

**Health Information and Quality Authority  
Regulation Directorate**

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



<b>Type of centre:</b>	Children's Residential Centre
<b>Service Area:</b>	CFA DML CRC
<b>Centre ID:</b>	OSV-0004167
<b>Type of inspection:</b>	Unannounced Full Inspection
<b>Inspection ID</b>	MON-0018930
<b>Lead inspector:</b>	Grace Lynam
<b>Support inspector (s):</b>	Erin Byrne

## 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:
01 March 2017 09:00	01 March 2017 18:00
02 March 2017 09:00	02 March 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.

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

## Summary of Inspection findings

The centre is a statutory main stream residential children's centre in the Dublin Mid Leinster region. The centre provides medium to long term care for up to five young people of mixed gender, between the ages of 13 and 17 on admission. At the time of the inspection, there were 4 children living in the centre.

During this inspection, inspectors met with or spoke to 4 children, 1 parent, 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 three social worker(s), the Tusla monitoring officer and the Interim Service Manager.

The last inspection of this centre took place in March 2016 when significant risks were identified in relation to planning for children young people ( see [www.hiqa.ie](http://www.hiqa.ie) Children's Residential Centre 4167). Other areas requiring improvement included the recording of

responses to requests by young people, responses to child protection concerns and the development of effective governance and quality monitoring systems. On this inspection planning for children showed some improvement though not all children had up-to-date care plans on file that reflected their current circumstances.

Children told inspectors they liked living in the centre and there was nothing about it they would choose to change. They said they liked the staff team and got on well with them. Children said they felt safe and that there were staff members they could go to if they needed to discuss anything. Children knew their views were valued because they were asked their opinions and were confident they would be listened to and acted upon.

Children were well cared for in the centre. They received the emotional and physical care they required in a relaxed and caring atmosphere created by the staff team. Children's rights were respected and promoted and they were treated with respect by the staff. Children's emotional wellbeing was given particular attention and the staff spent time with the children discussing matters of importance to them.

Children were safe in the centre although the local environment posed some risks. There were a number of safeguarding measures in place to ensure children's safety and practice in relation to safeguarding and child protection was good.

The staff team were experienced and committed. They were well informed about the individual needs and interests of each of the children and provided good quality care to the children. The staff team were positive and respectful in their interactions with the young people and encouraged them to pursue their individual interests and to reach their full potential.

Governance systems were continuing to improve. The centre manager, supported by the deputy manager, provided clear leadership and guidance to the staff team. External oversight of the quality of care provision had improved through the interim service manager systems checks and observations of practice. Further improvement was required.

Not all children had up-to-date care plans on file that reflected their current circumstances and whilst this did not impact on their care it is a requirement of the regulations. Medication management and staff supervision practice required improvement. The register of children did not contain all the information required by regulation and files did not all contain full medical records for the children.

## 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. Inspectors observed both staff and children interacting respectfully. There was information on rights available to the children and they were aware of their rights.

Children were consulted and encouraged to participate in decision making about their lives and in the running of the centre. Weekly meetings were held with them where they could raise issues for discussion and make requests. Children told inspectors they attended meetings where they presented their views and requests and that these were fully discussed. They were satisfied with the level of consultation with them regarding the daily running of the centre. Inspectors viewed records of the weekly meetings and found that the children had requested wifi and had discussed plans for the summer holidays. Children told inspectors their request had been acted on and the wifi had been provided for them. Staff also encouraged the children to express their food preferences at these meetings so that the weekly menus could be planned. Children were consulted about meal choices, decoration of the house and their rooms and activities they would like to be involved in. Inspectors found that social workers, managers and the staff team consulted with children about decisions that affect their lives. Social workers visited the centre to meet with the children and records read by inspectors reflected the efforts of staff to elicit the views and opinions of the children.

Children had their own bedrooms and their right to privacy was respected and promoted. The staff team encouraged the children to respect each others private space by not going into each others bedrooms without consent and by managing visits to the house to ensure the children had privacy with their visitors.

Staff told inspectors that children could access the information recorded in their files. They said they encouraged the children to view their daily logs. However, whether or not the children did this was not recorded.

Whilst there had been only one complaint made since the previous inspection it had

been appropriately addressed to the satisfaction of the young person who had made the complaint. The young person confirmed this. Young people knew they could make a complaint but told inspectors they had nothing to complain about. There were plans for a national organisation for empowering young people in care: EPIC, to visit the centre to inform children about the services they provided. Children told inspectors they had heard about this organisation and knew they could access their services.

**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**

Not all placements were suitable to meet the needs of the children. Admissions were managed effectively, but not all were appropriate. The children in the centre at the time of this inspection were under 17 years of age. There had been two new admissions to the centre since the previous inspection. When children were admitted to the centre the national protocol was followed. This involved referral from a social worker for a residential place, risk assessments in relation to the fit between the children currently in the centre and those requiring a place, discussions by a central referrals committee and a transition plan involving visits to the centre for the child. Whilst the appropriate processes had been followed in relation to the admissions, risks became evident once the placement was made and it was clear that the mix of children was not appropriate for all the children in the centre. Simultaneously, other circumstances presented which resulted in one child being discharged for safety reasons.

Children had allocated social workers in line with regulations. In the past not all children had been visited by their social workers in line with the regulations. This issue had been identified and addressed by the centre manager. Inspectors observed that a social worker visited the centre during the course of the inspection and read the child's files. Children's files reviewed by inspectors reflected that the social workers assigned to the children currently living in the centre were visiting the children in excess of the requirements of the regulations.

Some records provided prior to children's admissions were incomplete or out of date.

For example, care plans were not always up-to-date and full medical records were not always provided to the centre. However, this did not impact adversely on the care of the children as the staff team were basing their care of the children on the current circumstances of the child and on the up-to-date information available.

The service did not fulfil all of its statutory requirements. Not all children had up-to-date care plans on file that accurately reflected important changes in their circumstances. Child in care reviews did not always take place in line with the timeframes set by the regulations. When they did occur the updated care plans resulting from these meetings were not always sent to the centre by the relevant social work departments. Care staff attended these meetings and amended the child's placement plan to ensure the care they provided was meeting the child's current needs. Children could attend care planning meetings to express their views but some children chose not to attend these meetings. Their views were represented at these meetings by the staff who had discussed the child's opinions with them prior to the meeting. In addition, children could complete forms in which their views and preferences were expressed for the review meetings.

Children maintained positive relationships with relatives and friends. Children arranged their own contact with their families where appropriate and this was reflected in their care and placement plans. Some parents visited their children in the centre. Inspectors observed that friends called to the centre and were welcomed.

Children received the emotional and physical care they required. Children presented as comfortable and content in the centre. Inspectors read files which reflected many individual conversations between the staff team and the children on various topics relevant to them.

Discharges were appropriate and were planned. Previous inspections had identified that there were young adults over the age of 18 years still living in the centre. There had been three discharges since the last inspection which included the discharge of these adults and a child. Whilst this discharge had not been foreseen in advance, it was planned as a response to the changed circumstances of the child.

Preparation for leaving care was not sufficient. Not all children who required an aftercare worker had been assigned one to attend to the planning and preparation for their leaving care. Two of the children were over 16 years, but only one had an allocated aftercare worker. However, the centre manager was aware this was outstanding and was following this up with the child's social worker to request that a referral for an aftercare worker would be made.

**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 and they told inspectors they were happy living in the centre. Inspectors observed that staff were respectful and positive in their interactions with the children. Care practices were considerate of cultural and individual needs and respected individual differences, religious and ethnic identity. Children told inspectors they could and would speak with staff if they needed to talk. Children were given opportunities to develop their interests such as playing soccer and attending the gym.

Children were encouraged to eat a healthy diet and healthy food choices were available in sufficient quantities. Inspectors observed mealtimes with children and staff that were sociable events. Meals were being prepared during the inspection that were healthy and appetising. Children told inspectors that if they did not like the meal choice available to them they put their requests for particular food items on the shopping list. These items would be purchased and they would cook their own meals sometimes, which were happy to do.

Individual differences were respected. Children were encouraged by the staff team to attend religious services. Food preferences relating to ethnicity were facilitated and children sometimes chose to cook for themselves.

The emotional welfare of the children was given particular attention. Keyworkers were assigned to each child and inspectors read files which reflected that individual conversations were conducted with children, some initiated by the children themselves, about issues important to them that they needed to air and discuss.

Generally, behaviour was managed through a system of sanctions and rewards which achieved mixed results with the children. Inspectors read the consequences log which detailed the positive and negative consequences applied for various aspects of the children's behaviour. Of 16 entries for 2017 to date, 11 were negative consequences. These included withholding of small amounts of pocket money or refusing lifts. Some children told inspectors the amount deducted did not make much of a difference to them so its effectiveness in deterring the behaviour in the future was limited. Positive consequences included outings and rewards that could be gained for full attendance at school for a specific period, for example.

Incidents of children going missing from care were well managed. There had been 69 incidents of children missing in care since the last inspection. The majority of these (54) related to one child who was no longer in the centre. All incidents of children being absent were appropriately reported and all actions were taken to ensure the safety of the children involved. Parents were kept informed, as appropriate, throughout the process and were advised when the children returned to the centre. Notifications were forwarded to An Garda Síochána as appropriate and consultation occurred to ensure the safe return of the child to the centre.

Physical restraint was not used in the centre and there were no restrictive practices used in the management of the children's behaviour.

**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**

Child protection concerns were appropriately managed. Whilst there was no policy on child protection inspectors found that attention was paid to safeguarding the children. Children told inspectors they felt safe in the centre and that they could talk to the staff team. Safeguarding and child protection practices were good and staff members appropriately reported and recorded concerns. The staff team implemented safety plans, in consultation with social workers, to mitigate against all concerns as they arose.

Concerns of a child protection nature were reported to the relevant social work department as required by Children First: National Guidance for the Protection and Welfare of Children (Children First (2011)). The staff team was also implementing a recently distributed national interim guidance note on child protection. Staff were familiar with the reporting procedures for child protection concerns. They recognised child protection issues and appropriately reported concerns about children. Inspectors viewed the child protection logs and found that there were eight reports of child protection concerns in 2016 and one child protection concern in 2017. These concerns had been appropriately investigated by social workers and all actions had been taken to ensure the safety of the children. The centre log of child protection concerns was fully completed and up-to-date and reflected the outcomes for the investigations that had been completed. One child protection report was still being investigated by the relevant social worker. Social workers told inspectors that all relevant information about the children was relayed to them. They received reports in relation to significant events including child protection concerns and were satisfied that the children were well cared for.

Children had their own mobile telephones and there were arrangements in place to ensure they received a monthly allowance of credit. This ensured they could make and take personal and private calls.

Staff told inspectors they were familiar with the protected disclosures policy and said that if they had concerns about the care practice of a colleague they would feel confident about reporting these.

**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**

Health and safety was promoted and the building was adequate for its purpose. The centre was fit for purpose and its design and layout was in line with the statement of purpose. The premises was clean, generally well maintained and had many homely touches such as soft furnishings in the sitting rooms and artwork created by staff and children on the walls. However, some of the shared living spaces would have benefitted from painting and some hallway carpets were worn in places. The toilets and bathrooms, while sufficient, required refurbishment.

Children had their own bedrooms and they had access to laundry and cooking facilities. There were sufficient communal and private spaces for children so that family and friends could visit. Inspectors noted that friends visited the centre during the inspection and parents told inspectors they were welcomed to the centre on visits.

There was ample recreational space for the children including a garden for playing football, a vegetable patch and an enclosed outdoor seating area for relaxation. Children were consulted in the decoration of their bedrooms and inspectors heard conversations between staff and children about how they would facilitate their preferences.

Maintenance repairs to the centre were not always dealt with promptly and the records of maintenance requests and responses was not up-to-date. The interim service manager had oversight of the log and had recommended that a resolution was required for the outstanding maintenance issues. The centre manager and the deputy manager were aware of all the outstanding maintenance issues and were taking action to ensure they were repaired.

There was an up-to-date safety statement in place which was site specific and which outlined the responsibilities of the centre manager and the staff team in ensuring the safety, health and welfare of all in the centre.

Arrangements in place against the risk of fire were adequate. The centre maintained a fire safety register and fire fighting equipment was accessible and regularly serviced. There were daily, weekly and monthly checks of equipment and alarms and records were kept on fire drills. Inspectors read the fire drill log and found that all staff had taken part in a fire drill. There had been three fire drills in the past 12 months. However, one drill had taken 15 minutes to complete and the centre manager was not aware of this. In addition, the Interim Service Manager who had oversight of the register had not queried this. Fire training had also taken place in December 2016 in which evacuation procedures were rehearsed by staff and children. The centre had a fire certificate in place. However, the assembly point was not noted in the evacuation procedure but children knew where to assemble as they had taken part in drills and training.

The centre had a vehicle which was roadworthy and was insured.

The centre was adequately insured.

**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's educational needs were assessed and every effort was made to meet these needs. Education was valued by the staff team and children were encouraged to reach their full educational potential. Efforts were made to ensure that children did not have to move schools when they first came to live in the centre and two of the children had been maintained in their original schools.

Three of the children were attending school and particular efforts were being made to secure an appropriate educational or training placement for the fourth child. Inspectors read the children's files and found that social workers and staff liaised appropriately with school personnel in relation to the children's education. Children's files contained school reports and examination results. The staff team facilitated and encouraged the children to have a routine around school work and study. Inspectors observed staff assisting one child with reading and heard their efforts to encourage a child to maintain a good daily routine while not at school. Staff and social workers maintained contact with schools to ensure that children got the best out of their school placements.

**Judgment:** Substantially 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 assessed and met and a healthy lifestyle was promoted. Inspectors read children's files and found that children had access to general medical practitioner services and they received medical, dental, ophthalmic and other specialist care as required. Social workers and parents were appropriately notified of medical emergencies. Keyworkers carried out individual sessions with children in order to give advice and encourage healthy choices. Children were encouraged and facilitated to take part in regular, healthy exercise. Inspectors noted that the deputy manager was sourcing a smoking cessation programme to assist the staff in supporting the children who smoked to give up the habit.

Practice in relation to medication management required improvement. One staff member was trained in the safe administration of medication. There was no policy in relation to the safe administration, storage and disposal of medication. However, an interim medication management guidance procedure was in place to guide staff in medication management. There were no children on prescribed daily medications but some had taken over-the-counter medications or had been prescribed medication for once-off diagnosed ailments. Records were maintained on the administration of medication, but these were not fully completed in all cases. Inspectors sampled medication administration records and found that the instructions for taking each medication were not always written on the medication administration sheet thus there was potential for errors. Records did not always demonstrate that a course of medication, for example, antibiotics, was completed as instructed. Medication was stored securely in a locked cabinet but the medication was not always properly labelled.

Comprehensive medical records, including immunisation records, were not maintained for all the children but some of these had not been available. The efforts of the staff team to locate the information was recorded in the children's files. Some children's files did not reflect whether medical examinations had been carried out prior to admission to the centre or whether re-testing had been considered to ascertain the immunisation status of the children without their immunisation records.

**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 written statement of purpose and function which accurately described the centre's purpose and how care would be provided. The statement listed the key policies in place to guide practice and outlined that care could be provided for up to five children between the ages of 13 and 17 years of age. The statement further outlined that the care provided would be characterised by the quality of the relationships developed by staff with the children in a safe, caring environment. Inspectors observed that the care provided in the centre and the practices observed by the staff team were in line with the statement of purpose and function.

**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**

There were effective management structures in place to ensure clear lines of accountability and authority. The centre was managed by an experienced manager who was supported by a deputy manager. The staff and the children were clear about the roles and responsibilities of the manager and his deputy. Staff were knowledgeable about the individual needs of each of the children in the centre and inspectors observed them fulfilling their responsibilities during the course of the inspection.

There were some effective management systems in place. The centre manager provided clear guidance to the staff team and inspectors observed staff seeking direction and guidance during the inspection. The deputy manager supported the centre manager with administrative tasks and in managing the care provided by the staff team. There were effective communication systems in place including handover meetings, diary, use of shift planners and a communications book. Inspectors observed a handover meeting and found that the centre manager provided good direction and guidance to the staff team both in relation to the care of the children and practice issues. Staff were assigned to carry out duties so that the day-to-day needs of each child were met.

Risks were well managed. There was a risk register maintained which had been reviewed in January. Risks were described and appropriate control measures were in place to mitigate these risks. Local risks, such as the risk of aggression or acting out behaviour by the children was identified and managed within the centre through clear instructions guiding staff about how to manage this behaviour. When risks were reviewed if additional controls were identified they were put in place. Regional risks that could not be managed locally- such as some of the risks posed to children through unauthorised absences - were escalated appropriately and controls were put in place by the Regional Manager to address these.

There were good financial management systems in place that ensured accountability in relation to expenditure in the centre. Inspectors found that the systems were stringently followed and there was evidence of external oversight of expenditure by the interim services manager. The impact of this was that children were able to get what they needed in a timely manner.

Some aspects of external oversight of practice were good. Inspectors reviewed a sample of the centre's records which showed external oversight by the Interim Services Manager. The Interim Services Manager told inspectors that she visited the centre regularly to carry out system checks. These included meeting with the children, observing care practice and reading children's files. Inspectors reviewed the records of the system checks and found that the interim service manager observed practice, spoke with children and reviewed the centre's records to ensure quality of care. When issues

were identified, such as staff not fully completing the independent living section of the placement support plans, clear instruction was given by the Interim Services Manager to the centre manager and the deputy manager identifying what needed to be done to rectify the deficit.

The external oversight of other areas of practice was developing and required further improvement. Not all deficits in record keeping had been identified by the systems checks carried out by the Interim Services Manager. The incomplete recording of medication administration, the deficit in regard to regularity of supervision and the gaps in staff records had not been identified.

There was a register of children maintained in the centre but it did not contain all the information required by the regulations. Inspectors found that it did not contain the admission information for one child or the discharge details for another.

There was a system in place for the notification of significant events which were recorded and reported to the appropriate personnel. Inspectors spoke with social workers and the monitoring officer who confirmed receipt of these notifications. Significant events could be positive or negative depending on the individual circumstances. Appropriate actions were taken to address all significant events including safety planning, strategy meetings and individual follow-up sessions with the children after the events. Inspectors reviewed a sample of records of significant events and found that they were well recorded and cross-referenced to the original event to ensure the record was complete for each event. Positive significant events included conversations with children about particular issues or their achievements being acknowledged.

The centre had adequate numbers of experienced staff to carry out its function. However, seven staff, whilst experienced in social care, did not hold formal qualifications. The staff roster reflected that staff on duty had a good skill mix. Staff files were securely stored. Inspectors reviewed a sample of staff files and found that appropriate An Garda Síochána (police) vetting and references were contained in the files. A recent governance report viewed by inspectors reflected that all staff were vetted by An Garda Síochána. However, evidence of professional qualifications and attendance at training events was not held on all staff files sampled. This deficit was brought to the attention of the Deputy Manager during the inspection.

The quality of supervision was good but formal supervision did not always occur in line with the policy. The Centre Manager and the deputy manager provided supervision to the staff team. The Centre Manager told inspectors that they had received training in providing formal supervision but there was no record of this. Inspectors sampled the staff supervision files and found that children's needs were discussed and actions were decided upon to ensure these needs were addressed and met. Subsequent supervision sessions reflected progress with the tasks agreed on. Staff told inspectors that formal supervision was good and that their supervision supported them in their work with the children. In addition, staff said that the Centre Manager and the Deputy Manager were available for informal supervision. However, supervision was not occurring in line with the regularity required by the supervision policy. Inspectors sampled supervision files and found gaps of up to five months between supervision sessions in two of the files sampled. The Centre Manager and the Deputy Manager were aware of this deficit and were discussing how to address the need for more regular supervision.

Training and development required improvement. Training needs were identified with each staff member in supervision and some training was provided. A training needs analysis had been conducted in relation to some training requirements but it was not comprehensive. There was some evidence of ongoing staff development but this required further work. This had been identified by the interim services manager in a recent supervision session with the Centre Manager and had been identified as an action requiring follow up. All staff had been trained in children protection and welfare procedures but two staff required a refresher. A recent governance report for the centre reviewed by inspectors reflected that staff had received training in fire safety, manual handling, occupational first aid and a therapeutic intervention model of behaviour management. The majority of staff had also received training in an approach to children which supported young people to take responsibility for their behaviour and to develop good coping mechanisms and it was clear to inspectors from their observations that this training had been integrated into practice by the staff team. However, staff had not received training in dignity at work, finance, the policy and procedure for managing complaints against staff, medication management

Files were generally well organised to facilitate management and accountability, but inspectors found some documents that were misfiled. In reviewing a sample of the children's files inspectors found that, in some cases, there was managerial oversight of recording by the centre manager and the interim services manager. However, there were some records that were not accurately completed. This was brought to the attention of the centre manager who told inspectors that he had identified this deficit through his own review of records and was working to address it with the appropriate staff members.

**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**

There were monitoring systems in place to ensure compliance with regulations, standards and best practice. The centre had a Tusla monitoring officer assigned to it and a visit had been carried out in July 2016. The report of that monitoring visit had identified deficits in the quality of Placement Plans, fire safety training for some staff and the need to update the centre's statement of purpose and function so that it properly reflected the care provided. The current monitoring officer for the centre told inspectors that he was advised of all significant events and had been in contact with staff regarding these. He had recently carried out an introductory visit but had not carried out a full monitoring inspection.

**Judgment:** Compliant



## **Acknowledgements**

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