



**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:	West North West
Type of inspection:	Unannounced
Date of inspection:	17 – 18 January 2024
Centre ID:	OSV- 0004200
Fieldwork ID	MON-0042532

About the centre

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

The centre is a Child and Family Agency residential respite service located in the West of the country. The centre provides a respite and support service for children between the ages of 5 and 17 years who are living at home or in foster care, that have been identified as requiring additional supports to maintain their placement in their family environment. The centre could offer respite and day/outreach support for up to 30 children, with capacity for up to four children to stay overnight.

The goal of the respite service is to keep families together by providing a comprehensive support structure to sustain the child's living arrangements. The centre staff worked closely with children and their families to assist children to meet their full potential and enhance their coping mechanisms. The centre aimed to support the holistic development of the child in a homely, stable and secure environment showing compassion and respect for the child.

The following information outlines some additional data of this centre.

Number of children on the date of inspection	6
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How we inspect

To prepare for this inspection the inspector or inspectors reviewed all information about this centre. This included any previous inspection findings and information received since the last inspection.

As part of our inspection, where possible, we:

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

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

1. Capacity and capability of the service

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

2. Quality and safety of the service

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

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

This inspection was carried out during the following times:

Date	Times of inspection	Inspector	Role
17 January 2024	13:30 to 20:30 hrs	Sabine Buschmann	Inspector
18 January 2024	09:00 to 15:00 hrs	Sabine Buschmann	Inspector

What children told us and what inspectors observed

Children were provided with good quality care when they spent time at the centre. Children who spoke to the inspector were positive about the care they received during their respite stays. From a review of files the inspector found that children were listened to and activities provided in the centre were based on children's interests, fostering existing hobbies as well as providing children with new experiences. The staff team was proactive and innovative in providing care to the children and ensured they could pursue hobbies and activities they enjoyed. At the time of the inspection there were six children attending the centre for respite over the two day inspection period.

The centre was a large detached bungalow located on a spacious site on the outskirts of a town. The centre consisted of four bedrooms with a large front and rear garden. The centre was clean, warm, and homely. The inspector noted that the centre had been beautifully decorated with close attention to detail, which contributed to a relaxed and comfortable atmosphere. Children attending for respite rotated bedrooms and children's belongings were stored safely in a store room in between their stays at the centre. Children told the inspector they enjoyed being in the centre because "it is a home away from home" that is very comfortable and a place where they can relax.

The Inspector met with five children who were accessing the centre for respite care, spoke to a sixth child on the phone and reviewed a completed questionnaire by a seventh child. Children told the inspector that they liked coming to the centre and that they found the staff to be lovely, supportive, and easy to talk to. Children spoke about how much they enjoyed the activities offered which included, a range of outdoor activities, including fishing, go-carting, basketball, going on boat trips and going to the cinema. In-house activities children enjoyed included cooking, baking, playing musical instruments, writing songs, playing with the kittens in the backyard, playing the x-box and watching television.

Children said the centre is : "Excellent, homely, welcoming and comfortable"
"They (the staff) are great, they are lovely and help you get through bad times."
"They (staff) take me to cool places and make good food."

Children told the inspector that they were consulted on all the activities that were on offer in the centre and their likes and dislikes were discussed with their respective keyworkers, prior to attending the centre for respite. The inspector observed that staff had respectful relationships with the children and interacted with them in a nurturing and positive manner. The inspector observed that children related to staff in a positive way and that they appeared to feel relaxed in the company of staff members.

The inspector spoke with two foster carers and three social workers. Social workers said that the staff team at the centre were committed and genuinely cared for the children and make each child feel special. They said that they had good and regular communication with the centre staff and that they were informed immediately of relevant incidents and received updates when required. Social workers also stated that the children loved attending the centre for respite. They said they had observed changes in the children's behaviours, as a result of their respite placements, and this had contributed to maintaining children in their homes. They said that the centre was instrumental in preventing long term foster care placement break downs and that the staff team was innovative, child centred and providing a quality service to children.

Foster carers were very happy with the service and felt supported in their care of the child. One foster carer said that the centre was "the most amazing place" and had transformed their lives. Foster carers described a high standard of care where every child was treated as an individual, and their care was based on each child's particular needs. Foster carers described the staff as "amazing" and genuine, who truly care for the children and are approachable and could not speak more highly of them.

Capacity and capability

The centre was well run and adequately resourced. The governance arrangements in place ensured that the service provided to children was safe and of good quality. The centre management and staff team demonstrated a high level of commitment to the care of the children and the focus on each young person as an individual with their own needs. This was evident through the inspector's interactions with staff, children and was reflected in children's case records. There is a management structure in place which clearly defined lines of authority and accountability to deliver child-centred, safe and effective care and support.

The centre manager is qualified and experienced and is supported by an equally experienced deputy manager and six social care leaders. The centre manager reported to the alternative care manager, who had overall responsibility for the quality and effectiveness of services provided. They provided regular supervision to the centre manager, visited the centre, met the children and attended staff meetings on several occasions. Staff and managers were clear about their roles and responsibilities and the management team provided strong leadership and support to the staff team.

A new national suite of policies and procedures for children's residential centres was implemented in the centre in 2021. From a review of team meeting minutes,

the inspector found that policies were discussed, reviewed and were a standing item on the team meeting agenda. Staff who spoke to the inspector were familiar with the centres national policies, the National Standards for Children’s Residential Centres and how to implement the policies into their daily care practice. The inspector found that quality improvement of the service was part of the ethos of the centre and was embedded in daily care practice. For example, during the inspection, staff members provided insights into recent changes made to the medication policy. They explained how these changes were thoroughly discussed in team meetings and overseen by management through regular audits, by ensuring that medication charts were completed appropriately as required by policy, and the results of the audits were fed back to the team for learning.

There were effective mechanisms in place to monitor and evaluate the quality, safety and continuity of care provided to the children. The centre had external line management systems in place for auditing and monitoring the centre’s compliance with national standards. The provider had a systematic approach to auditing practice as part of its commitment to quality improvement, which was tracked on an electronic spreadsheet. Managers read and signed off on children’s daily logs, key working reports and all other care records generated by staff. They carried out audits on file content and the quality of care records. The managers used an audit tool to record audits and the improvements which were required, and dated and signed off on actions when they had been implemented. The audits included fire safety, risk register, significant event log, key working documents and supervision and staff training, complaints, risk assessments and meeting minutes. This meant that children benefited from routine and thorough reviews of practice in the centre, including regular reviews of their care planning and of their daily and weekly routines.

The centre had a statement of purpose and function which had been reviewed in November 2023. This was a comprehensive document which accurately described the full organisational structure, the internal management structure of the centre, the ethos and philosophy of the centre, the model of care, the management and staff employed in the centre and the policies and procedures that informed the daily care practice in the centre. A child friendly version of the statement of purpose and function was displayed in the centre and a copy was given to children and families availing of the services.

There were effective systems in place to manage risks in the centre. The centre maintained a risk register that was reviewed regularly and when risks occurred. Risks were described and appropriate control measures were in place to mitigate these risks. Risks assessments completed included general risks to children, for example self-harming, managing behaviours that challenged or risks associated

with internet safety. Collective risk assessments were completed prior to the admission of a child for respite to ensure the right mix of children.

Other collective risk assessments included group activities such as going on a boat ride. From a review of files the inspector found that individual and collective risk assessments were detailed and of good quality and gave consideration to children's individual needs, vulnerabilities and in case of a new admission, how these would impact on the children living in the centre. There were clear procedures in place to escalate risk if necessary. Centre managers were the designated persons to be contacted in an emergency.

Significant events were responded to appropriately. There were appropriate systems in place for the notification of accidents and incidents, and significant events notifications (SENs). Records of these events were well maintained and significant events were reported to social workers, the monitoring officer, guardians' ad litem and parents/guardian. From a review of the center's SEN log the inspector found that incidents for the centre were very low, but when they occurred they were notified in a timely manner. Social workers who spoke to the inspector said that they were notified of all significant events in an appropriate and timely manner.

The centre maintained a comprehensive database that documented all staff training, including both mandatory and additional training. In preparation for the year 2024, the centre had completed a training needs analysis, which served as the foundation for a new training plan. During the inspection, the inspector examined a tracker that detailed staff training attendance, showing that every staff member had participated in mandatory training. The mandatory training covered areas, including *Children First: National Guidance for the Protection and Welfare of Children (2017)*, medication management, fire safety, ligature training, and First Aid.

The centre management ensured that there were service level agreements and contracts in place for the provision of services, such as building maintenance systems, fire alarms and closed circuit television (CCTV).

The inspector found there was an effective workforce in the centre. The centre had a full staff team of 16 staff, comprising of two managers, six social care leaders, six social care workers and two relief social care staff. In addition, the centre employed two qualified social care agency staff to cover unexpected absences. The centre manager told the inspector that the centre had a relatively small number of staff turnover, and that her team was presently operating at maximum staffing capacity.

One social care worker position currently vacant, that was in the process of being filled. Vacancies and leave were filled through the two relief social care workers and the two agency staff that were on the roster on a regular basis and well known to the children attending the centre.

There was good evidence that the management team as part of their annual workforce planning took into account annual leave, other leave and contingency cover for emergencies. The management team told the inspector that workforce requirements have remained stable and that the management team has been able to ensure there are sufficient numbers of staff with the necessary experience and competencies to meet the needs of the children living in the centre at all times. The inspector reviewed a sample of the staff rosters which showed that there were at a minimum three staff on duty during the day and two staff during live nights. The inspector found, there was a good mix of staff on duty each day with the necessary experience and competencies to meet the children's needs.

The inspector found there were appropriate arrangements in place to promote staff retention and continuity of care, which ensured children experienced stability. Staff received regular supervision that included aspects of exploring staff well-being and how they could be supported. Staff had access to training and professional development and staff who spoke to the inspector said, that they felt supported through team meetings and that managers were accessible, both informally and formally through staff supervision. In addition, staff have access to a national independent employee assistance programme that is available to all employees of the provider. The service provides a range of staff supports that are free and confidential, including counselling, staff wellbeing workshops, and a suite of Critical Incident Stress Management (CISM) services. It also serves as a consultancy to managers on staff wellbeing issues. In addition, there was a protected disclosure policy in place and staff were aware of this policy. The centre had a formal on-call system to ensure that staff had access to a manager at a time of crisis outside of normal office hours. The on-call system operated on a monthly rotational basis shared between the two managers of the centre.

The inspector found that supervision of social care workers and social care leaders was carried out in line with policy. Four of the five supervision records reviewed were of good quality, with detailed discussion on staff support, key working, practice and duties delegated to the staff member. Regular supervision enabled the staff team to effectively exercise their professional judgment and work together to provide a child-centred, safe and effective service. However, the inspector found that that the centre does not operate a formal performance appraisal on an annual basis for each member of staff as required by National Standards for Children's Residential Care and Tusla national policy.

There was good evidence that the centre had implemented a team-based approach to working that was promoted through regular team meetings, reflective learning and effective communication in relation to supporting and caring for each child in a consistent manner. From a review of care records and team meeting minutes the inspector found that communication was effective and was conducted through monthly management meetings, fortnightly team meetings, regular staff supervision and formal daily handovers to the staff coming on duty. In addition good communication was evident in the daily shift handover book, as well as in informal daily interaction between staff and managers.

From a review of staff meeting minutes, reflective practice was evident as the staff team and management reviewed the policies, incidents, and daily routines of children during team meetings. This involved a detailed examination of not just the events themselves but a critical analysis of the reasons behind them. The emphasis was on exploring innovative and alternative approaches to respond effectively to the situations and incidents that were subject to review.

Nevertheless, there is a need for improvement in team meeting attendance. The meetings, conducted bi-weekly, experienced low participation, with eight to 10 staff members consistently absent from a total team of 16 full-time members. According to the centre manager, the low attendance was attributed to two staff members completing night shifts and others being on leave. Despite this, the inspector noted a detailed review of children's care occurring in each team meeting. From a review of meeting minutes, it was apparent that agreed-upon actions from previous meetings were followed up and reviewed in subsequent meetings. Furthermore, evidence suggested that absent staff members read through the meeting minutes and signed them following their review.

There are procedures in place to protect staff and minimise the risk to their safety. There was a health and safety statement that been reviewed in 2023. The centre had a health and safety officer who completed monthly health and safety checks throughout the centre. Staff told the inspector that the management of the centre has an open door policy and that staff can raise issues of concerns and safety at any time.

There were effective arrangements in place for information governance and records management to deliver child-centred, safe and effective care and support. Children's files were of very good quality in that they were organised and accessible. The inspector noted from file reviews that records were factual and accurate and direct work with children was well recorded. These records showed that practice in this regard was child-centred. The privacy of each child's personal information was protected and respected. The inspector found that all personal information was treated as confidential and was held in line with legislative, regulatory and best practice requirements.

Children's files were securely stored and appropriate arrangements were in place for archiving of records. Staff who spoke with the inspector had good knowledge of information governance and records management and were clear about the arrangements in place for sharing and transferring information in an efficient and timely manner to support effective decision-making.

Children who spoke with the inspector were aware that they could access their records and there was evidence that they had written up and signed their own daily log books to exercise this right.

The residential centre holds a register as required by legislations which details the relevant information in respect of each child living in the centre.

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.

There was a management structure in place with clearly defined lines of authority and accountability. Centre managers were experienced and provided effective leadership and support to the staff team. Staff and managers were clear about their roles and responsibilities. The management and governance arrangements in the centre ensured that the care and support delivered to children was child-centred and effective. Effective risk management systems were in place and where risks had been identified there were effective risk assessment and management plans which were reviewed regularly.

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 inspector found there was an effective workforce in the centre. The centre had a full staff team comprising of two managers, six social care leaders, six social care workers and two relief social care staff. In addition, the centre employed two qualified social care agency staff to cover unexpected absences and were well known to the children attending the centre for respite.

Judgment: Compliant

Standard 6.3

The registered provider ensures that the residential centre support and supervise their workforce in delivering child-centred, safe and effective care and support.

This inspection found that the provider supported and supervised their workforce in delivering child-centred, safe and effective care. Sufficient Staffing resources in the centre ensured that children received a quality service from a consistent staff team. However, improvement was required to ensure that each individual staff member's performance was formally appraised in line with requirements of national standards.

Judgment: Substantially Compliant

Standard 8.2

Effective arrangements are in place for information governance and records management to deliver child-centred, safe and effective care and support.

Regulation 21: Maintenance of Register

Children's files were of very good quality in that they were organised and accessible. The privacy of each child's personal information was protected and respected. Children's files were securely stored and appropriate arrangements were in place for archiving of records.

Judgment: Compliant

Quality and safety

The care provided to children in the centre was of good quality and tailored to meet the individual needs of the children. The inspector found that staff were skilled and innovative in responding to the children's needs. Children's rights were being promoted and respected by the provider, and the inspector found that children were being treated with dignity and respect.

The centre was last inspected in February 2022. At that time seven standards inspected were found to be compliant and one standard was substantially compliant. This inspection found that the centre had maintained a well-managed children's residential respite centre, providing good therapeutic quality of care to children.

There were systems in place to ensure that children's rights were promoted and respected in the centre. From a review of care files and centre documents, the inspector found that the rights of children were reflected in all centre policies and

care practices. Children were given the opportunity of visiting the centre prior to admission and to meet managers and staff. They said that they had received an induction pack when they first visited the centre and were consulted by their social worker about attending the centre on a respite basis. Children told the inspector that they were aware of their rights and that they had received information about a national independent advocacy service for children and knew about the United Nations (UN) Convention on the Rights of the Child. The inspector observed that information on children's rights was openly displayed for children to access.

The right of children to privacy, dignity and respect was valued in the centre. Children had their own bedrooms and the house had enough communal space for children to spend time together or be on their own if they wished. The inspector observed staff knocking on their bedroom door and waiting for permission before entering. From a review of children's house meeting minutes, the inspector found that the staff team encouraged the children frequently to respect each other's space and privacy by not going into each other's rooms.

Furthermore, the centre promoted children's rights by ensuring that children were regularly consulted on all aspects of their care while residing in the centre. Children told the inspector they were consulted about food preferences and individual interest. Centre managers and staff told the inspector that children's participation in their care planning during their respite stay was paramount to enable children to participate in decision making about their care. Children's rights were promoted and respected through the key working process.

Children were involved in decision making in the centre by participating in children's meeting. The inspector reviewed minutes of these meetings and found that the children raised issues that were important to them, such as access to the internet, mobile phone use and what activities they were interested in. Meetings were held fortnightly to ensure that children had an on-going opportunity to raise issues that affected their day to day life in the centre. Minutes of meetings were recorded on a child friendly template, which enabled children to participate in the running of the centre as a group. Children shared the task of minute taking and chairing meetings to learn new skills. The minutes of the children's meetings were presented to the staff team meeting for discussion and feedback was provided to the children.

Children were facilitated and supported to maintain appropriate contact with their families and significant others during their respite stay. Foster carers who spoke to the inspector described good consistent communication with the staff team and that the centre encouraged contact through phone calls and emails.

The provider had a system in place to manage complaints in line with Tusla policy. The centre manager was the designated complaints manager for the centre and maintained a central register of complaints. Children told the inspector that they were aware of how to make a complaint but that they had no reasons to complain about the centre and felt comfortable talking to staff when they wished to raise issues.

Each child in the centre had an allocated social worker. The inspector reviewed five children's files and found that staff were in regular contact with children's social workers to provide information and to follow up on issues that may have arisen during the week. Social workers who spoke to the inspector said that the centre kept them informed of the progress of children and described good communication with both staff and managers.

Admissions and discharges were well managed in line with policy to ensure respite placements were suitable and safe. The inspector reviewed the admission procedures and found the centre had followed the policy for admission of children to residential centres. There was a regional referral committee who met to discuss new referrals, and a collective risk assessment was completed to consider how a new admission may impact on other children attending the centre for respite and considering the mix of children. Comprehensive referral forms and supporting documentation were required from each child's social worker.

The inspector sampled three children's files in respect of admissions and found that the information provided to the centre about the children was of good quality and informed decisions about admissions. Children told the inspector that they were involved in the decision to attend the centre for respite. The admission process incorporated an induction period, during which children, their families, and social workers had the opportunity to visit the centre. They received an information pack that included a child-friendly booklet providing details about the centre. Following this, the child visited the house, shared a meal to meet staff and other residents, followed by an overnight stay, and was then formally admitted to the centre thereafter. Children who spoke to the inspector said that this was a good way to be introduced to the centre and helped them to be less nervous about attending the centre for respite.

This inspection found, that the centre was child centred and homely, and provided an environment that promotes the safety and wellbeing of each child. The inspector found that both indoor and outdoor areas were very tidy and well maintained. The centre has a large garden which has a children's play area, table tennis, a basketball area, a play house, goal posts, a seating area, a gazebo, a garden shed and a greenhouse.

The centre itself comprised of four large bedrooms, a library, a sensory room, a beauty room, two full bathrooms with two additional toilets, three storage rooms, a laundry, three staff offices, a spacious kitchen-dining room, two large sitting rooms and a games room. In addition the house has a large visitor's area, which consists of a large sitting room, a fully equipped kitchen and a bathroom. When the visitor space was not used by visitors, the area doubles as additional space that can be used by children for activities. Children who spoke to the inspector said that they loved the house and garden and enjoyed the many spaces that can be used for activities.

The centre was well maintained. The centre manager kept a maintenance log and this contained details of maintenance issues that had been reported, the dates of these and the dates when the repairs had been completed. The inspector found that the service used private contractors for repairs and that all maintenance issues were dealt with promptly.

There was a health and safety statement that been reviewed in 2023. The centre had a health and safety officer who completed monthly health and safety checks throughout the centre. In addition the alternative care manager completed a twice yearly health and safety audit to ensure the centre was compliant with policy. Health and safety meetings were held quarterly and from a review of minutes, all aspects of health and safety, including fire drills, administration of medication, slips, trips and falls as well as occupational risks such as staff self-care, were discussed.

There were fire safety precautions in place against the risk of fire, however improvements were required in the accurate recording of fire drills. Firefighting equipment such as fire extinguishers had been serviced in March 2023 and all staff had been trained in fire safety. There was a fire alarm and emergency lighting and these were checked weekly and serviced each quarter. There were doors with self-closers attached throughout the premises that were checked weekly.

All staff and children who spoke to the inspector said that they had participated in fire drills and attendance was recorded on the children's care record. There was appropriate signage to indicate fire exits and the assembly point for the safe evacuation of children and staff in the event of fire. However, the recording of fire drills required improvement. There had been 11 fire drills in the 12 months prior to the inspection and there were records of fire drills which included the names of the staff and children who had participated in the drill. The documented durations of all fire drills however, were recorded as taking between the 15 to 30 minute range. Staff and managers clarified to the inspector that the recorded times in the fire log encompassed activities such as explaining fire precautions, guiding children to fire exits, and conducting assembly. However, these times did not precisely

represent the actual duration of evacuating the premises when the fire alarm was activated. To address this, they assured the inspector that immediate corrective measures would be taken to accurately record the evacuation times during future fire drills.

The inspector checked one of the two centre vehicles and found it was taxed, insured and had National Car Test (NCT) certification, where appropriate. The vehicles were in good condition and carried first aid kits and safety equipment as required. The second vehicle was in the garage at the time of inspection.

The centre had closed-circuit television (CCTV) in use at the front entrance, exterior and garden. There was appropriate signage visible in relation to the use of CCTV.

The centre had effective measures in place to promote the safety of children. Staff responded appropriately to child protection concerns by referring them to the relevant social work department. Staff and managers who spoke to the inspector had good knowledge of their obligations under *Children First, National Guidance for the Protection and Welfare of Children (2017)*. The centre had a safeguarding statement and a range of protective measures, which included collective and individual risk assessments to any new risks that emerged. The inspector reviewed the child protection register and found there were two open child protection concerns that had been reported to Tusla through the portal in line with Children First (2017). Children's social workers and parents/ guardians were appropriately informed by the centre of any allegations or serious incidents. Staff members who spoke with the inspector were aware of their obligation under Children First (2017) legislation. A review of children's records and children's meeting minutes showed that staff spoke to children about how to keep safe, topics included substance misuse, internet safety, sexual health, self-care and bullying.

There was a positive approach to the management of behaviour that challenged. All staff had undergone Tusla-approved training in behaviour management. The inspector review of care records showed, that children had individual placement support plans, providing guidance for the safe management of their behaviour. These plans encompassed absence management, individual crisis management, and behaviour management. The centre implemented a comprehensive model of care that was holistic, trauma-informed, attachment-based, and outcome-focused. This model was seamlessly integrated into daily care practices, customised to meet the unique needs of each child. Both managers and staff told the inspector that the care model promoted positive self-worth, self-esteem, and emphasised building on existing strengths and interests. Specialist therapeutic advice and support were readily available to staff, informing their interventions with children seeking respite at the centre. Individual sessions with key workers helped children

understand their behaviour, and tailored responses were developed in alignment with their identified needs in the placement plan. In addition staff role modelled positive behaviours and respectful interactions and used all interactions with children as a learning opportunity without being obtrusive.

The inspector found that the health and wellbeing of children was promoted in the centre. The inspector observed that healthy food was available to children. Children told the inspector that they sometimes cooked for themselves and that they had provided staff with a list of foods they all enjoyed. The inspector observed that staff offered a variety of healthy food and snacks to the children and children were consulted in the planning of meals.

Children's mental, physical health and wellbeing was also promoted in the centre. Staff enabled children to participate in a variety of physical activities and discussed the importance of a healthy life style and the positive impact it has on their overall health and mental wellbeing. This was achieved through direct work with children on relevant topics such as supporting children in navigating peer and family and carer relationships, developing social skills, connecting emotions to behaviours, self-regulation, and the importance of respect. From a review of care records, there was evidence of detailed discussions with children and how these discussions enabled children to connecting feelings to behaviours and to explore more positive ways to respond to challenging situations and issues as they arose. In addition, the centre held relevant health and medical records for children on file. All children had a general practitioner and there were details in relation to medical consent on children's files.

There was a medication management policy and procedure in place for the centre. The inspector found the practices for the management of medicines to be safe. Medicines were labelled appropriately and administration of prescribed medicines was recorded on an administration sheet in the child's file. From a review of files and interviews with staff, the inspector found that all staff had been trained in the safe administration of medication. The inspector reviewed a folder which contained the Tusla national policy on medication management and all the appropriate associated records. While the responsibility of the management of medication laid with all staff on duty, each shift assigned a member of staff to oversee medication management and correct recording to provide additional oversight.

Restrictive practices such as physical interventions had not been used in the centre 12 months prior to this inspection. The centre manager told the inspector that restrictive practice would only be utilised when an individual risk presented, was appropriately risk assessed and would be used for the shortest possible time with ongoing review.

Standard 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**

Children's rights were being promoted and respected by the provider, and the inspector found that children were being treated with dignity and respect. From a review of care files and centre documents, the inspector found that the rights of children are reflected in all centre policies and care practices.

Judgment: Compliant

Standard 2.1

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

Admissions and discharges to the centre were well planned and managed. There were effective procedures in place for admission to ensure placements were suitable. Children moved into the centre in a planned way and in line with policy.

Judgment: Compliant

Standard 2.3

The children's residential centre is homely, and promotes the safety and wellbeing of each child.

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

The centre provided a warm and comfortable environment for the children. All necessary safety and fire precautions were in place. Vehicles were well maintained with all necessary registration and insurance up to date. There was an up-to-date safety statement in place. However, the recording of fire drills required improvement.

Judgment: Substantially Compliant

Standard 3.1

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

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

Judgment: Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

The centre had a positive approach to the management of behaviour that challenged. The staff team were trained in the provider's approved behaviour management approach. The centre had implemented a model of care that promoted positive behaviours and restrictive practice was not used in the centre. Relationships between staff and the children were respectful and children received the support and encouragement they required to engage in positive behaviour.

Judgment: Compliant

Standard 4.1

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

Regulation 11: Provision of food and cooking facilities

There were practices and initiatives in place to promote the health, safety, development and welfare of each child. Staff prioritised the importance of good physical and mental health and wellbeing. Children's placement plans incorporated actions to promote children's health, wellbeing and development.

Judgment: Compliant

Standard 4.2

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

Regulation 9: Health care**Regulation 20: Medical examination**

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

Judgment: Compliant

Standard 4.3

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

Education and training was valued by the staff team. Children were supported and facilitated to attend school and training centres. There was good evidence that staff worked with individual children to support and encourage them, when they were struggling with school attendance.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
<p>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>	Compliant
<p>Standard 6.1: The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.</p>	Compliant
<p>Standard 6.3: The registered provider ensures that the residential centre support and supervise their workforce in delivering child-centred, safe and effective care and support.</p>	Substantially Compliant
<p>Standard 8.2: Effective arrangements are in place for information governance and records management to deliver child-centred, safe and effective care and support.</p>	Compliant
Quality and safety	
<p>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.</p>	Compliant
<p>Standard 2.1: Each child's identified needs informs their placement in the residential centre.</p>	Compliant
<p>Standard 2.3: The children's residential centre is homely, and promotes the safety and wellbeing of each child.</p>	Substantially Compliant
<p>Standard 3.1: Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.</p>	Compliant
<p>Standard 3.2: Each child experiences care and support that promotes positive behaviour.</p>	Compliant

Standard 4.1: The health, wellbeing and development of each child is promoted, protected and improved	Compliant
Standard 4.2: Each child is supported to meet any identified health and development needs.	Compliant
Standard 4.3: Each child is provided with educational and training opportunities to maximise their individual strengths and abilities.	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-0042532
Provider's response to Inspection Report No:	MON-0042532
Centre Type:	Children's Residential Centre
Service Area:	West North West
Date of inspection:	17 January-18 January 2024
Date of response:	15 th March 2024.

Introduction and instruction

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.

This document is divided into two sections:

Section 1 is the compliance plan. It outlines which Standard(s) the provider must take action on to comply.

Section 2 is the list of all standards where it has been assessed the provider is not compliant. Each standard is risk assessed as to the impact of the non-compliance on the safety, health and welfare of children using the service.

A finding of:

- **Substantially compliant** - A judgment of substantially compliant means that the provider has generally met the requirements of the standard but some action is required to be fully compliant. This finding will have a risk rating of yellow which is low risk.
- **Not compliant** - A judgment of not compliant means the provider has not complied with a standard and considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of children using the service will be risk rated red (high risk) and the inspector have identified the date by which the provider must comply. Where the non-compliance does not pose a risk to the safety, health and welfare of children using the service it is risk

rated orange (moderate risk) and the provider must take action *within a reasonable timeframe* to come into compliance.

Section 1

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: Responsive Workforce	
Standard : 6.3	Judgment: Substantially Compliant
<p>Outline how you are going to come into compliance with Standard 6.3: The registered provider ensures that the residential centre support and supervise their workforce in delivering child-centred, safe and effective care and support.</p> <ul style="list-style-type: none"> • Each staff member's Professional Development Plan (PDP) will be reviewed and updated by the 31/4/24 with the Centre Manager or Deputy Centre Manager. • All performance issues are managed in line with the Tusla HR policies & Procedures. • The performance of all newly appointed staff members is further monitored and managed under the Tusla Probation Policy. 	
Proposed timescale: 30/4/2024	Person responsible: Centre Manager

Quality and Safety: Child-centred Care and Support

Standard : 2.3	Judgment: Substantially Compliant
<p>Outline how you are going to come into compliance with Standard 2.3 The residential centre is child-centred and homely, and the environment promotes the safety and wellbeing of each child</p> <ul style="list-style-type: none"> The recording error in relation to the duration of fire drills has been rectified and going forward the record will reflect the amount of time required to evacuate the building specifically. 	
Proposed timescale: 17/01/24	Person responsible: Centre Manager

Section 2:

Standards to be complied with

The provider must consider the details and risk rating of the following standards when completing the compliance plan in section 1. Where a standard has been risk rated red (high risk) the inspector has set out the date by which the provider must comply. Where a standard has been risk rated yellow (low risk) or orange (moderate risk) the provider must include a date (DD Month YY) of when they will be compliant.

The provider has failed to comply with the following standards(s).

Standard	Regulatory requirement	Judgment	Risk rating	Date to be complied with
6.3	The registered provider ensures that the residential centre support and supervise their workforce in delivering child-centred, safe and	Substantially Compliant		30/4/2024

	effective care and support.			
2.3	The residential centre is child-centred and homely, and the environment promotes the safety and wellbeing of each child.	Substantially compliant		17/1/2024