

**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-0004166
Type of inspection:	Unannounced Full Inspection
Inspection ID	MON-0019078
Lead inspector:	Catherine Vickers
Support inspector (s):	Niamh Greevy

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: 20 February 2017 09:30 To: 21 February 2017 18:00

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

Summary of Inspection findings

The centre was a detached two story house located in a residential area of Kildare. The service provided medium to long term care to five young people from the ages of 13 to 17 years. The area was well served by facilities like schools, public transport and shops. 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.

The centre was a detached two story house located in a residential area of Kildare. The service provided medium to long term care to five young people, both male and female, from the ages of 13 to 17 years upon admission. The area was well served by facilities like schools, public transport and shops. At the time of the inspection, there were 3 children and one young adult living in the centre.

During this inspection, inspectors met with or spoke to 3 children, 1 young adult,

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 children's social workers.

Overall, the staff team provided good quality care to the young people. The staff team promoted young people's attendance and attainment in their educational placements. Children's needs were regularly assessed, reviewed and updated. Child protection concerns were appropriately dealt with and notified to social work departments. Children's health needs were assessed and they had access to health and specialist services. However, improvements were required in relation to the management of medication and staff training in this

Children told inspectors that they felt safe and were well cared for in the centre. Children said they were aware of their rights and knew how to make a complaint if they wished to do so. All children had allocated social workers and they told inspectors that they had sufficient contact with their social workers. Children were clear about the plans for their care and participated in the development of these plans.

The provision of appropriate aftercare for children was not adequate. A young adult lived in the centre and there was no plan in place for the young person to transition to aftercare services.

The centre was well managed on a day-to-day basis and the management structure in place provided lines of responsibility and accountability. There was a full complement of experienced staff who had been working at the centre for some time. This provided a stable and consistent living environment for children. Risks in the centre were well managed. However, there was no risk register in place at the time of this inspection. The quality of supervision in the centre was mixed and it was not held in a timely way. There were some monitoring mechanisms in place but there was room for their further development in order to be comprehensive.

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 staff in the centre. Upon admission to the centre, children received information in relation to their rights and independent advocacy services available to them. Children told inspectors that they were aware of their rights and they demonstrated a good understanding in this regard. Staff supported children to exercise their rights during one-to-one sessions and at children's meetings. One resident of the centre was over 18 years of age and the centre manager acknowledged that this young adult did not have the opportunity to fully avail of their rights while living in a children's residential centre.

Children's privacy was respected. Children had their own bedrooms and space to store their belongings.

Children were consulted about their care and the day-to-day running of the centre. Staff encouraged children to actively participate in decision-making about their lives. Children were consulted by staff through one-to-one sessions and regular opportunity led discussions. Children told inspectors that they received support to prepare for their attendance at their child-in-care reviews and that their voices were heard. Children also said they were involved in planning at the centre, including choosing how the house was decorated and making suggestions about meal planning. Children's meetings occurred regularly within the centre and provided children with the opportunity to express their views about various aspects of their care including shopping, pocket money and bedtimes. Inspectors reviewed the minutes of these meetings and found that requests made by the children were followed up by staff.

Children had access to independent advocacy service and this was supported by the staff team. Children told inspectors that they had met with an independent advocacy service and they were aware of the supports available to them. Records showed that representatives from an independent advocacy service had visited children. Each child had two allocated keyworkers from the staff team who they could confide in and who advocated on their behalf.

Children were aware of how to make a complaint. Children told inspectors that they were clear about how to make a complaint and said that staff supported them to make a complaint if needed. Records showed that children were provided with information relating to complaints upon admission. The centre manager and staff said that there was a complaints register held at the centre. However, inspectors could not access this on the day of inspection due to difficulties with the information systems. For this reason, it was not possible for inspectors to gain an overview of the recording of all complaints that had been made by children in the previous 12 months. Inspectors reviewed children's files and found that there were two complaints made by the current residents since the previous inspection. Inspectors found that while complaints were adequately dealt with, appropriate details were not always clearly recorded in relation to each complaint including; the outcome of the complaint, satisfaction of the complainant and details of all follow up actions taken. Where children made complaints about services external to the centre, staff supported children with this process and advocated on their behalf.

Judgment: Non Compliant - Moderate

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

Admissions were effective and managed in line with policy and procedure. Admissions were managed through a central referrals committee. The centre manager said they received adequate information in relation to referrals from social workers and that the staff team had the opportunity to provide input in relation to decisions about admissions. A risk assessment was carried out prior to admissions which looked at current risks in the centre and risks associated with the potential new admission. Transition plans were put in place for each child deemed potentially suitable for admission. This was to provide children with the opportunity to become accustomed to the environment and to further determine if the placement was suitable. Children told inspectors that they received an information pack and induction upon admission to the centre. There had been two admissions to the centre in the previous 12 months and

inspectors found that these were appropriate in nature. There had also been one referral which appeared to be suitable for admission. However, during the transition phase, the mix of children was found to be inappropriate and the placement did not proceed.

Discharges from the centre were well managed. One young person was discharged from the centre in the last 12 months and this happened in a planned way.

All children had allocated social workers. Children told inspectors that they were satisfied with the frequency of social work contact. The centre manager said that social workers visited children in line with regulations and were in frequent contact with the centre. However, centre records did not clearly reflect the amount of contact children had with their social workers. Inspectors did not see evidence that social workers had reviewed children's daily logs. Social workers told inspectors that they were satisfied with the quality of care being provided in the centre, that staff were proactive in meeting children's needs and that staff kept in regular contact with them.

Child-in-care reviews for children occurred in line with regulatory requirements. Children participated in their reviews and their family members were invited to attend. Where some child-in-care reviews had recently taken place, there were no minutes from the social work department on files. However, the centre kept their own minutes of the reviews on file while awaiting these.

Not all children had up-to-date care plans on their files. Child-in-care reviews had recently taken place and the centre was still waiting for updated care plans. Care plans on files were of good quality, contained comprehensive details about the children's progress and needs and had clear and specific actions needed identified. However, care plans were not always signed by the relevant parties.

Placement plans and placement progress reports were in place for each child. Placement plans were generally of good quality and reflective of care plans. In one child's placement plan, some information recorded was not specific, for example, in relation to emotional and psychological needs and preparation for leaving care. Some placement plans were due to be updated following recent child-in-care reviews.

Placement support plans were of good quality and were regularly reviewed and updated. Placement support plans were in place for each child and guided staff to manage children's behaviour. They included individual crisis management plans, individual absence management plans and incorporated situation assessments when a risk was identified..

Children were supported to maintain positive relationships with their families and peers. Staff facilitated access and provided transport to and from family visits. Some children said that they had a say in how much family access they participated in, and this was also reflected in care plans. Staff endeavoured to maintain regular contact with family members. Staff told inspectors family members were encouraged to visit the centre. Children were encouraged and supported to maintain positive relationships with peers. Children told inspectors that their friends could visit them at the centre. Regular one-to-one sessions were carried out with children regarding friendships and relationships. Children were encouraged to develop relationships through participation in activities in

the local community.

Aftercare planning for young people over the age of 16 was insufficient. Three young people residing in the centre were over the age of 16. One young adult was residing in the centre and this had been identified at the time of the last inspection. The centre manager and staff expressed concern about the delays in the provision of suitable aftercare services and this matter had been escalated to senior management. Two other young people were over the age of 16. One of these young people had been referred to aftercare services and had been allocated an aftercare worker. One young person had not yet been referred to aftercare services. Records showed that staff had been in contact with the social work department to request this.

Children were supported by staff to gain independence skills. There was a proactive approach in the centre in supporting the children around budgeting and cooking. Inspectors reviewed records of one-to-one work completed with the young people and found that there was a focus on developing skills for independent living. However, children were not routinely involved in grocery shopping, which would be a beneficial experience for them going into the future.

Children were referred to appropriate external services according to their needs, including mental health and therapeutic services. Records showed that staff encouraged and facilitated children to attend their appointments with external professionals.

The majority of centre records were of good quality but there were gaps in some specific records. Children's files were held securely and there were appropriate systems in place in relation to archiving. However, there were some gaps in information found, for example in relation to centre logs and the recording of social work visits. Gaps in some records meant that the level of work that was being carried out with children was not always clearly reflected. Some records were not easily accessible on the day of inspection. The centre manager said that this was due to various current difficulties with the information systems at the centre.

Judgment: Non Compliant - Moderate

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 in the centre. Staff members encouraged children to participate in their hobbies, to try new activities and expand their interests. Children told inspectors about activities they participated in, such as piano lessons, dancing and cycling. During the inspection, inspectors observed children being taken as a group on an outing to a leisure facility by staff. Staff members spoke positively about children's talents and capabilities.

Children received a basic rate of pocket money and received a sufficient allowance for clothing. Inspectors observed that children were well dressed on the day of inspection. Children said they were facilitated to buy clothes in line with their tastes and preferences.

Food in the centre was nutritious and varied. There was a fulltime cook and inspectors observed healthy and appetising meals available in the centre. Children had the opportunity to prepare meals if they wished and inspectors observed some children doing so. Some children told inspectors that they could put forward suggestions for meal planning but that they usually chose not to as they liked the meals provided. Inspectors shared a meal with the staff and children and observed a relaxed and sociable atmosphere.

Achievements and special occasions, such as birthdays and Christmas were acknowledged and celebrated. One child who was doing well at school was going to be brought to a concert as a treat. A leaving party was held at the centre for a resident who was recently discharged and children said they enjoyed this.

Children were emotionally supported by staff on a day-to-day basis and through regular key working and one-to-one sessions. Children spoke positively to inspectors about staff and said they enjoyed living in the centre. Some children said that they felt looked after and kept safe by staff and that it felt like living in a family home. Inspectors observed that staff treated children in a respectful and caring manner.

The staff team promoted diversity and anti-discriminatory practice. Records showed that one-to-one work was carried out with children to help promote their identity. Staff supported children regarding their relationships and sexual health development. Staff participated in additional cultural training in order to aid their practice in working with and supporting children from different cultural backgrounds.

An effective model of behaviour management was in place, in which staff were trained in. There were plans in place for each child to guide staff on how to respond to any event or crisis that may occur, these plans included individual crisis management plans and individual absence management plans. Individual crisis management plans were signed and reviewed in a timely way. There were no issues in relation to behaviour that challenged at the centre at the time of this inspection. The main behavioural issues that had been dealt with in recent months were in relation to children missing from care and non-school attendance. When there were incidents of difficult behaviour, these were dealt with appropriately by staff and were followed by one-to-one work with children.

Children had good quality absence management plans in place. The staff team were aware of the national policy for children missing from care. There were 40 incidents of children being absent without authority and missing from care since the last inspection and the majority of these were in relation to two residents. The number of these incidents had significantly reduced in the last number of months. Staff responded to these incidents and reported children to An Garda Síochána (police) as children missing from care as appropriate. Strategy meetings were held when necessary and were effective in nature. The risks associated with being missing from care were discussed directly with children and at professionals meetings.

Sanctions were used appropriately. Inspectors found that house rules were clearly established with children during the admissions process. A consequences log was held at the centre and this recorded details of consequences used in relation to children's behaviour. Inspectors reviewed records of sanctions and found that they were used appropriately and proportionately. There were some restrictive practices used in the centre such as locking the kitchen door at night time. Restrictive practices were risk assessed and reviewed. No physical restraints were currently used in the centre.

Judgment: Compliant

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 effective systems in place to safeguard children and protect them from abuse. The majority of staff had up-to-date training in Children First National Guidance for the Protection and Welfare of Children (2011). Inspectors interviewed staff members who demonstrated a good knowledge about their role in safeguarding children. The potential risks associated with a young adult living in a children's residential centre had been assessed with appropriate control measures put in place.

Children said they felt safe living at the centre and that they would go to a staff member if they had a concern about something. Staff implemented safe care practices and there was a good level of supervision of children. Keyworking and one-to-one sessions were carried out with children in relation to keeping themselves safe, for example, in relation to keeping safe while in and outside of the centre, road safety and bullying.

There was a system in place to report child protection concerns to social work departments and to make notifications to other professionals. The centre manager was the designated liaison person as per Children First (2011) and was aware of their responsibilities in relation to child protection. The centre manager and staff said that while there was a designated liaison person in the centre, all staff members were capable and confident to deal with child protection issues that arose. Child protection concerns were recorded in children's files and a child protection log. While the outcome of child protection concerns were recorded in children's files, the outcome was not always reflected in the child protection log. Recording the outcome of all child protection concerns in the child protection log would ensure that this information was more easily accessible. There had been a change of practice in the centre and child protection notifications were now referred using the standard reporting form in place of significant event forms. There were six incidents referred as child protection concerns in the previous 12 months. Child protection concerns were adequately followed up by the centre and social workers, and they were all concluded by the time of this inspection.

Staff members who were interviewed by inspectors demonstrated a good awareness of

protected disclosure policy.

Judgment: 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 centre provided a spacious and homely environment and there was adequate private and communal space for children to access. On a walk around the centre, inspectors found it was well maintained and in good condition. The centre was appropriately lit, heated and ventilated with adequate furnishings. Children had their own bedrooms which were decorated to their tastes and preferences. There was plenty of space in the house to provide children with privacy and to have a place to meet with their visitors.

The centre had a safety statement and which was up-to-date and centre specific. Health and safety risk assessments were of good quality and were rated, reviewed and signed by the centre manager and interim service manager. Two staff members were allocated the roles of Health and Safety Officers. The centre manager said that they carried out regular health and safety checks and ensured that any issues identified were rectified. However, this process was not clearly recorded.

Maintenance of the centre was generally good with timely actions taken in relation to issues identified. A maintenance log was held at the centre and this recorded maintenance issues identified, actions taken to rectify the issue and if the issue was resolved. However, there were some issues outlined in the maintenance log where the resolution was not clearly reflected. The interim service manager had recently reviewed the maintenance log as part of their regular centre systems checks and made good recommendations in relation to further improving it, for example, including copies of emails regarding maintenance issues.

There were effective fire safety systems in place in the centre. There was a fire safety certificate and verification that annual maintenance of the fire equipment was completed. Inspectors found that fire fighting equipment was in place and appropriately maintained. There was adequate means of escape and prominently displayed signage and procedures for safe evacuation in the event of a fire. Fire drills were completed twice per year and if there was a new admission to the centre. Staff and children were involved in these drills and information about who participated was recorded. The majority of staff had recently attended fire safety training. Inspectors reviewed the fire register which outlined that daily, weekly and monthly checks of fire equipment were carried out and signed by staff. Cleaning materials and chemicals were appropriately and safely stored.

There was no formal emergency plan available in the centre but there were plans in

place for individual children in the event of an emergency. However, emergency contacts were not included in these.

The centre had two vehicles which were both less than 2 years old. Both were appropriately taxed and insured. Copies of staff drivers licences were kept on file but some of these needed to be updated.

Judgment: 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

Education and training was valued at the centre and staff encouraged and supported children to attend their educational placements. The majority of children had fulltime educational placements and they were supported by staff to attend on an ongoing basis.

Children’s educational needs were assessed and appropriate education plans were in place. There were copies of school reports on children's files. Educational achievements were acknowledged and celebrated. Participation in state exams was encouraged and staff were ambitious for children to go on to third level education. Staff had regular communication with educational facilities and regularly attended meetings with schools and social workers. Social workers said that staff in the centre were proactive in supporting school attendance and helping to secure educational placements for children.

Reviews of attendance at educational placements had been carried out with appropriate actions plans put in place. Where issues with poor attendance arose, staff were proactive in addressing these. Ongoing individual work was carried out with children in order to encourage and promote their engagement in full-time education. Where children were struggling with subjects, the centre organised a programme of individual home tuition. When children were not engaged in formal education, staff encouraged and supported them to engage in home study or to attend the library while an appropriate educational placement was sought. However, children would not always agree to engage in this.

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 needs were assessed and met. They had timely access to health services and specialist services as required. Children had medical cards and they received medical check ups upon their admission to the centre.

Staff were proactive in supporting children to attend all necessary medical appointments. Children's attended general practitioner, dental and follow up medical appointments as required.

Medical records were stored securely in children's files and care plans, placement plans and residential reports provided an overview of children's physical and mental health needs. There were records of immunisations on some but not all children's files.

A healthy lifestyle was promoted by staff in the centre on day-to-day basis. Children were encouraged to have a healthy diet and to participate in exercise and physical activities. Staff members carried out individual work with children in relation to health and well being and sexual health.

Medication management practices were not effective. There were interim medication management guidelines in the centre and these were used to guide practice while awaiting the roll out of a new national policy on medication management. Inspectors reviewed records of medication administration and found that not all medications had a record of being administered. There were also gaps in the recording of whether children had received their medication or not. Inspectors queried a recent gap in the administration record for a child and staff said that the child had received the medication. However, this was not recorded. There were some inconsistencies in the count versus the actual number of medication held. In addition, not all medications were appropriately labelled. The centre manager was recently trained in the safe administration of medication, but the staff team were not trained. The level of oversight of medication management in the centre was ineffective as the centre manager had not identified these deficits in medication management.

Judgment: Non Compliant - Moderate

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 statement of purpose. However, the service was operating outside of their statement of purpose at the time of the inspection as there was a young adult over the age of 18 residing in the centre. The statement of purpose clearly defined the purpose and function of the centre which could cater for five young people from 13 to 17 years on admission. It outlined that the model of care used was based on relationship building with young people.

Judgment: Non Compliant - Moderate

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

There was a governance structure in place with clear lines of responsibility and accountability. However, as there was no system in place of allocating staff to the roles of shift leaders, there were occasions where there was no identified person in charge on duty. There was no formal on-call system in place to provide support to the staff outside of office hours. Staff said managers were informally available to staff by telephone outside of their working hours.

There were some monitoring and oversight systems by the centre manager and external manager in place, but, improvements were required. The centre manager reviewed day-to-day practices in the centre and the majority of practices were of good quality. The Interim Services Manager regularly visited the centre and had oversight of care practices and record-keeping. Systems checks carried out by the Interim Service Manager at the centre included reviews of centre records and observations of staff practices such as team meetings and handover meetings. The Interim Services Manager recorded comments on their findings and made recommendations for improvement. Several of the issues identified by inspectors on this inspection were identified by the Interim Service Manager in the systems check, for example, in relation to the maintenance log and supervision records. However, some practice issues were not identified by any of the monitoring systems, for example, gaps found in relation to medication management and effective communication of learnings. There were no formal audits routinely carried out in order to identify gaps, assess practice and drive improvement in the centre.

Overall, risks were well managed in the centre. There was a new risk management policy but this had not yet been implemented. The centre did not have a risk register

and the centre manager told inspectors that there was a plan in place to introduce this. Risk assessments were carried out in relation to risks associated with individual children and young people as well as environmental risks. Each risk was graded in relation to the likelihood and impact of the risk and there were existing and additional control measures in place.

There were appropriate systems in place to record and report significant event notifications (SEN's). All significant events were appropriately notified and follow up work was carried out as appropriate. The centre manager told inspectors that she reviewed all significant events. Inspectors reviewed a sample of significant events and found that the centre manager appropriately made recommendations where required. Some specific behavioural issues such as school attendance and absences without permission from the centre were reviewed and trended. However, it was not clear how learning from these analyses were shared with the staff team. Significant events at the centre were occasionally reviewed at a regional level by a regional significant event review group.

There were systems in place for communication in the centre but some improvements were required. Staff were updated in relation to the children at handover meetings, a communications book and children's daily logs. Inspectors reviewed the minutes of team meetings and found that they were regular and well attended by staff. Staff said they felt there was good discussion at these meetings and they felt comfortable putting their opinions forward. However, inspectors found that issues relating to risk, safeguarding, significant events and relevant feedback from management meetings were not regularly discussed or reviewed at the team meetings. Not all minutes outlined the agenda for discussion or dates for actions to be completed, despite the template providing the opportunity for this.

There were adequate financial management systems in place and these were generally well organised. Inspectors viewed the systems used to record spending both from petty cash and through procurement cards. The deputy manager had oversight of financial records. Inspectors found that there were sufficient financial resources to ensure the effective delivery of services. Inspectors reviewed minutes of meetings which were held to review financial systems at the centre. These meetings provided a useful forum to identify and rectify any gaps in the recording of information.

The centre maintained a register of children who lived in the centre. This was accurate and up-to-date and in line with regulations.

There was a full complement of experienced staff who had worked at the centre for some time. The team was well established and provided consistency of care and a stable environment for children. Inspectors reviewed the staff rota and found that there was a sufficient number of staff with an appropriate skills mix on shift on a daily basis. On occasions where agency staff were required, inspectors found that consistency was provided by ensuring the same relief staff provided this cover. An induction process was in place, but there had been no new staff employed since the last inspection.

Inspectors reviewed a sample of staff files and found that they were well maintained and stored safely. Staff files included identification, evidence of qualification and training, Garda Vetting and references.

Supervision did not occur in line with the centre's policy. The centre manager and deputy centre manager provided supervision to the staff team, but this was not always held within the specified timeframes. There were gaps in supervision taking place, the reasons for delays were not clearly recorded and this had been identified by the interim services manager. The centre manager acknowledged this and said that the frequency of supervision would be improved. The quality of supervision records varied, some records reviewed were of good quality while others were unsigned and contained vague actions with no clear timelines for completion.

There were some gaps in staff's mandatory training. The majority of staff had been trained in Children First (2011), fire safety and manual handling. There were gaps in staff training in first aid and only the centre manager had been trained in the safe administration of medication. A training needs analysis was carried out to inform the training programme in the centre. The centre manager said that two staff members had taken on the role of co-ordinating training. Staff received additional training in order to enhance their skill set in areas such as sexualised behaviour, cultural awareness and strengths based strategies for dealing with challenging behaviour.

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

Monitoring systems in place to improve the quality and effectiveness of services, outcomes for children, and to meet standards. The centre had an assigned monitoring officer who had centre had prepared a monitoring report following a visit to the centre in September 2016. The monitoring officer had made one recommendation in relation to staffing requiring training in medication management, however this action remained outstanding.

Judgment: Compliant

Acknowledgements

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