



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

# Report of a Children's Residential Centre

Name of provider:	The Child and Family Agency
Tusla Region:	Dublin North East
Type of inspection:	Focused
Date of inspection:	08 and 09 July 2020
Centre ID:	OSV 004171
Fieldwork ID	MON 0029904

## About the centre

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

The centre is based in a two-storey detached building in a housing estate in the Dublin North East region. It has a small garden to the rear and is close to amenities such as schools, shops, churches and has access to public transport links. The centre provided a residential based support service for pregnant teenagers and young people up the age of 18 with their babies. A residential respite option was available for young people up to the age of 21 and their babies. In addition, an interim placement can be provided for a period of 16 weeks for young people after the birth of their child if they are over 18, but required a support service. The service has capacity for up to four young people and their children, three on a full-time basis.

At the time of the inspection, there were three young people and three infants (who were not in the care of the State) living in the centre.

Number of young people on the date of inspection:	3
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To prepare for this inspection the inspector or inspectors reviewed all information about this centre. This included any previous inspection findings and information received since the last inspection.

As part of our inspection, where possible, we:

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

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

### **1. Capacity and capability of the service:**

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

### **2. Quality and safety of the service:**

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

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

**This inspection was carried out during the following times:**

Date	Times of inspection	Inspector	Role
8 July 2020	9am – 4pm	Una Coloe	Inspector
9 July 2020	9am – 4pm	Una Coloe	Inspector

## Views of children who use the service

Young people had mixed views about living in the centre. All of the young people said there were staff members on the team that they felt comfortable talking too. They knew who the managers of the service were and said they could speak to a member of the management team if they needed to. They said they understood their care and placement plans and had attended child-in-care reviews. The young people understood the programme of care and keyworking.

Some young people said they liked the approach, the help they received with parenting and independent living skills. Other young people felt that the work completed was staff led and they did not want the parenting support, or the process of scoring their progress.

The young people understood the reason for their placement but highlighted difficulties adjusting to living with other young people and their babies. The young people all knew their rights and had made complaints about the service, for example, regarding the management of behavior. These complaints had all been resolved at the time of the inspection.

The young people all felt that their needs were being met in relation to health and education. Some of the young people were very frustrated about their aftercare plans and difficulties encountered sourcing accommodation to move into.

The young people spoke about their experiences of the social work department and aftercare workers and were in the process of addressing their difficulties with these services. The young people had the support of an external advocacy services to do so.

The young people were aware of the public health emergency and the arrangements in place to maintain their safety. Some young people were not happy with how risks associated with individuals accessing the centre were managed in recent times.

Some of the young people had engaged in creative activities such as painting a mural, sowing a vegetable patch and other art work. In addition, young people said they enjoyed special occasions including celebrations for birthdays and Easter.

## Capacity and capability

There was effective leadership, governance and management arrangements in place in the centre. Leadership was provided by the centre manager and deputy centre manager, one of whom, was based in the centre on daily basis. Management duties were shared between the management team with other tasks delegated to team members, if appropriate. There were clear lines of accountability and staff were very clear about their roles and responsibilities.

There were effective management systems in place in the centre. The centre manager had oversight of all aspects of service provision. There was a suite of audits completed regularly which ensured the service was safe, and outstanding issues were addressed. In addition, the management team reviewed daily records and the young people's plans. They reviewed significant event notifications and there was a clear process to review incidents and to provide direction or seek clarity, when required. There was open communication, regular team meetings and support for staff to ensure the young people received a quality service.

Staff spoke positively about the morale in the centre, the support they received and the culture of openness. They said managers were always accessible. Social workers and professionals involved told the inspector communication was effective and honest and there was no delays providing updates on the young people.

In the absence of a national on call system, the centre managers provided this support to the staff team on a rotational basis. The external line manager for the centre had regular communication with the management team, was aware of key issues in the service and had met with the young people and staff.

While there were policies and procedures in place, the Child and Family Agency, Tusla, had not reviewed a large number of these policies, for a considerable length of time. The centre manager had devised a number of guidance notes for staff in the interim. For example, there were guidance notes to provide direction for when young adults were living in the centre with young people under eighteen, and the provision of babysitting services. There was regular communication and discussions with the team about service provision at team meetings.

There was a risk management system which was supported by a Tusla risk management framework. The centre manager and the deputy centre manager were responsible for ensuring risks were reviewed and managed. They sought the support of one external and one internal staff member to assist in the management of risk. Staff were well briefed in this area and understood their responsibilities to complete risk assessments when required. Risk assessments were comprehensive and related to the young people, health and safety and operational matters. There was a risk register which was regularly reviewed which outlined the main risks for the centre. Covid 19 presented as the highest risk for the service in recent times, and there were appropriate measures in place to manage these risks.

The centre had a statement of purpose which was reviewed in July 2020. This contained all of the required information. It outlined the model of care and the care and support offered in the centre. This centre provided services for children under eighteen and in certain circumstances, could accommodate young adults up to the age of 21. There was a supporting guidance document which described the conditions underpinning these placements. Some young people remained in the centre when they turned 18 and this had

been risk assessed and documented on the risk register. Although, no adults were admitted to the service in the last nine months, the building did not have adequate space to provide a separate service for adults and young people under 18, if such a placement was required. The centre manager outlined that a placement for adults was available only in exceptional circumstances when strict criteria was met including a risk assessment. Consideration was required by the service regarding the on-going provision of this aspect of their service to ensure the service operated safely as a children's residential service only.

Staff were very knowledgeable about the model of care and this was reflected in records in the centre. There was a detailed child friendly version of the statement of purpose and the young people were aware of its content.

### **Standard 5.2**

The registered provider ensures that the residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability to deliver child-centred, safe and effective care and support.

The national suite of policies and procedures for children's residential centres had not been finalised at the time of the inspection. This remained a gap since the inspection of the service in 2018.

There was no formally agreed national on-call system for children's residential centres.

Judgment: Substantially compliant

### **Standard 5.3**

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

The centre catered for young people under 18 and over 18 in exceptional circumstances. However, this did not meet the criteria for a children's residential service.

Judgment: Moderate non-compliant

## Quality and safety

The care provided in the centre was child-centred, safe and the support offered was of a good standard.

The young people's needs were assessed, clearly recorded and specific programmes were in place for each young person to help them reach their full potential. Care plans were in place for the young people who required one. One young person had a child-in-care review recently and an updated care plan was in the process of being developed.

The placement planning process was very thorough and included actions for all aspects of the young people's care. It was in line with their care plan and actions were achievable and specific to the young person's needs. These actions covered physical and mental health, activities and hobbies, education and training, safety, family and relationships and preparation for leaving care. Each young person was involved in both the care and placement planning processes. While young people told the inspector that they did not always like the approach, they were aware of their plans and engaged in the programmes.

The young people were engaged in parenting and an independent living skills programmes. The individual work carried out with the young people was regularly reviewed and they were aware of their progress and areas that required further development. This approach meant that the young people's needs were being met and essential skills developed.

It was evident that the young people were at the core of the decision making in relation to their plans. Staff were positive about the approach to care and knowledgeable about the young people's individual needs. Social workers were satisfied with the support the young people received and said the young people received high quality care and nurturing.

The centre worked hard to prepare the young people to leave care and aftercare services were involved, if appropriate but onward placements were difficult to source. The team engaged the young people in comprehensive work to develop their independence and life skills and there was guidance for the team to follow if a young person was not entitled to formal aftercare services. The centre was flexible in extending placements for the young people until suitable accommodation was found. While this was supportive of the young people, it was not sustainable for a children's service. The young people said the difficulty sourcing placements caused them a lot of stress.

The centre was very homely and beautifully decorated. Communal areas were very clean, comfortable and a space where young people could enjoy. There was a sensory room for the babies which had space for the young mothers to relax also. It was evident that significant time and effort was spent ensuring the centre was nice and a space to be proud of. During the public health emergency, the young people created a mural in the back garden, a vegetable patch and window art painted in the sensory room. All of this ensured there was a homely and relaxed environment.

The young people were aware of their rights, had external advocates and access to support services in the community. All young people knew the complaints process and had

exercised their rights to complain about issues they had within the centre. All complaints were addressed and resolved. In addition, some young people were in the process of addressing complaints about wider Tusla services. The issues relating to social work involvement and difficulties relating to aftercare. They were supported by external advocates to address the issues appropriately.

The safety and welfare of children was protected and promoted in the service. There was a proactive approach towards managing concerns and risks regarding the young people's welfare. The team had good understanding of the National Guidance for Protection and Welfare of Children (2017) and had appropriate training. When risks were identified, they were reported promptly and appropriate safety plans put in place. There were regular meetings with the social work department and it was clear that young people were involved in discussions about safeguarding. Social workers said that any risks were reported appropriately and they received regular updates on the young people.

Records relating to concerns were detailed and progress in relation to safety plans or risks was documented. The register was up-to-date and the centre manager had sought clarity on referrals that remained open and escalated the issues to her manager when there was no response from the social work department. Although the management team had received verbal confirmation that three concerns had been closed, they remained open on the register until written confirmation was provided. There was a protected disclosures policy but not all staff fully understood its content. Despite this, staff said that the management team including the external manager was available to them should they have any concerns about the service.

There was a consistent approach to managing behavior that challenges in the centre. Staff and managers were conscious of the impact of any negative behavior on the other young people and also the babies living in the centre and were proactive to address issues of concern at an early stage. Some young people reported concerns about the management of behavior in the centre and had made complaints in relation to this. The staff team supported all young people in their relationships with each other, risks were assessed and safety plans devised to manage any conflict. Work with the young people regarding their behaviour and safeguarding issues was comprehensive, needs led and child-centered. Social workers and other professionals said there was a proactive approach to managing any concerns among the young people.

There were comprehensive behaviour support plans for each young person and these were reviewed regularly. All staff members, except two newly recruited members of the team had received training in the behaviour management model. The training was cancelled due to the public health emergency and no courses are scheduled. Both staff have completed an online training resource and completed tutorials with the centre manager as she is a certified trainer in the area.

There was a system in place to report incidents such as young people being absent from the centre. When young people placed themselves at risk, the team was creative in their management of the issues and ensured the young people continued to have daily support. Appropriate safety plans were put in place which were reviewed regularly with the allocated social worker. Social workers were satisfied that the staff team addressed incidents without delay. They said the team consistently engaged the young people and

carried out supportive pieces of work despite a young person being absent from the centre. Young people were not subjected to any restrictive practices and there was a process to risk assess any restrictive practices should they be required.

The health, wellbeing and development of each young person was promoted. Health promotion initiatives were prioritised in the centre and goals were set on a weekly basis based on needs identified on the placement plans. The young people were supported in relation to physical health and their mental health and wellbeing. The inspector reviewed records of work with young people regarding self-care, sexual health and medical needs. There were very clear records in the care files to demonstrate how physical and mental health needs were prioritised and met. This included access to general practitioners, dental services, ophthalmic and medical services, as required. The young people told the inspector that their needs were met in this regard. Young people told the inspector that they had fears in relation to the public health emergency and the risks associated with transmission of Covid 19 when young people returned to the centre following a period of absence. These risks had been appropriately assessed and managed in the centre.

Staff worked with young people to help them improve their mental well-being. Young people were referred to specialist services, including mental health services and supported to attend appointments with psychologists and psychotherapists, as required. In addition, the team had commenced a piece of work with a psychologist to them in their work with the young people.

All young people told the inspector that they had adequate quantities of food and drinks available to them. There was an independent living programme in place for each young person where they were supported to cook for themselves. This programme was comprehensive to ensure they developed necessary life skills for when they leave care. Each young person had responsibility to manage their own medication. A safe was available for each young person to use and any risks were assessed appropriately.

Education was valued and the young people were supported to achieve their potential. Staff supported the young people through key working and informal discussions to identify their interests and explore options available to them following their maternity leave from education. Due to the public health emergency, all education and training facilities were closed and therefore young people had not attended formal education in the lead up to the inspection. However, the team was proactive in supporting the young people to explore their options and set educational goals. Young people were linked with an education officer as a further support. Individual work was completed with each young person to help them enrol on an educational programme and they were supported to source crèche placements to ensure they could attend the programmes in September.

**Standard 2.2**

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

Young people received good quality care and support in the centre. The plans for their care were very comprehensive, tailored to individual needs and reviewed regularly. There was effective communication with allocated social workers and young people were involved in the planning process.

Judgment: Compliant

**Standard 3.1**

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

Not all child protection concerns had been closed on the centre's register as the centre manager was awaiting written confirmation from the social work department. Not all staff members fully understood the protected disclosures policy.

Judgment: Substantially compliant

**Standard 3.2**

Each child experiences care and support that promotes positive behaviour.

There was a positive and creative approach to managing behaviour that challenged. The team was proactive in their approach to ensure they understood the behaviours of concern and addressed all behaviours according to the needs of the young person. The young people were supported appropriately during difficult periods and had opportunities to reflect and learn.

Judgment: Compliant

**Standard 4.1**

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

The health, wellbeing and development of each young person was promoted and protected. There were good health promotion initiatives that prioritised good physical and mental health. There was a comprehensive programme in place to assist the young

people enhance life skills. Young people were supported and encouraged to make good choices regarding their health and wellbeing.

Judgment: Compliant

**Standard 4.2**

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

Young people's physical and mental health needs were assessed and they had appropriate access to the services they required. There was safe medication management practices in the centre.

Judgment: Compliant

**Standard 4.3**

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

Young people were supported to achieve their potential in learning and development. There was adequate support for young people to identify and engage with educational programmes.

Judgment: Compliant

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

Standard Title	Judgment
<b>Capacity and capability</b>	
<p><b>Standard 5.2</b> The registered provider ensures that the residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability to deliver child-centred, safe and effective care and support.</p>	Substantially compliant
<p><b>Standard 5.3</b> The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.</p>	Moderate non-compliance
<b>Quality and safety</b>	
<p><b>Standard 2.2</b> Each child receives care and support based on their individual needs in order to maximise their wellbeing and personal development.</p>	Compliant
<p><b>Standard 3.1</b> Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.</p>	Substantially compliant
<p><b>Standard 3.2</b> Each child experiences care and support that promotes positive behaviour.</p>	Compliant
<p><b>Standard 4.1</b> The health, wellbeing and development of each child is promoted, protected and improved.</p>	Compliant
<p><b>Standard 4.2</b> Each child is supported to meet any identified health and development needs.</p>	Compliant
<p><b>Standard 4.3</b> Each child is provided with educational and training opportunities to maximise their individual strengths and abilities.</p>	Compliant

# Compliance Plan

**This Compliance Plan has been completed by the Provider and the Authority has not made any amendments to the returned Compliance Plan.**

<b>Compliance Plan ID:</b>	MON-0029904
<b>Provider's response to Inspection Report No:</b>	MON-0029904
<b>Centre Type:</b>	Children's Residential Centre
<b>Service Area:</b>	Dublin North East
<b>Date of inspection:</b>	8 & 9 July 2020
<b>Date of response:</b>	12 <sup>th</sup> August 2020

This document sets out the standards where it has been assessed that the provider is not compliant with the National Standards for Children's Residential Centres 2018.

It outlines which standards the provider must take action on to comply. The provider must consider the overall standard when responding and not just the individual non-compliances as outlined in the report.

The provider is required to set out what action they have taken or intend to take to comply with the standard in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that standard, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. It is the provider's responsibility to ensure they implement the actions within the timeframe.

**Compliance plan provider's response:**

<b>Capacity and capability</b>	
<b>Standard: 5.3</b>	<b>Judgment: Moderte non-compliance</b>
<p><b>Outline how you are going to come into compliance with Standard 5.3:</b> The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.</p> <p>The centre catered for young people under 18 and over 18 in exceptional circumstances. However, this did not meet the criteria for a children's residential service.</p> <p><b>The Alternative Care Manager, in conjunction with the centre manager, will review the current service provided and will amend to ensure that all aspects of the service meet the criteria for a children's residential service.</b></p> <p><b>The statement of purpose and function will be updated to reflect the agreed changes to service provision.</b></p> <p><b>Timeframe: 30<sup>th</sup> September 2020</b></p>	

