

## 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 South CRC
<b>Centre ID:</b>	OSV-0004181
<b>Type of inspection:</b>	Unannounced Follow Up Inspection
<b>Inspection ID</b>	MON-0025402
<b>Lead inspector:</b>	Ruadhan Hogan
<b>Support inspector (s):</b>	None

## **Children's Residential Centre**

### About monitoring of children's residential services

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: 31 October 2018 09:00 To: 31 October 2018 17:00

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

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

### Actions required

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

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

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

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

Standard	Judgment
<b>Theme 2: Safe &amp; Effective Care</b>	
<b>Standard 6: Care of Young People</b>	Non-Compliant - Moderate
<b>Standard 10: Premises and Safety</b>	Non-Compliant - Major
<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

## Summary of Inspection findings

The centre was based in a multi-purpose three storey building on the grounds of a psychiatric hospital in the South region. It had a spacious outside area with parking facilities to the front of the building.

The written purpose and function provided to the Health Information and Quality Authority (HIQA) described the centre as providing mainstream care for up to four male children. The Child and Family Agency (Tusla) residential services had come under a new national management structure since May 2015. At the time of the inspection, there was 1 child living in the centre.

During this inspection, inspectors met with or spoke to 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.

While the centre had an action plan in place to address findings from a HIQA inspection in July 2018, these actions were not the focus of this inspection. For the purposes of this inspection, the primary focus was in relation to the progress against standards judged to be major non-compliant, particularly a visual inspection of the premises. HIQA will use the action plan from the July 2018 inspection to monitor progress against all standards therefore a follow up action plan was not required from this inspection.

At the time of the last inspection, improvement was required for nine standards of which two were judged to be major non-compliances and six were judged as moderate non-compliances. The major non compliances related to the premises which, at the time of the July 2018 inspection were institutional in nature, unkempt in places and in urgent need of refurbishment. Additionally care practices required a change in approach to ensure they were effective and consistent across the entire staff team.

Two children had been appropriately discharged since that last inspection with one child remaining. Inspectors found that some of the responses to the failings of the previous inspection were implemented while others had yet to be. New referrals were not being placed into the centre until work with the premises was finished.

Inspectors found that a significant level of work had been undertaken with the interior of the premises. This was almost finished and inspectors saw building contractors completing various works throughout the centre. The refurbishments resulted in the centre looking much better.

Specific institutional practices identified at the time of the last inspection had ceased. Training had been provided to the entire staff team to support them to address overall deficiencies in care practices. However, it was too early to assess whether the staff team and centre practices had benefited from this training.

## Inspection findings and judgments

### **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 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**

At the time of the last inspection in July 2018, improvements were required in relation to the centre's approach to managing behaviours that challenged and how it engaged children in healthy routines. There was a need to ensure staff had appropriate training in approaches to promoting positive behaviour.

Since the last inspection some actions had been taken with immediate effect, and others were underway. A review of care practices was undertaken and this resulted in immediate changes in the centre. They included a reduction in restrictive practices such as the routine locking of centre doors. Children's bedtimes were revised and this ensured that they were in line with each child's age and stage of development. All of the staff team had up-to-date training to respond to behaviours that challenge using a Tusla-approved approach. In addition, training was provided to the entire staff team in an alternative approach to promoting positive behaviours. At the time of this inspection, these alternative approaches had yet to be embedded into everyday practice. The centre manager said that upon admission of new children to the centre, the entire staff team would implement these changes to care practices.

**Judgment:** Non Compliant - Moderate

### **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**

At the time of the last inspection in July 2018, significant improvements were required

in relation to the premises, which were found at that time to be run down and in urgent need of refurbishment. The centre design and location was not suitable for the provision of care as outlined in the centre’s statement of purpose and function and fire precautions were not adequate.

The inspector found that a significant amount of work had been undertaken with regard to the interior of the premises. This was almost finished and inspectors saw building contractors completing various works throughout the centre. A new kitchen had been installed, the children’s bedrooms were in the process of being refitted with new beds, shelving and desks. They were also painted and new carpets were fitted. Children’s bathrooms were re-tiled with new fittings. The walls throughout the centre had been repaired and painted and new carpets were fitted throughout. The centre was brighter and had a more homely feel.

Although the improvements were welcomed, this standard will not be met until the centre is re-located to an appropriate setting as is intended by Tusla

Precautions against the risk of fire were improved as fire drills involving all staff and children in the centre were more frequent. In addition, all staff had been provided with up-to-date training in fire awareness.

**Judgment:** Non Compliant - Major

**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**

At the time of the last inspection in July 2018, improvements were required in relation to the statement of purpose and function which was broad and as such, did not fully consider the level of need which could not be met by the centre.

Since the last inspection, the statement of purpose had been satisfactorily reviewed and changed to include the level of need that could not be met within the centre. This would ensure that only children whose needs could be met would be admitted to the centre.

**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**

At the time of the last inspection in July 2018, improvements were required in relation to the management of this centre, including bringing about the necessary changes to outdated practices and developing systems of monitoring and oversight, which would ensure the centre operated safely and effectively.

Since the last inspection, some actions had been taken such as risk management training and improvements to the risk register system. Staff had been trained in an approach to promoting positive behaviour and the centre's statement of purpose and function was clearer about the group of children whose needs it could meet. A review of centre practices was undertaken and improvements to the centre premises were significant. While these actions are acknowledged by HIQA, the level of improvement required by this centre will take time and will be subject to on-going monitoring by the Authority.

**Judgment:** Non Compliant - Moderate

**Acknowledgements**

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