

Health Information and Quality Authority Regulation Directorate

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



Type of centre:	Children's Residential Centre
Service Area:	CFA DML CRC
Centre ID:	OSV-0004163
Type of inspection:	Unannounced Full Inspection
Inspection ID	MON-0018972
Lead inspector:	Erin Byrne
Support inspector (s):	Grace Lynam

Children's Residential Centre

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

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

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

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

Compliance with National Standards for Children's Residential Services

The inspection took place over the following dates and times:

From:	To:
23 February 2017 09:00	23 February 2017 17:00
24 February 2017 09:00	24 February 2017 16:00

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

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

Actions required

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

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

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

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

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

Summary of Inspection findings

The centre was based in a two storey detached house in a Dublin suburb with good amenities and transport links. The design and layout of the centre was suitable for its stated purpose. The house had a paved area to the front and a large back garden. The centre provided medium to long term care for four young men between the ages of 13 and 17 years. There was one vacancy in the centre at the time of the inspection. The centre was not deemed suitable for children or young people with learning difficulties. The statement of purpose and function stated that the relationship model was used to inform its care. At the time of the inspection, there were 3 children living in the centre.

During this inspection, inspectors met with or spoke to 3 children, managers and staff. Inspectors observed practices and reviewed documentation such as statutory care plans, child-in-care reviews, relevant registers, policies and procedures, children's files and staff files.

Inspectors also spoke with the centre's monitoring officer, three children's social workers, a previous resident of the centre and children's family members.

All children resident at the time of inspection and a previous resident of the centre spoke very highly of the quality of care they received and said they were very happy in the centre. They were encouraged to pursue their hobbies and interests and achievements and significant events were acknowledged and celebrated.

Overall, the children received good quality care. There was good quality communication and interaction between children and staff. The centre was homely and welcoming. Children were aware of their rights, were treated with respect and were consulted about decisions. Children's complaints were listened to and were acted on in a timely manner. Children were appropriately admitted and their physical and emotional needs were met by staff in the centre. Children had school or alternative education placements and were supported to complete state exams. They were facilitated to maintain good contact with their families and friends.

Safe care practices had improved since the previous inspection and children felt safe living in the centre. The staff team provided a child-friendly environment. Children's care plans were reviewed regularly, but there were delays in preparation for leaving care plans for some children. Each child had an allocated social worker who visited regularly. Care plans and placement plans were up-to-date and the children's goals were reviewed regularly. There was good communication between the staff of the centre, other professionals and parents/carers, where appropriate.

There was a sufficient staff team with the relevant experience to meet the needs of the children. They were supported by the centre manager who provided good leadership.

A number of systems were in place to ensure good governance and while improvements were evident, a number of areas identified during the previous inspection of the centre had not been fully addressed at the time of this inspection. There was good communication and accountability relating to significant events. However, the systems for recording of significant events and child protection concerns required improvements to ensure it was effective and in compliance with national standards. Deficits in mandatory training had not been fully addressed and the centre's risk register was not fully implemented.

In addition improvements were required in the following areas; full and complete medical histories for all children, on call / out of hour's supports, external management supports, supervision, training and structural and decorative works on the premises, details of which are outlined further in the report and in the action plan published separately.

Inspection findings and judgments

Theme 1: Child - centred Services

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

Standard 4: Children's Rights

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

Inspection Findings

Children's rights were respected and promoted by care practices within this centre. Children were aware of their rights and they actively participated in decision making about their lives. Their opinions were sought and valued and the daily running of the centre considered each child's individual needs. Each child's preferences for food and activities were accommodated and children were encouraged and supported to pursue individual interests. Children told inspectors that they had choices about the menu for meals and that they were assisted to buy clothing of their choice. They were also given choices about the activities they took part in and were given opportunities to try out new activities.

The right of the young people to privacy and dignity was valued. Each young person had their own bedroom and the centre had sufficient communal space for children to spend time together or be on their own if they wished. Each child was given a basic allocation of pocket money each week. Staff respected children's privacy by knocking on the door and waiting for permission to enter a bedroom.

Children participated in regular children's meetings during which a summary of issues discussed and decisions were recorded. Inspectors reviewed these minutes and found that children actively participated in the agenda and the meetings. One child confirmed to inspectors that they took part in children's meetings and had their opinions listened to. Records showed that children's meeting were used to discuss a variety of topics including, smoking, fire safety, EPIC and advocacy, behaviour and respect, and other general topics related to the running of the centre including, use of the car, pocket money, new admissions or discharges. Issues raised by the children were brought to staff meeting where decisions were made and then relayed to children. Inspectors found that follow up on requests and decisions were appropriately communicated to children and recorded as part of children's meeting minutes.

Children were provided with appropriate levels of information relating to their rights. They were provided with written information including, a booklet containing information

relevant to their placement, guidance on exercising their rights and supports available to them. Inspectors found through examination of one to one conversations and young person's meetings that children were supported to understand all the information provided to them, as appropriate to their age and level of experience. In addition, there was a copy of the UN Convention on the right of the child on display in the centre and information relating to the advocacy service Empowering Young People In Care (EPIC) were available in the communal areas.

Children were aware of their right to access information held about them and were supported by staff to exercise their right to do so upon request.

Children were supported by their social workers and the staff team to prepare for care reviews and meeting relating to their care and were facilitated to meet with their social worker and guardian ad litem as required. This was confirmed by the children and professionals who spoke with inspectors.

Complaints were well managed and actions to address deficits identified during the previous inspection had been effectively implemented. Children knew how to make a complaint and told inspectors that they would speak with staff members or the centre manager if an issue arose for them. There had been two complaints by children recorded in the centre since the previous inspection. Inspectors found that both complaints were appropriately addressed. Records of complaints clearly documented that children were heard, their concerns responded to and follow up action taken to ensure they were satisfied with the outcome of complaints. Children's social workers and family members confirmed that they had been informed about how to make a complaint upon admission of children to the centre. Social workers were confident that children were encouraged and facilitated to express concerns or dissatisfactions directly with staff members as they arose. Complaints were appropriately notified as required.

Judgment: Compliant

Theme 2: Safe & Effective Care

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

Standard 5: Planning for Children and Young People

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

Inspection Findings

There are effective policies and procedures in place to ensure children were suitably admitted into the centre. One child had been admitted to the centre since the last inspection. Admission procedures were followed and risk assessments were completed on new referrals. The pre-admission risk assessments looked at the needs of the children referred and the admissions process considered the potential impact of any new admission on the current residents. The centre manager told inspectors that there were several referrals to the centre that did not lead to admissions as a result. Staff and managers interviewed were satisfied that the centre was appropriate to meet the needs of the current children living there and confirmed that they had received appropriate information about the children and their needs prior to admission. Children who spoke with the inspector said they understood the reason for their placement.

Each child had an allocated social worker who was actively involved in their care. The social workers visited the children as required and they had regular contact with the staff of the centre in relation to the children. Records of the social worker visits, their telephone calls and all contact with staff were maintained in the children's files. The children's needs were assessed and there was a comprehensive up-to-date care plan in place for each child. There was an improvement with respect to social work oversight of children's records in the centre since the previous inspection. Inspectors found that children's records were reviewed by their social worker during visits to the centre. One social worker confirmed that she regularly reviewed the child's files when visiting the centre.

The majority of child in care reviews had been held within the requirements of the Child Care (Placement of Children in Residential Care) Regulations, 1995 and all of the care plans were of good quality. The staff team prepared a good quality report outlining children's needs as well as their progress in their placement, in preparation for child-in-care reviews. Children were consulted about decisions on their care and they were given the opportunity and encouragement to attend their reviews if they chose to. Children who spoke with inspectors confirmed that they were consulted as part of their care planning process and contributed to their statutory care plan reviews.

Placement plans were of good quality and outlined the key objectives and needs for each child, in line with the overall objectives of their care plans. A review of placement plans found that they were comprehensive and clear decision-making was recorded. Care records demonstrated that where required, professionals meetings were held and attended by relevant parties to ensure care planning decisions were being progressed within the placement. However, not all placement plans had been signed by children's social workers.

Children were supported to maintain good contact with their families and healthy friendships with their peers were encouraged. Parents and carers were kept informed of any significant incidents and events in their children's lives as appropriate. Staff were sensitive to ensure that children were given opportunities to develop and maintain appropriate friendships and friends were welcomed in the centre. Children who were placed considerable distances from their own communities were supported and facilitated by staff members to maintain peer and family relationships, as well as educational placements. Children who spoke with inspectors confirmed that their contact with family and friends was encouraged and that their friends were welcome in

the centre. The centre had adequate space to ensure children had private space to meet with their families, friends and social workers.

The quality of emotional care and support for young people was good. Inspectors found the children were supported at times of crisis and that professional support was appropriately sought when required. Key workers completed good quality work with young people in relation to supporting their emotional well-being and dealing with stresses in their lives. Records showed that key workers engaged the children in meaningful conversations and inspectors observed that staff interaction with the children was sensitive, respectful and appropriate. Children told inspectors that they were treated well and that they could talk to staff members if something arose for them that they needed help with. Social workers said that the children were well cared for by the staff team. Where children presented with specific needs which required specialist supports, staff members advocated for services for children. In addition, the centre manager pursued specialist training for all staff in order to ensure that they had the skills to support and respond appropriately to children's needs within their placement.

Formal preparation for leaving care or aftercare planning required improvement as this had not begun for all young people as required. All young people resident at the time of inspection were over 16 years old. Not all young people had formal leaving care needs assessments or preparation for leaving care plans in place as required. One young person approaching their 18th birthday had an allocated aftercare worker and a detailed aftercare plan on file. For the other children there was some good preparation for leaving care and aftercare discussions taking place regularly and the planning processes had informally begun for all. Each child was supported by staff members to develop independent living skills such as healthy lifestyles, good personal care, appropriate personal relationships and practical skills such as cooking and cleaning. Staff and the centre manager told inspectors about the work undertaken to prepare young people for independence and reported that the children were reluctant at times to engage but, this was a consistent focus for all staff. Social workers told inspectors that it was their experience that children were being consistently supported to develop skills necessary for living independently. Children who met with inspectors spoke about their experiences of being supported to develop life skills and the on-going work within their placements to aid them to do this.

Discharges were well-planned. Since the last inspection, two young people were discharged post their 18th birthday in a planned manner. Inspectors spoke with one young person who had been recently discharged. This young person was very complimentary of the service received during their time in the centre and spoke very highly of the quality and extent of the supports still available to them. This young person confirmed that s/he was encouraged and facilitated to manage his/her transition appropriately and continued to be supported by staff members regularly.

Children's records were factual and accurate, legible and up-to-date. Files contained the majority of information required by the regulations. Some minor gaps in documentation had been identified by the centre manager and had been requested from the children's allocated social workers. The children's records were stored securely and arrangements were in place for files to be archived appropriately. The centre manager regularly read and reviewed information contained on all children's files. Inspectors saw examples of records which contained details of comments and actions by the centre manager

including; requests for further information, comments on care practices and suggested intervention or directions for follow-up action required.

Judgment: Substantially Compliant

Standard 6: Care of Young People

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

Inspection Findings

Children were well cared for within the centre. Care practices were considerate of children's individual needs and respected their preferences. Children were provided with opportunities similar to their peers and were encouraged and supported to develop talents and pursue interests.

Staff related to children in an open, positive and respectful manner. Children's achievements were appropriately acknowledged and reported. Significant events were celebrated. For example, a cake was purchased for a young person who recently moved from the centre who was celebrating a birthday and intended to drop over to the centre to see staff members and other residents. One resident celebrated their birthday in the weeks prior to inspection with a barbeque for all friends in the garden.

There were improvements in the diets and provision of health and fresh food choices since the previous inspection. Nutritious and varied food was available in the centre and while children's preferences were taken into account they were encouraged to make healthy choices and the availability of convenience or frozen food options were kept to a minimum. The children were involved in planning and cooking meals and inspectors observed staff cooking and promoting healthy eating options with them. Children had easy access to snacks and there were adequate amounts of fruit and healthy foods available. Staff and children sat together for meals and were observed by inspectors to be a positive and interactive experience. Children were sometimes encouraged to prepare their own meals, to promote the development of independent living skills.

Behaviours that challenged were managed well. All staff were trained in a model of behaviour management. There were clear and effective procedures in place for the management of behaviours that challenged and the staff team effectively managed incidents of absences, aggression, self harm and fire setting within the centre. The practices in place for management of such incidents included staff considering the underlying causes to such behaviours and supporting children to manage their behaviour. The staff team regularly discussed behaviours that challenged at their handover and team meetings, so that the team were consistent in their messages and responses to the children. A particular focus of communication amongst the staff team was on ensuring consistency in the expectations of children, with respect to their behaviour as well as in the staff team's responses.

There were individual crisis management plans (ICMPs) on the children's files. They were of good quality, reviewed regularly and updated as required. A review of these plans found that they described the children's usual response to difficult situations, potential triggers for crisis or upset and they contained the necessary information to ensure a consistent response by staff.

Children were aware of the behaviours expected of them and they were clear on the consequences for inappropriate behaviours. Consequences, both positive and negative were utilised moderately but effectively within the centre. Inspectors found that children were rewarded for particular achievements such as full attendance at their education or training course for a defined period or returning home within their curfew, and this appeared to be effective at incentivising children to manage such challenges. While staff members were trained in a model of care which included the use of physical restraint if required, this did not feature as part of behaviour management techniques used in the centre.

Room searches were appropriately used and regularly monitored by the centre manager. Inspectors found little use of restrictive practices with the exception of room searches which occurred regularly in response to identified risks. For example, if a child was at risk of self harm or if it was suspected that a child was using drugs. Searches of children's rooms were completed in line with individual safety plans which were devised in response to significant events. Inspectors saw risk assessments on the children's file that detailed the reason for these practices. Inspectors reviewed a sample of records of room searches and found that children were informed when a search took place and were often present during searches of their rooms. The records also showed that the centre manager reviewed these events and gave feedback to staff on their approach and practice where appropriate. However, there was no written policy in place and the guidance provided did not outline a timeframe for review or detail arrangements for oversight of this practice.

Incidents of children going absent without authority from the centre were well managed. There was a written policy and procedure for staff to follow when children were absent without authority from the centre and this included details of who should be notified and timeframes for notifications of absences. Each child had an individualised absence management plan which was age appropriate and considerate of each child's development stage and personal circumstances. Inspectors found that these absence management plans were reviewed and updated as required. The National Joint Protocol for children missing from care was implemented within the centre and the centre manager appropriately sought to meet An Gardaí Síochána and the social worker in line with this protocol, when children were regularly reported missing from care. However, these meetings had not occurred for all children as required.

Inspectors found that children were effectively supported upon return from periods of absence from the centre and every effort was made by the staff team and manager to promote children's safety and encourage them to consider risks associated with this behaviour. The centre manager and interim service manager told inspectors that while specific risks to children during these periods of absence were unknown, potential and/or suspected risks were consistently highlighted to the social work department and An Gardaí Síochána to ensure an appropriate and proportionate response. Parents,

family members and professionals such as the children's social workers and Guardian ad Litem were informed when absences occurred and, when necessary, professional meetings were convened to devise a plan for the safety of the child involved.

Records of significant events including incidents of absences without authority and children missing from care were recorded, up-to-date and routinely reviewed by the centre manager. Inspectors found that these were also routinely notified to social workers, the interim services manager and the monitoring officer as required and this was confirmed by all relevant people. Social workers told inspectors that notification of significant events were timely and comprehensive and said that the centre staff team also relayed relevant information regularly as required via telephone.

However, inspectors found that while information was recorded the system for recording of significant events required review. The procedure for recording required that staff complete several separate reports which related to the same event, which were then filed in specific sections of the child's file. This resulted in difficulties reviewing full records of significant events, in particular identifying follow up action in response to significant events for children. The process of recording actions relating to one event separately was also time-consuming and laborious.

Judgment: Non Compliant - Moderate

Standard 7: Safeguarding and Child Protection

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

Inspection Findings

There were good safe care practices in place. Safeguarding and child protection concerns were effectively managed and there was good collaboration between children's social workers, families and other external professionals as required. There was a safeguarding policy in place in the centre which provided good guidance. However, the child protection policy was not up-to-date and was not in line with Children First: National Guidance for the protection and welfare of children. The practice in place for recording of incidents or events of a child protection nature required improvement.

Children told inspectors that they felt safe in the centre. Children had their own mobile phones so could make telephone calls in private and this also allowed staff to maintained contact with children when they were out of the centre.

There was an ethos of open communication which promoted and encouraged staff members to express opinions and/or concerns openly amongst each other and with the centre manager. Staff members told inspectors that they felt comfortable to highlight any concerns to the centre manager and were confident that concerns or issues would be followed up.

There were good systems in place to protect children from abuse including regularly

reviewing and updating safety, behavioural and absence management plans. The centre manager was the designated liaison person and the staff team were aware of this. Inspectors found that the staff team were pro-active in addressing any concerns of a safeguarding or child protection nature and followed these up directly with their manager and the children's social worker as appropriate.

There was evidence of a timely intervention in response to any circumstances that gave rise to a threat to the safety of the children. For example, multidisciplinary meetings, involving the social worker, Guardian ad Litem and members of staff were convened when safety issues relating to children arose. There were safety plans for children put in place following these strategy meetings. At the time of inspection there were two such safety plans in place which were appropriate and proportionate to the presenting risks. The staff team also completed individual work with children that promoted their self-protection.

Four child protection referrals had been made during the 12 months prior to inspection and these had all been resolved. Inspectors found that the centre manager was proactive at ensuring follow up action was recorded and confirmation of completion of action was sought and received from children's social workers. Social worker's interviewed were satisfied that they were appropriately notified of concerns affecting the safety and/or welfare of the children living in the centre.

The procedures in place for recording of child protection concerns required improvement. The centre had a practice of recording details of child protection concerns on a significant event notification and a child protection concern notification form and retaining both of these on file as well as, separately reporting concerns on a standard reporting form, as required by Children First (2011). However, copies of the standard report forms were not retained in the centre and the SEN's produced were filed along with all SEN's in the centre. This did not consider the sensitive nature of the information contained within these records and was not in line with national policy or guidance.

Other safeguarding measures in place were good quality absence management plans, individual risk assessments and safety plans, as well as Garda Síochána (police) vetting for all staff members.

Judgment: Substantially Compliant

Standard 10: Premises and Safety

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

Inspection Findings

The premises were suitable for the residential care of children and were used in keeping with their stated purpose. There were adequate arrangements in place for protection against the risk of fire.

The centre was generally well kept and nicely decorated. There was a comfortable and welcoming feeling and all children and staff appeared relaxed and at home. There were adequate furnishings and facilities and the centre was comfortably lit. There were ample cooking facilities and children had access to laundry equipment as required. Children also had access to private space to have visitors and there were enough communal spaces available to accommodate the children and staff. There was a large rear garden out the back of the house which also had recreational facilities available to children. Each child had their own room which were decorated to their individual taste. Children told inspectors that they were involved in picking colours and decor items for their rooms and had requested additional recreational equipment for the centre which was purchased.

While general maintenance requests were dealt with promptly, the centre was in need of structural and decorative works which were outstanding for a long period of time. Actions to address deficits with the maintenance records had been effectively implemented since the previous inspection. A maintenance log was maintained by the centre manager that recorded the maintenance required and included when the tasks were completed. The centre generally was in a good state of repair however, the centre's floor tiles in the hallway were cracked and in need of repair and this was an issue which was highlighted during the previous inspection in April 2016. In addition the centre's bathrooms required some attention, including repairs to a broken shower and general maintenance work. Inspectors reviewed a programme of capital works involving extensive work to the structural building including replacing windows and improving insulation throughout the centre, which had been approved. However, there was no date set for this work to begin.

Fire safety practices were good. Weekly and daily fire checks were completed as required. Inspectors reviewed the centre's fire log and found it to be well maintained. The centre was adequately resourced to protect against the risk of fire and all fire equipment was appropriately serviced and maintained. The emergency lighting was adequate and along with the fire alarms, had been serviced regularly. Fire exits were unobstructed and there were records of fire drills carried out with all staff and children.

Risks were appropriately identified, recorded and managed by staff. Environmental risk assessments were completed and risks were categorised effectively. The staff team had identified a risk associated with external factors and decided the appropriate control warranted the centre's doors to remain locked at all time. While this was an inconvenience for the children resident it had been appropriately risk assessed and was being regularly reviewed and monitored. In addition, the inconvenience to the children had been appropriately acknowledged and addressed individually with each young person by the centre manager.

The centre vehicle was road worthy. It was taxed, insured and records of car servicing were held in the centre.

The centre had an up to date health and safety statement that referenced the relevant legislation. A member of staff was the health and safety officer and staff were aware of the centre's emergency plan and contingency arrangements in the event of an evacuation.

Medication was safely stored in a locked medicine cabinet.

Judgment: Substantially Compliant

Theme 3: Health & Development

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

Standard 8: Education

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

Inspection Findings

Children received appropriate education and were supported and facilitated to attend relevant educational and training placements. Education was valued and the educational needs of each young person had been considered in the development of their individual placement plans.

All children had an identified education placement and staff worked with the children and their social workers to ensure that each child attended a school or an alternative educational placement that best met their needs. This inspection took place during school term holidays and inspectors found that each child had an appropriate plan in place and staff were considerate of children's individual needs and circumstances in agreeing plans with each child. Where young people had been out of education inspectors saw that preparation for their return was evident through daily planning as well as general interactions between staff and young people. There was evidence of extra tuition in the form of educational activities while young people were temporarily out of education and the young people told inspectors they were supported and encouraged by all staff to complete their education. Interviews with social workers and a parent outlined that they were satisfied that educational needs were being addressed and met by the staff in the centre. Managers and staff interviewed reported positive relationships with personnel in the respective educational placements.

Children were supported to undertake state exams and encouraged and facilitated to pursue third level education or training. Staff members completed direct work with young people related to their abilities, interest and aspirations including encouraging their progression to post leaving certificate or third level study as appropriate.

The children's files contained reports on their education and correspondence with staff from educational placements. Staff members were very familiar with the children's school and educational timetables and facilitated them in attending class and extra-curricular activities as well as supporting them to secure curriculum specific activities

such as work experience placements, relevant to their areas of interest, as required.

Judgment: Compliant

Standard 9: Health

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

Inspection Findings

Children's health care needs were appropriately assessed and this was incorporated into the care and placement plans to ensure their needs were met. Staff ensured that children had access to relevant health professionals and specialist services where required. Children had access to a General Practitioner (GP) and ancillary health services, such as dental and optometry and a review of children's files evidenced visits to the GPs and other specialist health care services as required. Children were also facilitated to attend for counselling and or special therapeutic services when this was indicated. However, while it was confirmed by the centre manager and children's social workers that all children had a medical examination on or prior to admission, not all children had a record of this on their care file.

The children who met with inspectors said they could access their GP when they required and were supported and facilitated in attending appointments. While there were details of children's medical history contained within social work reports, the medical history and health information from birth, including immunisation records were not on file for all children. However, efforts to obtain outstanding records were clearly evidenced through correspondence on file from the centre manager to the children's social workers, requesting absent medical information.

Children were appropriately supported in relation to health education. Inspectors saw a number of one to one conversations between staff and children on topics related to health. Children were encouraged and engaged in programmes such as alcohol/substance misuse, sexual health, nutrition and wellbeing.

Staff encouraged children to engage in exercise and to become involved in community activities that promoted a healthy lifestyle. One child who spoke with inspectors said they were encouraged and supported to engage in their preferred hobby, including being encouraged to join a local club and being supported or accompanied by staff as appropriate.

The management of medication was good. Medication was managed by staff and all medicines were stored securely in a locked cabinet. Records of the administration of medication were maintained on children's files. Where required, over-the-counter medicines were kept for individual children and were in date.

Inspectors found that the administration of medication was being monitored by the centre manager who had been trained in medication management and errors identified had been addressed. However, staff members had not received training in the management of medication. A medication management policy which was in draft format

at the time of inspection, had been read and signed by the majority of staff members.

Judgment: Substantially Compliant

Theme 4: Leadership, Governance & Management

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

Standard 1: Purpose and Function

The centre has a written statement of purpose and function that accurately describes what the centre sets out to do for young people and the manner in which care is provided. The statement is available, accessible and understood.

Inspection Findings

The centre had an up-to-date, approved written statement of purpose that set out the service being provided to children. It clearly outlined care practices utilised within the centre and the key policies which guided practice. It outlined the criteria for admission to the centre. Managers and staff were clear about the purpose and function of the centre. The service was being delivered in line with the statement.

Judgment: Compliant

Standard 2: Management and Staffing

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

Inspection Findings

Overall, the centre was well managed and the staff team provided a good service to children. Since the last inspection, a number of actions to address identified deficits had been effectively implemented. However, systems in place for ensuring the centre's register was kept up-to-date, management of the risk register and the recording of significant events required further improvements to ensure continued compliance with national standards.

There was a clear management structure in place. The centre was managed by a suitably qualified and experienced manager and a social care worker from the team had been identified to deputise for the manager during periods of absence. All staff were aware of the local and national structure of residential care management. However, there were no shift leader identified on each shift.

Risk was well managed but the centre manager required further training with respect to the management of a risk register. Risk management systems had been developed since the previous inspection. A risk register had been developed and this identified environmental risks and outlined how these risks were mitigated against. However, the centre manager was not fully confident in the use of the risk rating matrix in place and told inspectors that while risk assessments were reviewed regularly they were rarely amended or additions made to them. Both the centre manager and interim service manager told inspectors that the risk assessments detailed and updated monthly as part of the centre governance report was the active risk register within the centre and contained all of the centre's high risks. Inspectors found that this risk register was relevant, up-to-date, contained good details of control measures and was reviewed regularly. However, this differed from the centre's risk register and this had the potential to cause confusion and inconsistencies with respect to risk management.

Communication between the manager and the staff team was clear, regular and of good quality. Daily handovers occurred. Fortnightly team meetings took place where staff were updated on new developments, policies, procedures and the individual children were also discussed. Staff told inspectors that the manager was always available for children and staff to talk to her and this was also confirmed by children.

There was a system in place for monitoring and oversight which brought about improvements within the centre. Inspectors found that the centre manager reviewed centre records, such as daily logs, complaints logs, significant events and conversations of note. She regularly raised issues such as requests for clarification on events or direction for follow up action to be taken in relation to records with the individual staff members and the team. The centre manager reported to the interim service manager for residential care. The interim service manager visited the centre regularly and had reviewed and signed records within the centre. Inspectors found that the interim service manager had identified a number of issues during visits to the centre through systems checks which were completed regularly. Inspectors reviewed three systems checks which were completed since the previous inspection and found that improvements were noted between checks and issues highlighted were appropriately addressed. The centre manager told inspectors that she found these system checks useful and beneficial for ensuring that all relevant tasks were completed. Inspectors observed that some of these findings were also communicated to the staff team and discussed at team meetings. For example, it was noted where all staff hadn't signed particular policies and this was rectified through reminding all staff during a team meeting.

While the centre manager and interim service manager were aware of deficits requiring action within the centre, progress on some were slow and the reasons for this had not been explored or addressed effectively. A monthly governance reporting tool was prepared by the centre manager. This gave a monthly overview of issues such as risks in the centre, staff numbers, training records and significant events. The interim service manager met with the centre manager on a regular basis to review the progress of the centre including a review of this management tool. However, supports available to address on-going deficits or to support the centre manager in rectifying issues were minimal. Reasons for continued difficulties in meeting targets and potential barriers to achieving tasks such as up-to-date regular supervision for all staff, did not appear to be explored or identified.

Significant events were well managed in the centre. There were a high number of significant events in the centre and there were good quality reviews of the management of incidents by the centre manager. Significant event notifications were sent promptly to all relevant people. All of these notifications were reviewed by the centre manager and amendments or comments included as appropriate. However, while some actions had been implemented with respect to improving the effectiveness of the external review of incidents through the significant event review group (SERG) further improvements were required. The criteria for referring particular incidents for review by SERG had been clarified since the previous inspection. Inspectors reviewed minutes of these meetings and found that certain incidents from the centre had been discussed and reviewed as part of SERG. However, records didn't reflect how these reviews informed or improved practice within the centre.

The systems of administration of files in place in the center were not effectively organised. The filing system in place resulted in duplication of records without clear cross-referencing of documents to ensure that a full record of events was appropriately retained. The process for recording details of admissions and discharges from the centre required attention to ensure the centre's register was maintained as required. All relevant details relating to children's admissions and discharge were available in the centre upon request. However, these were retained on individual records and the details relating to young people discharged from the centre had not been updated on the centre's register. The register of children contained all information in line with the Child Care (Placement of Children in Residential Care) Regulations, 1995 and the the centre manager rectified the issue with regard to the recording system at the time of inspection to ensure that the register was up-to-date.

The provision of training required improvement despite it being identified during the previous inspection. Not all staff had completed mandatory training as required. Information provided by the centre manager showed that a number of gaps in mandatory training remained outstanding in that not all staff had completed training in manual handling and fire safety. In addition, not all staff members had received up-to-date training in child protection in line with national policy and best practice guidelines.

The centre manager in consultation with the staff team had completed a training needs analysis and identified the training priorities of the team for 2017 and a plan for these was in the process of being devised. These were based on the assessed needs of the current children as well as with those of potential future admissions. These included; training to enhance skills to address issues related to self harm and suicidal ideation, training to enhance understanding of attachment issues and report writing, among others. In addition, specialised training specific to the needs of one child resident had been sought by the centre manager and completed by all staff since the previous inspection.

There was sufficient staff employed to work in the centre. The roster reflected that there were 16 staff employed. There was also a consistent agency staff member available for use as required. In addition, the centre manager usually worked 9-5pm from Monday to Friday, but this was not reflected on the roster. There were appropriate rosters in place which indicated necessary staffing cover arrangements in place. However, there was no formal on call system in place and the centre management

structure did not identify any senior staff members within it. The manager was available on-call to staff but, this was not a formal arrangement and not optimum as the manager also worked full time in the centre. The interim service manager told inspectors that this was a national issue and had been escalated to the national office to be addressed. However, no timeframe for addressing this has been identified to date. Cover arrangements were in place in the event of an absence of the centre manager, in the form of a member of the social care team acting in the centre manager position with the support of the interim service manager.

Supervision of staff required improvement. Not all staff had received regular timely supervision in line with policy. The interim service manager told inspectors that the centre manager required further training in supervision and inspectors found that the number of staff for whom she provided supervision exceeded policy guidelines. Inspectors reviewed a sample of supervision records and found that supervision covered a wide range of issues such as staff well-being, individual children, leave and professional development. However, decisions were not clearly recorded and records were brief. The centre manager told inspectors that she had devised a schedule to ensure that all staff received timely, good quality supervision and highlighted that this was an area which would be prioritised for improvement in 2017.

The centre manager was supervised by the interim service manager. Records identified that management related issues were discussed in addition to the needs of individual children. These records were detailed and clearly outlined decisions as well as actions required. However, the centre managers supervision was not timely and did not seek to identify barriers to achieving identified targets or outline external management supports available to address on-going issues, such as deficits in the provision of supervision.

Judgment: Non Compliant - Moderate

Standard 3: Monitoring

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

Inspection Findings

A monitoring officer monitored the centre to ensure compliance with regulations, standards and best practice in line with the Child Care (Placement of Children in Residential Care) Regulations, 1995 – Regulation 17. Inspectors spoke with this monitoring officer who confirmed that he had undertaken a monitoring visit to the centre two weeks prior to this inspection. During this visit the monitoring officer spoke with staff, children and the centre manager. He told inspectors that while there had been some areas identified for which improvements would be recommended, he found that children were well cared for, the files were well organised and the centre manager provided good leadership and oversight.

The monitoring officer told inspectors that an area of focus for his report would highlight the need to strengthen governance arrangements and improve external

supports. In addition, similarly to this inspection the monitoring officer identified some gaps in visits by social workers, aftercare planning and mandatory training.

The monitoring officer confirmed to inspectors that regular and timely notifications were submitted by the centre manager and staff as required.

Judgment: Compliant

Acknowledgements

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