



**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:	Announced
Date of inspection:	15 and 16 September 2020
Centre ID:	OSV - 0004175
Fieldwork ID	MON - 0030421

About the centre

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

The centre was a residential respite centre managed by the Child and Family Agency (Tusla). The house was a large homely building, offering young people a relaxed comfortable and spacious living environment.

There were two large TV rooms, a play room, beauty room and a gym. In the large garden young people and staff enjoy a greenhouse and a patch where they grow some of our own vegetables, fruit and flowers. A variety of activities such as arts and crafts, baking, board games, music, dancing, movie evenings, reading and many more were offered in the centre. There was lots of outdoor space to enjoy swings, football, basketball, skate-boarding and cycling our bikes.

There was easy access to local amenities for example, swimming pools, cinemas, shops, parks, clubs, and historical sites. Staff and young people also took advantage of the local countryside which includes beaches, trails, rivers and fishing. The house was serviced by a good public transport system.

The centre worked with young people aged 8-17yrs old, and sometimes younger people, who experience difficulty and where it was believed that by providing respite support in the centre, the young people's home placement is sustainable.

Number of young people on the date of inspection:	8
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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
15 th September 2020	09:00hrs to 17:00hrs	Jane Mc Carroll	Inspector
16 th September 2020	12.00hrs to 18.00hrs	Jane Mc Carroll	Inspector

Views of children who use the service

This inspection found that children received good quality care in the centre. Children's views and interests were valued and promoted by centre staff. The staff team were creative in the ways they cared for children. The staff team provided a consistent and stable environment which supported children to build quality relationships. Staff worked in collaboration with children's parents, carers and social workers to ensure good coordinated care. Children spoke positively of their experiences in the centre.

The inspector met with one child in the centre and spoke with two other children on the telephone. There were a total of eight children accessing the service at different times, and four of these children were in the process of being introduced to the centre. The children stayed in the centre on average, one to three nights per week and then returned to live in their respective homes, with family or foster carers, for the remainder of the week.

The children who spoke to the inspector said that they liked the staff. One child said that "they (staff) are lovely people." Another child said that they "got on well" with the staff team. Some children said staff members helped them and if they were worried or having a bad time and that they could confide in them. One child said that their "keyworker made sure that they were ok." Children told the inspector that they looked forward to going to stay in the centre. During the onsite visit, the inspector observed warm and nurturing interactions between staff and a child in the centre that day.

The inspector found that the centre was welcoming and homely. Children told the inspector that they liked the house. One child said it was "cosy and spacious" and that they enjoyed using the beauty room where they painted their nails. Another child said that their bedroom was "pretty good." This child said that they liked their bed, as well as their own bathroom. The centre also had a gym, which children liked to use, and there was a large garden area with sports and recreational equipment, such as swings and basketball nets. There was a vegetable patch for children who enjoyed gardening and a chicken coop which had been piloted and used over the summer months.

Children told the inspector about a range of other activities which they enjoyed in the centre. One child talked about baking a cheesecake and the child said that they enjoyed this activity. During the visit to the centre, the inspector observed a child listening and dancing to music with staff in the house. The inspector also observed staff planning an outing with a child to a local beach for nature spotting. Children told the inspector that they had fun in the centre. They also said that they were 'learning about life skills' from the staff. The children's own interests and hobbies were encouraged and promoted.

Children said they felt safe in the centre. One child said that they were very comfortable staying there because they knew the staff and got on with them. Children said they were supported to develop a routine when they first came to the centre and this made them feel safe and secure. Children were aware of how to make a complaint and they said that they

could speak to the manager at any time if they needed to. The inspector observed and heard from staff that the managers of the centre were visible and accessible to children and staff.

The inspector also spoke with a social worker, one social care worker and two foster carers who had direct involvement with the centre. Foster carers told the inspector that the children they cared for enjoyed going there. They said that they especially enjoyed the activities on offer, and there was a value placed on children's participation in selecting and planning activities. One foster carer said that the centre was like "a second home" for children. They also spoke positively about the staff team who they described as committed to the children. The foster carers knew the manager and they described good quality communication between them and the staff team.

The social care worker and social worker also provided positive feedback to the inspector in relation to their experiences of the service. Some common descriptors about the service from these professionals included the staff team's strong commitment to the children in their care, as well as good placement planning and good communication from the centre to families and professionals involved with the children.

Capacity and capability

The centre was effectively managed and governed by a competent and experienced management team. There was a management structure with clear lines of responsibility and accountability. There was a centre manager, who had been in her role for 18 years and had worked in this centre for eight years. The centre manager was supported by a deputy centre manager who worked alongside her on a daily basis. The deputy centre manager was also experienced and has worked in the centre for eight years. The longevity of their roles in the centre, and the experience they brought to the centre, helped to develop a cohesive staff team. The centre manager reported to an alternative care manager, who had overall responsibility for the quality and effectiveness of the services provided. The inspector found and heard from staff and children that the managers were accessible and actively involved in day to day life in the centre.

There was an equally consistent and familiar staff team in the centre. The centre provided respite care for up to four children on any given day. The centre had 10 social care workers and five social care leaders. The centre did not use agency staff but employed two social care workers and a student social care worker as relief workers in the centre. Many of the staff team members had worked together for up to 17 years. The staff team's stability helped children make meaningful relationships with adults in their lives. There was a culture of openness, learning and improvement amongst the staff team, which was well led by the managers.

There was clear delegation of duties amongst the staff team. Staff were given specific roles and responsibilities which they were interested or skilled in. For example, administrative duties, such as archiving and record management were delegated to those who had particular training and interest in this aspect of the centre operations. There were also established communication systems in the centre, to ensure good service delivery and delegations of roles and responsibilities, such as management meetings, team meetings and shift handovers.

The centre did not have up to date operational policies and procedures and were utilising Tusla's national children's residential centre policies and procedures (2010). The absence of up to date policies and procedures did not support Tusla in ensuring that all aspects of the service were provided in line with national standards and current legislation.

This inspection found that current policies and procedures were not always adequate for the provision of respite care as opposed to full-time residential placements. This was particularly relevant to areas such providing respite care to children not currently in the care of the state such as, consent to the placement, and care planning and review. As a result, this inspection found variance in practice on a case by case basis. While this finding did not have an impact on the quality of care of children at the time of this inspection, clear policies, procedures and guidance was required to ensure informed proportionate decision-making, the fulfilment of statutory duties to children in care, and transparency for parents and guardians for children not in state care.

There were appropriate risk management systems in place for the identification, assessment and management of risk. The centre maintained a risk register which recorded and tracked centre risks. There was a clear risk escalation process, whereby the centre manager could appropriately raise and alert her manager to any risks which required further controls, external to the centre. Risks were identified and described, and appropriate control measures were put in place to mitigate these risks. For example, risks associated with the impact of COVID-19 and risks associated with the lack of updated policies and procedures in the centre.

There were good quality collective risks assessments in place when children were being referred and introduced to the centre. Children's individual needs, their safety and welfare were considered when planning and managing the mix of children in the centre at any one time. Staff were aware of potential risks to children and the inspector found individual risk assessments on children's files which identified risks and measures required to mitigate risks in order to safeguard children.

Between March and July 2020, respite services in the centre were suspended as the centre changed its purpose and function to provide emergency placements only to children referred through the out of hours crisis intervention service. This was in response to service needs identified during the COVID-19 pandemic.

The centre, as a respite service, had a statement of purpose and function which accurately described the type of service being provided. It required additional detail, for example, the management and staffing arrangements in the centre and the arrangements for safety of children. This statement was also awaiting managerial approval.

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.

Management arrangements were well established in the centre. The staff team was cohesive and the stability of staffing in the centre was exemplary. Risk management systems were in place and where risks had been identified there were effective risk assessment and management plans which were reviewed regularly. The centre did not have up to date operational policies and procedures in line with national standards.

Judgment: Substantially compliant

Standard 5.3

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

There was a statement of purpose and function in the centre which accounted for many aspects of the care provided to children in the centre. Further information was required to fully describe the management and staffing arrangements in the centre as well as the safety arrangements in place for children using the service. The statement of purpose was also awaiting managerial approval.

Judgment: Substantially compliant

Quality and safety

Children received care in the centre which was tailored to their specific needs. The staff team were experienced and skilled in identifying and addressing needs of children, and they were creative in the ways in which they supported them. The inspector saw and heard about various initiatives in the centre which were developed to enhance children's wellbeing and participation in the centre. For example, there was bright and colorful notice board in the dining area which contained child friendly information on various themes chosen by the children. Children participated in collecting quotes, pictures, and cartoons to display on the notice board and this provided for some good group discussions during meal times.

Children also had the ability to participate in the running of the centre and in relation to the care they received. The centre had introduced 'chat time', which provided children with an opportunity to make suggestions and ask questions about the centre and the care provided to them. Despite children frequently coming and going from the centre, 'chat time' enabled all children to participate as a group, where they could track and follow other children's questions, suggestions and feedback, in a central record.

Children were admitted to the respite centre, following a referral by their social worker to a central placement resource panel. Then, a determination of suitability of placement was made based on an assessment of the risks and needs of children. The respite care was provided to children by the centre under the governance arrangements set out in the Child and Family Agency's policies and procedures for children's residential centres.

Most children had up to date care plans in the centre. There were two care plans which were not up to date for children in the care of the state, and this was immediately rectified by the centre manager. Care plans for children varied considerably in content. The inspector reviewed a care plan for a child which detailed the goals and aims to be achieved specifically for the respite centre. Other care plans children were based on the care arrangements for their substantive placement, i.e. foster care, without detailing specific goals and aims for the respite centre. This required review in order to ensure that the centre received care plans for children which informed their placement plans.

Placement plans were mostly up to date and of good quality. Despite the variation in care planning documents for children, the staff devised comprehensive and detailed placement plans by collaborating and communicating with the child, families, social workers, social care workers and from review of a range of information and records available to them about each child, such as referral documentation and admission forms. Children told the inspector that that were included in the planning of their care. Children talked about their goals and the ways they were being met with help from staff in the centre.

Placements plans were set out around a framework and model of care utilized in the centre. Each child had specific goals to achieve in areas of their wellbeing and development. Each child's progress was tracked and reviewed in order to ensure progress and, ultimately, positive outcomes for children. The inspector reviewed placements plans and found that specific goals for children were detailed and actioned. The inspector found that individual work, which was actioned, was evidenced in children daily logs, key working sessions and various activities in which children were engaged. There was one placement plan record which was not fully completed and required updating to reflect the work that had been undertaken with a child which was seen and reviewed by the inspector in centre records and described by the child.

There were systems in place to safeguard children. Staff were aware of how to make a protected disclosure. Staff in the centre reported child protection concerns in a timely and appropriate way to the relevant social work department, in line with Children First 2017. In addition, the centre manager was the designated liaison person (DLP) in the centre and she had oversight of these concerns to ensure that reporting was accurate and that responses and outcomes to concerns were tracked and monitored.

The care provided to children in the centre was child-centred and staff were skilled in encouraging and reinforcing positive behaviours by children. The staff team were aware of the underlying causes of behaviours and situations that may lead to behaviours that challenged and they were guided in their response to children through detailed individualized behavioural management plans. There were very few occasions of escalating and challenging behaviours in the centre.

The centre manager had oversight of all restrictive practice in the centre. This information was held on a central register where it was reviewed to ensure managerial oversight, and that any such practices were risk assessed and in place for the shortest duration possible.

Children's development and wellbeing was promoted in the centre through a range of activities and interventions. Each child has a key worker and the inspector reviewed records of key working sessions which included support and guidance to children on a range of topics such as healthy living, health relationships, and self-care. Children went out on activities and outings with staff which also afforded children with the opportunity to develop life skills. For example, one child was supported to return an item she had bought to a shop and to negotiate a refund or exchange. Physical activities were also promoted and encouraged in the centre as well as hobbies such as gardening and exploring nature. Children were also involved in cooking and baking in the centre.

The centre held relevant health and medical records for children on file. All children had a GP and there was details in relation to medical consent on children's files. Children were supported and encouraged to manage their own medication, where appropriate and this was subject to thorough risk assessment and support if required. The centre had

implemented a range of measures for infection prevention and control, which had been effective to date in relation to COVID-19.

All children who were using the respite service were in full time education. The staff team supported the children's educational development by providing assistance with homework and offering practical support such as transport to and from school.

Standard 2.2

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

The care and support that children received in the centre was individualized and based on their assessed needs. The staff worked in consultation with children, family members, social workers and other key professionals in children lives. The care of children was monitored and reviewed to ensure quality and to improve outcomes for children.

Judgment: Compliant

Standard 3.1

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

Child protection concerns were reported in line with Children First (2017). Safeguarding practices were in place in the centre and the staff team worked with social workers, children and their families and carers in order to promote children's safety and wellbeing.

Judgment: Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

There were no restrictive practices in regular use in the centre. The staff team managed behaviour in the centre through encouraging and reinforcing positive behaviours and following detailed behavioural management plans for each child.

Judgment: Compliant

<p>Standard 4.1 The health, wellbeing and development of each child is promoted, protected and improved.</p>
<p>The staff team advocated for children and cared for them in ways which promoted their health, wellbeing and development.</p>
<p>Judgment: Compliant</p>
<p>Standard 4.2 Each child is supported to meet any identified health and development needs.</p>
<p>The centre had interventions in place to support children's health and development needs.</p>
<p>Judgment: Compliant</p>
<p>Standard 4.3 Each child is provided with educational and training opportunities to maximise their individual strengths and abilities.</p>
<p>All children who were using the respite service were in full time education. The staff team supported children's educational development and also encouraged children to pursue their interests and hobbies.</p>
<p>Judgment: Compliant</p>

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
<p>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.</p>	Substantially compliant
<p>Standard 5.3 The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.</p>	Substantially compliant
Quality and safety	
<p>Standard 2.2 Each child receives care and support based on their individual needs in order to maximise their wellbeing and personal development.</p>	Compliant
<p>Standard 3.1 Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.</p>	Compliant
<p>Standard 3.2 Each child experiences care and support that promotes positive behaviour.</p>	Compliant
<p>Standard 4.1 The health, wellbeing and development of each child is promoted, protected and improved.</p>	Compliant
<p>Standard 4.2 Each child is supported to meet any identified health and development needs.</p>	Compliant
<p>Standard 4.3 Each child is provided with educational and training opportunities to maximise their individual strengths and abilities.</p>	Compliant