

## 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 Mid Leinster
Type of inspection:	Full Inspection
Date of inspection:	24 - 25 March 2022
Centre ID:	OSV 0007766
Fieldwork ID	MON-0036334

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

The centre was managed by the Child and Family Agency (TUSLA) and offered respite accommodation to children and young people living at home or in foster care. The service could accommodate up to four placements on a nightly basis for children aged 5yrs to 17yrs of age. The service offered accommodation to both genders, male and female. The centre offered interventions and supports to maintain a child in the family environment or to prevent placement breakdown. The interventions aimed to build on the strengths of children and their families/guardians and support them to remain living in their local communities.

The aim of the service was to provide early intervention measures and where possible to prevent a full admission for a child or young person into residential care.

Number of young people on the	5
date of inspection:	

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
24 <sup>th</sup> March 2022	09.30 – 15.00	Bronagh Gibson	Lead Inspector
24 <sup>th</sup> March 2022	09.30 – 15.00	Hazel Hanrahan	Support Inspector
25 <sup>th</sup> March 2022	09.00 - 19.30	Hazel Hanrahan	Support Inspector

#### Views of children who use the service

This service provided respite care for young people living at home or in foster care. The centre had the capacity for 25 young people to be registered for a service and four could stay on any given night. This could increase slightly if siblings shared a room. On the day of the onsite visit, there were no young people in the centre as they were at school, however, inspectors got to talk with one child by telephone and received completed questionnaires from five children. Inspectors also got to talk with two parents by telephone.

The centre itself was located in a Dublin south inner city area, set back away from the surrounding residences. The centre was bright and airy, with a welcome room for visitors and ample leisure and dining areas for children. It was decorated in a way that created a warm and spacious feel, and provided for a positive child friendly environment. Art created by children was displayed around the house and included individualised hand prints and foot prints placed in photo frames. The centre also showcased photographs of children engaging in leisure activities. There was a library area and a games room for the children to enjoy and other rooms which provided dedicated spaces for children to play. On speaking with staff, it was clear that managers had considered the impact the environment had on children, both in their interactions and on their well-being. Managers had included children in the design of the centre

It was apparent from talking with staff, children and observing the premises that children were involved in many activities during their stay. One child spoke of the activities they participated in and they included art, board games, football and cooking. They stated that they *'Like baking cakes'.* 

The premises included an outdoor space with an outhouse for a beauty room, hammock and football area.

The staff were described by one child *as 'nice and they play football'*. Play was an important learning tool used by staff with children. It offered children an opportunity to take part in and interact with the world around them. Play provided them with the ability to develop skills and to help them build self-confidence. As reported by a social worker who spoke with the inspectors, the centre *'creates a safe space'* where a child had *'developed a sense of identity'*. There had been a 'massive progression in [child's] self-esteem'.

Children who spoke with inspectors described their experience of the centre as *'liking 'everything'* about the house *'like the bedroom'* and you can *'bring toys'* to the house. A child said that they *'get a break from home'*. One child said that they could speak to staff if they were worried and that the child *'talks to them [staff] about friends, football'.* 

The centre actively promoted the voice of the child through seeking their views on activities and interests and children appreciated this.

The centre had a model of care which provided a common approach to the care of each child. This model was adapted well within the centre and ensured each child's goals were tailored to their needs. One social worker described direct work with children within this model including *'their independent living skills, sexual education, boundaries and how to be safe online*'. Each child was assigned a keyworker to carry out this work.

Inspectors talked with one social worker who was positive about the centre and the experience of children while there. They said that the staff were *'very approachable, friendly and they very clearly put children first'* in their work. Communication between professionals was described as *'very good'* and that professionals and parents or guardians were kept up to date on each child's progress. This social worker said that children *'love'* the centre and request *'can we go there more'*. They described the centre as *'a home from home' for* children.

Parents who talked with inspectors were satisfied with how staff team members engaged with their children and said that the staff 'listen to the kids' and also 'listen' to parents. They also commented that staff 'engage' and 'talk' with their child, and that this had helped in their child's development. A child told inspectors that they are 'more confident, and speak out more'. One parent described the centre as 'very thorough' and that staff 'check-up' on how parents were feeling. The staff were described as 'always contactable'. Parents were of the view that the needs of their child had been met by the staff team, and that they were 'well looked after'. One parent told inspectors that the staff were supportive in providing a space to build family relationships and to strengthen bonds. This parent spoke about the positive impact the centre had had on the children including that it 'feels like home' and that they were 'happy with people there [staff] and get to do things'.

Overall, children had a good experience of the centre and were well cared for while they were there. Parents and professionals who engaged in this inspection were satisfied with the service the centre provided and valued it.

The next two sections of the report provide the findings of this inspection on aspects of governance and how this impacted on the quality and safety of the service.

#### Capacity and capability

This was a well-managed service which was well resourced with experienced staff. There was a clear and effective management structure in place. The centre was managed by a centre manager who was supported by a deputy centre manager. Social care leaders were present on the rota to coordinate each shift and ensure it went smoothly and to plan.

The centre had its full complement of full-time staff. There were two vacancies in terms of relief staff and as a consequence, cover for staff leave was provided by agency staff. The same agency staff were utilised to maintain stability and consistency in the service.

Inspectors found that the staff team was well experienced in providing care to children. The team had received adequate training pertinent to their role and 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. While some training was provided through e-learning during the pandemic, things were gradually returning to normal. The team went to great strides to make the centre a welcoming space for children and their families, and worked well with social workers to ensure the service they provided was necessary and of benefit to children and maintaining their current living situation.

Resources were well managed in the centre and were responsive to the needs of children placed there at any given time. The centre manager ensured that each shift had a social care leader in place. The staff team was kept busy preparing and planning each respite placement and supporting children in their substantive placement when necessary.

The centre had a statement of purpose and function in place that reflected the nature of the service. Additionally, the centre had in place a friendly version of the document for children, and parents/guardians. This provided information on the service provided to children. On review, inspectors found that the statement of purpose needed to expand on its full range of services to include the facility of a parent(s) to stay in the centre with their child(ren) where appropriate.

#### Standard 5.3

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

The centre had a statement of purpose and function which required additional information on the full extent of the facilities it provided, particularly in relation to parents accompanying their children overnight.

Judgment: Substantially compliant

#### Standard 6.1

The registered provider plans, organises and manages the workforce to deliver childcentred, safe and effective care and support. **Regulation 6: Staffing** 

The centre was well resourced in terms of staffing and the staffing compliment was well managed. Although there were two vacant relief posts in the centre, this was addressed through the use of consistent agency staff who were familiar with the children and the centre. Resources were well managed in the centre.

Judgment: Compliant

#### Quality and safety

The centre provided a good quality service to children who were placed there for respite breaks. The centre was clear on its purpose to support children and their family or carers, to maintain their current placements, either at home or in foster care. Admission to the service and each respite break was well planned. Children and their families were given good information on the service and what they should expect.

The 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 team to provide a service based on the ongoing needs of the children and their family or carers, and also, to determine when it was no longer required. This approach was working well at the time of inspection.

Each child placed in the centre had an allocated social worker and the centre worked well with social workers on the aims of the centre in relation to the overall plan for each child. Although this was not each child's substantive placement, placement plans were developed which reflected the care plan or family support plan in place. Inspectors reviewed three children files and found that they each had a placement plan which was reviewed and up to date. The centre team kept social workers up to date following each respite break and this contributed to ongoing planning for each child. Where required, centre staff attended child in care reviews.

Respite breaks were well planned and the mix of children staying on any given night was risk assessed where necessary, to ensure staffing was adequate and the mix of children was suitable. Contracts were also in place for access to the centre and this was well managed. Centre staff confirmed for inspectors that children could choose to go home if they did not wish to stay and that arrangements were in place with parents and carers to ensure this happened when required.

Children were well consulted and encouraged to have their voice heard in the centre. For example, they had a say in activities they wished to take part in as part of their respite break. The centre offered a wide range of activities and provided children with the opportunity to pursue their hobbies and interests. These included football games and going to the cinema and out for meals. Placement plans reviewed by inspectors recognised the individuality of each child who came to the centre, and staff actively encouraged children to take part in activities that were important or interesting to them. This practice helped children to build their independence, confidence and social skills. Children were fully engaged in their care and support in the centre through keywork sessions, and the model of care that underpinned the centres practice. Children routinely exercised their choice in the centre including the room they would sleep in and the food they ate. The centre had an approved method of managing behaviour and staff were trained in this model. Not all staff could perform a team restraint of a child for various acceptable reasons, and the centre manager ensured skills in this area were dispersed across each shift. There were also alternatives in place, such as the ability to call Gardaí, in the event of a serious incident which required additional support. Behaviour support plans were in place for each child and on review, inspectors found that they were up to date and reflected the needs of the children involved.

The centre completed risk assessments related to children from the point of referral of a child for a respite break. Risk assessments involved the identification and evaluation of sources of potential harm and the management of those identified risks. The centre put actions in place to reduce or prevent these risks. The risk assessments contained a whole range of actions dependent on the risk. Some actions identified included specific pieces of work undertaken through the centres model of care such as discussion with the child regarding dangers.

The centre communicated well with parents and carers and kept them and social workers, up to date following each child's respite break. A social worker confirmed that centre staff provided 'daily updates' on the children. The staff team worked well with parents and carers and good quality communication supported parents and carers to feel included in their child's care.

The centre was fully staffed with a range of experienced staff. Staff training was continuous and covered all key areas that were pertinent to their role. This ensured that the team remained knowledgeable in their practice and understood the needs of the children placed in the centre. Arrangements for safeguarding children was in place and all staff were trained in Children First. The majority of staff who talked with inspectors were clear on areas such as managing concerns about children and protected disclosures, this needed to be revisited with some to ensure they had a good working knowledge of these areas of practice.

Children were safe in the centre and there were clear system's in place to ensure concerns about children were reported in line with Children First. Centre records showed that there were no outstanding child protection concerns in relation to any of the children accessing the service.

There was a process in place to ensure consent was given by parents and or carers to ensure children's health needs were met. Centre staff completed individual work with children in relation to their overall health and wellbeing, and this was clearly recorded in keyworking sessions. There was a policy in place in relation to medication management. Fire safety was good in the centre and fire safety equipment was installed around the centre, along with fire exit signs and other required safety equipment. Fire safety records were up to date and showed that all relevant checks and maintenance occurred.

Standard 1.5

Each child develops and maintains positive attachments and links with family, the community, and other significant people in their lives.

Regulation 8: Access arrangements

This was a respite centre where children stayed on occasion, and during their stay, good contact was maintained with their family and carers. Children were brought to school during the week and had access to the local community and activities.

Judgment: Compliant

Standard 2.2

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

**Regulation 23: Care Plan** 

Regulation 24: Supervision and visiting of children

**Regulation 25: Review of cases** 

Regulation 26: Special review

Children's individual needs were assessed and the role of the centre in relation to their needs was clearly stated in their individual placement plans. Care plans and family support plans were in place where appropriate, and were reviewed.

#### Judgment: Compliant

Standard 2.3

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

Regulation7: Accommodation

**Regulation 12: Fire precautions** 

**Regulation 13: Safety precautions** 

Regulation 14: Insurance

The centre was homely, very nicely laid out and decorated. It was evident that children stayed there and the centre was well resourced in terms of space and toys, books, games and consoles for children to enjoy.

Judgment: Compliant

**Standard 2.6** Each child is supported in the transition from childhood to adulthood.

The centre took every opportunity to let young people experience different environments and build social skills in line with their age.

Judgment: Compliant

Standard 3.1

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

Children were safe in the centre and the staff team were alert to signs of potential concerns about their safety and or wellbeing. The policy and procedure on protected disclosures needed to be revisited with some staff.

Judgment: Substantially compliant

**Standard 3.2** Each child experiences care and support that promotes positive behaviour.

Positive behavuiour plans were in place for children who needed them and they reflected the needs of the children involved.

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 in place information and consent surrounding the medical needs for each child. The centre also had a medication management policy and procedure. The centres model of care along with the placement support plan worked towards supporting health needs as outlined in their care plan.

Judgment: Compliant

## Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
Standard 5.3	Substantially compliant
The residential centre has a publicly available statement	
of purpose that accurately and clearly describes the	
services provided.	
Standard 6.1	Compliant
The registered provider plans, organises and manages	
the workforce to deliver child-centred, safe and effective	
care and support.	
Quality and safety	
Standard 1.5	Compliant
Each child develops and maintains positive attachments and links with family, the community, and other	
significant people in their lives.	
Standard 2.2	
Each child receives care and support based on their	Compliant
individual needs in order to maximise their wellbeing and	
personal development.	
Standard 2.3	Compliant
The children's residential centre is homely, and promotes the safety and wellbeing of each child.	
Standard 2.6	Compliant
Each child is supported in the transition from childhood to adulthood.	
Standard 3.1	Substantially compliant
Each child is safeguarded from abuse and neglect and	
their care and welfare is protected and promoted.	
Standard 3.2	Compliant
Each child experiences care and support that promotes	
positive behaviour.	
Standard 4.2	Compliant
Each child is supported to meet any identified health and	
development needs.	

## **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-0036334
Provider's response to	MON-0036334
Inspection Report No:	
Centre Type:	Children's Residential Centre
Service Area:	Dublin Mid Leinster
Date of inspection:	24 <sup>th</sup> March 2022
Date of response:	19 <sup>th</sup> April 2022

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. Specific to that standard, Measurable so that they can monitor progress, Achievable and Realistic, and Time 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 : 5.3	Judgment: Substantially Compliant
Outline how you are going to co	me into compliance with Standard 5.3:
	available statement of purpose that accurately
scope for a parent/s for young peop whilst their own children are residing other young people are residing to e	been altered to explicitly state that there is le to stay within the centre overnight, but only g in the centre. This will not extend to when ensure they are appropriately safeguarded. urpose was completed, signed and in place on
Proposed timescale:	Person responsible: Centre Manager
15.04.2022	

Standard : 3.1

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.		
protected and promoted. It is intended to deliver three workshops on Child Protection and specifically Protected Disclosures Policy and Procedure in Tusla. This will include full time and part time workers within the centre. This will include the specifics and expectations on them as mandated persons and the exact steps to the process of handling a child protection matter. Briefings have and will be delivered on the 20 <sup>th</sup> , 27 <sup>th</sup> of and April and the 4 <sup>th</sup> of May. These three briefings will ensure that all those working within the centre will have an opportunity to be in attendance and expand their knowledge. Protective disclosures and management of child protection concerns will be part of the induction process in the centre.		
Proposed timescale: 4 <sup>th</sup> of May, 2022	Person responsible: Centre Manager	

Judgment: Substantially Compliant