilities were delegated by the centre manager to the deputy centre manager. The centre manager reported to a deputy regional manager, who had overall responsibility for the quality and effectiveness of services provided, and who in turn reported to the regional manager for children's residential services. This inspection found that there was an effective system in place to ensure both managers and staff received regular supervision and support. The frequency of supervision in the centre had improved since the previous inspection, but remained outside national timeframes.

Staff and managers were clear about their roles and responsibilities and the management team provided strong leadership and support to the staff team. Staff who spoke to the inspector said that they felt supported by the management team through both formal and informal supervision and supports. The deputy regional manager maintained good oversight of the centre. She provided regular supervision to the centre manager. She received frequent updates on the activities of the centre, including significant event notifications and the monthly reports on the operations of the centre.

There was a statement of purpose and function in place that had been reviewed and updated regularly. The statement accurately described the ethos and philosophy of the centre, the model of care and the policies and procedures that informed daily care practice in the centre. A child-friendly version of the statement of purpose and function was included in the information pack provided to children. However, the statement of purpose and function did not clearly outline the full organisational structure or the management and staff resources for the centre. It did not clearly set out the services which the centre relied upon, in order to meet the needs of the children. For example, the education training programme and interpreter services. The inspector was assured

by the regional manager, that the statement of purpose and function of centres within the Dublin North East Region were being revised and updated by 31 of May 2021. Managers and staff had a good knowledge of relevant legislation, regulations and national standards. Previous HIQA inspections had found that many of the policies and procedures that underpinned the operation of the centre had not been updated since 2010. On this inspection, the inspector found that significant progress had been made in this regard. A full suite of up-to-date national policies for children's residential centres was currently being rolled out, along with a programme of training, delivered through team meetings and e-learning. There were also online quizzes to help staff assess their understanding of the new policies. There was a good implementation plan in place and policies were discussed at team meetings.

The safety and quality of the care provided by the centre was continually assessed, to ensure the best possible outcomes for children. There were various management systems in place within the centre to ensure oversight and accountability. Managers read and signed off on children's daily logs, care records and on significant event notifications. The centre also took a systematic approach to auditing practice which was tracked on an electronic spreadsheet. There was a schedule of audits in place to ensure that the centre's compliance with national standards was assessed. Managers carried out audits on file content and the quality of care records that were maintained on children. Additional audits were completed in relation to a wide range of areas including health and safety, fire safety, supervision of staff, risk management, key working records and medication management. When deficits were identified, action plans were developed to address the issues and these were communicated to the staff team for action. Staff who spoke to the inspector had good knowledge of the audit process and found it helpful and informative with regard to practice improvements. As a result, the centre was taking effective steps towards continuously raising the quality and safety of care.

There were other mechanisms in place to ensure good quality care was provided to children. Staff were trained in safeguarding children and managing allegations and serious concerns. Adverse events were recorded, acted on and monitored, and there was evidence that they were discussed in staff meetings to enable learning. Children's meeting minutes and any issues raised were a standing item on the staff meeting agenda to capture the views and concerns of children and to respond to them.

Communication was effective and was conducted through regular management meetings, weekly staff meetings, regular staff supervision and formal daily handover to the staff coming on duty. Other systems of information exchange included a communications book, daily logs, children's meetings, as well as informal daily interaction between staff and managers. Inspectors found that staff had good knowledge of the children's overall care and welfare needs.

There were effective systems in place to manage risk in the centre. The centre manager maintained a risk register that was reviewed regularly. Risks were described and appropriate control measures were in place to mitigate these risks. Risk assessments were completed, including risks to children. By way of an example, risks associated with the impact of COVID-19 and controls to manage these risks were in place. There were clear procedures in place to escalate risks, if necessary. A collective risk assessment was completed for each child prior to admission in conjunction with the child's social worker to mitigate the impact of the mix of children already living at the centre. Risks in relation to children were recorded on individual risk assessments as required. Staff who spoke to the inspector were aware of the Tusla risk management framework and the inspector found that discussion of the risk register was a standing item on the team meeting agenda.

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

Safe and effective recruitment and workforce planning was in place to respond to the needs of the young people in the centre but some recording systems needed to improve. There were sufficient numbers of competent, experienced staff working in the centre. The centre was fully staffed and there were no vacancies. The team consisted of a centre manager, a deputy centre manager, four social care leaders and eight full-time equivalent social care workers. The centre did not use agency staff but there was a provision in place should this become a requirement. There was an informal system in place to provide on-call support to staff outside of normal working hours. This system was operated by the centre manager and deputy centre manager.

This inspection included a review of a sample of staff files held centrally by Tusla and found that although An Garda Síochána (police vetting) was in place, the relevant documentation was not transferred and held centrally. The inspector was assured by the regional manager that this would be rectified.

The centre had an up-to-date health and safety statement in place. The health and safety statement was centre-specific and identified relevant staff and their roles in relation to health and safety. The centre had relevant protocols and procedures for infection prevention and control, including the management of COVID-19 related issues, and there was good access to personal protective equipment if required. A COVID-19 folder was maintained and updated regularly by managers to ensure that staff had access to the most up-to-date guidance and associated training.

All staff had received mandatory training in areas such as child protection (Children First), fire safety and medication management. A training log was maintained in the centre which inspectors reviewed. Staff and managers told the inspector that training was currently undertaken on e-learning as required.

Standard 5.1
The registered provider ensures that the residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect and promote the welfare of each child.
Regulation 5: Care practices and operational policies

The recent introduction of a comprehensive suite of up-to-date policies and procedures had enhanced organisational capacity. The centre was operated in compliance with relevant regulatory requirements and national standards. Staff were aware of their obligations under Children First and had all received mandatory training.

Judgment: Compliant

Standard 5.2
The registered provider ensures that the residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability to deliver child-centred, safe and effective care and support.

The centre was well managed and the governance arrangements in place ensured that the service provided to children was safe and of good quality.

Judgment: Compliant

Standard 5.3
The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.

The statement accurately described the ethos and philosophy of the centre, the model of care and the policies and procedures that informed the daily care practice in the centre. The statement of purpose and function did not outline the full organisational structure or the management and staff employed in the centre.

Judgment: Substantially 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.

There were mechanisms in place to monitor, improve and evaluate the quality of care and safety provided to the children in the centre. Managers read and signed off on children's daily logs, on significant event notifications 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 deputy regional manager had good oversight of the centre.

Judgment: Compliant

Standard 6.1
The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.
Regulation 6: Staffing

The centre was fully resourced with a competent committed staff team. There was a stable staff team in place which ensured continuity of care to children.

Judgment: Compliant

Standard 6.2
The registered provider recruits people with the required competencies to manage and deliver child-centred, safe and effective care and support.

Two members of the staff team had Garda vetting but records had not yet been transferred to the Tusla's centralised record office.

Judgment: Substantially Compliant

Quality and safety

Children had a good quality of life in the centre and while there were challenges due to COVID-19 restrictions, the staff team engaged them in home-based activities and supported them to attend online education. The centre had implemented a model of care that took a rights-based approach and was supported by the framework of a national model of care. This approach ensured that the rights of children requiring child welfare services were promoted and supported in practice, and embedded in the culture of the centre. As a result, participation by children in decisions about their care was good, and their wishes, feelings and experiences of their individual pathway to care and placement in the centre, was well documented, heard and acted upon.

There were systems in place to ensure that children's rights were promoted in everyday practice and this approach was embedded in the culture of the centre. Access to and information about the centre was provided to the children and there was good use of interpreters to ensure communication levels were good. The impact of this was that the children were aware of their rights, were confident in the

complaints and care processes, and knew what the expectations of them in the centre were.

Cultural diversity was promoted and celebrated in the centre. For example, the staff team provided children with specific specialty ingredients and meals from their country of origin. Children were consulted about meal plans and they participated in cooking and shopping. Periods of fasting at the children's request in line with their cultural beliefs were supported. A prayer room had been created in the house to enable children to practice their religion at home in a safe and appropriately decorated space. Staff and children told the inspector that children were involved with a multicultural soccer team, an athletics club, and were also attending the church of their choice. They had built relationships with their new religious communities.

The staff team encouraged and facilitated children's social integration within the local community and provided them with the opportunity to take part in a wide range of activities, including Irish and European customs and cultural events, like celebrating St Patrick’s day for example. Children who spoke to the inspector said that they enjoyed these new experiences.

Staff were being creative in the ways in which they communicated with children in light of the language barriers. Staff members told inspectors that they had access to an interpreter when required, for example, when children were arriving in the centre or attending their child-in-care review. Staff said they also used pictures and images to explain tasks or items. The inspector found that children they spoke with had a good understanding of the English language and were able to articulate their thoughts and experiences well.

The centre had a system in place to manage complaints in line with Tusla policy. Children were listened to, and their rights were explained to them appropriately at children’s meetings and in one-to-one sessions with keyworkers. Children who spoke to the inspector were aware of how to make a complaint and had exercised this right. For example, children had made a formal complaint about the unstable internet connection in the centre. This issue was reviewed by the centre manager, the deputy regional manager and the regional manager. The issue was escalated to the national office as it could not be solved locally, but remains unresolved.

In conclusion, a competent and committed staff team provided high-quality child-centred care to the children. Children were consulted on the day-to-day operation of the centre including decorating the centre, daily activities, food choices and meal planning. The centre promoted children’s rights and ensured they were consulted in relation to the decisions made about their life.

Standard 1.1
Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child.
Regulation 10: Religion
Regulation 4: Welfare of child

Inspectors found that the children living in the centre received care and support which respected their diversity and promoted their rights. This person-centred care and support enhanced their quality of life.

Judgment: Compliant

Standard 1.4
Each child has access to information, provided in an accessible format that takes account of their communication needs.

Information was shared in an effective and child-centred manner. Children had access to information relevant to their care, needs and interests.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
Standard 5.1 The registered provider ensures that the residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect and promote the welfare of each child.	Compliant
Standard 5.2 The registered provider ensures that the residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability to deliver child-centred, safe and effective care and support.	Compliant
Standard 5.3 The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.	Substantially 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.	Compliant
Standard 6.1 The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.	Compliant
Standard 6.2 The registered provider recruits people with the required competencies to manage and deliver child-centred, safe and effective care and support.	Substantially Compliant
Quality and safety	
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.	Compliant
Standard 1.4 Each child has access to information, provided in an accessible format that takes account of their communication needs	Compliant