



**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:	South
Type of inspection:	Announced
Date of inspection:	25 January 2022
Centre ID:	OSV-0004193
Fieldwork ID	MON-0035673

About the centre

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

The centre is a single storey dwelling in a small housing estate close to a town centre. It provides short, medium and long term care and shared care arrangements for up to three young people. The unit accepts referrals for young people between the ages of 13-17 years. The aim of the centre is to provide safety, security and stability that underpin healthy development. The centre aims to reduce risk and build resilience for the young people in their care. The centre offers a safe environment where young people can live and be supported to develop in a positive manner.

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
25 January 2022	09:00 – 16:00	Ruadhan Hogan	Inspector
26 January 2022	09:00 – 16:00	Ruadhan Hogan	Inspector

Views of children who use the service

The centre was located in a housing estate in a large rural town, and was within walking distance of the town centre. Staff had access to vehicles which they used to transport young people to appointments, activities or to meet with friends and family. Young people were also supported to use public transport, where appropriate, in order to develop their independence.

There were three young people living in the centre at the time of the inspection. The inspector found that the service provided to children was individualised and person-centred. Staff strived to build relationships and positive attachments with the young people in the centre. Young people's wishes and preferences were sought, listened to and respected by staff. Young people were involved in placement planning and were supported to develop independent living skills. This was seen in how staff members helped young people plan and prepare meals, a key independent living skill that they learned while living in the centre. Where appropriate, young people were facilitated to maintain contact with friends, families and other significant people in their lives.

The young people who spoke to the inspector described positive experiences of living in the centre. They described staff in the centre as "really nice people". They described to the inspector how the staff team played board games with them and they said that "it doesn't feel lonely here cause I just moved up by myself". They also said that "if I'm feeling down, they talk to me... I feel listened to...They give me good advice". One young person said "I do my washing, clean my room, cooking. That's good for me, cause I eventually want to live by myself." Young people who provided feedback to the inspector through a questionnaire indicated that they felt safe in the centre.

Young people described their frustrations with being a child in care. They said that when their social worker changed, they had to tell their personal story to the new social worker. They said "it gets repetitive and annoying when people keep asking and I have to explain myself over and over...I have to tell loads of my stuff like to social workers, therapists, people I live with. There's a lot of people I have to tell my stuff... But if I want to get help-it has to be done".

The inspector spoke with professionals involved with children such as social work team leaders and a Guardian ad Litem. While some professionals held different views on the ability of the centre to meet the needs of all children placed there, they all agreed that the centre was striving to provide the best possible care within their capacity. The majority of external professionals were satisfied with the level of communication between them and centre staff, but one was of the view that this could be improved. There were clear systems in place to ensure professionals were notified of all significant events in an appropriate and timely manner.

The inspector spoke with one parent who was positive about the care that was provided to the young person. They said "it's a good service because you have one-on-one" and that they thought "the staff are very good".

Capacity and capability

This inspection found that management systems were effective at ensuring the care provided to children was of good quality and in line with the centre statement of purpose. Management structures were clearly set out and staff said they felt supported in their roles. The centre had an experienced centre manager, who at the time of the inspection was supported by three social care leaders. A deputy regional manager who also oversaw operation of the centre supported the centre manager.

The centre was last inspected in July 2020 against eight of the national standards. At that time, the centre was found to be compliant with seven standards and substantially compliant with one standard. The current inspection found that similar levels of compliance had been sustained.

A national suite of policies and procedures had been introduced in April 2021 and was successfully implemented in the centre. The inspector found that records in the centre, such as care files, placement planning documentation, significant event notifications (SENS) and child protection referrals were well maintained and had appropriate oversight by the centre manager.

The centre had a statement of purpose and function that was subject to review once every two years. Inspectors were provided with a copy of the statement that contained all information required by the standards, including the aims and objectives of the service, details of the management and staff structure and the services available to young people. However, the statement had not been updated to reference the national suite of policies and procedures in place in the centre since April 2021 and as such was not up to date.

Staff working in the centre were competent and experienced. All staff who spoke to the inspector were familiar with the centres model of care and the individual approaches to children.

Staffing resources in the centre ensured that young people received a quality service from a consistent staff team. Despite this, there had been times over the previous six months when there were vacancies and absences. The centre manager told the inspector that staffing had not been significantly impacted by the COVID-19 pandemic. She said that the centre had a stable staff team for a number of years, but in recent times, a number of long standing staff members had moved on from the centre to new roles, including the deputy centre manager. At the time of the inspection, there was one deputy manager post vacant and 2.41 social care posts vacant in the centre.

In the short term, the centre manager addressed issues with vacancies in a number of ways. Staff and the centre manager told the inspector that the staff team had been flexible in swapping shifts to ensure adequate staffing levels. The centre used consistent agency staff members to fill gaps in the rota. In addition, the centre manager rostered herself to fill gaps where required. As a result, a social care leader or centre manager was consistently rostered as a shift leader. In order to address vacancies in the long term, two permanent staff had been recruited in the weeks prior to the inspection with agreement for one more to be recruited. In addition, the deputy manager post was in the process of being recruited.

Standard 5.3

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

The statement of purpose clearly outlined the model of care and reflected the day-to-day operation of the centre. However, it had not been updated to reference Tusla's national suite of policies and procedures that were implemented in May 2021.

Judgment: Substantially Compliant

Standard 6.1

The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.

The centre was staffed by a committed staff team who provided consistent care to young people. Over the previous six months, there had been some changes to the staff team, where a small number of long standing staff left the centre and newer staff were recruited. Despite these changes, the centre maintained adequate staffing levels.

Judgment: Compliant

Quality and safety

Young people in the centre received individualised and person-centred care. The centre was homely and a safe place for them to live. Young people were encouraged to pursue activities and the staff team worked collaboratively with all relevant people in young people lives to promote their care and welfare. While there was a high proportion of incidents of young people reported as missing from care, the inspector found that appropriate plans were in place to monitor this and actions were taken to reduce such incidents.

The centre was safe and homely, despite being small and somewhat restricted in terms of physical space. Both indoor and outdoor areas were tidy and well maintained. The communal sitting room had well-kept furnishings such as sofas, an electric fire, curtains, a rug and colourful cushions. The walls were decorated with beautiful art work that the young people themselves painted. Altogether, these brought about a comfortable environment for children to live in. There was a large television and board games and staff and young people told the inspector that they were used from time to time. This communal space was also used as the centre dining area and was adjacent to the kitchen, which was small but functioned adequately. Each young person had their own bedroom which they were supported to decorate according to their preferences.

The model of care was fully implemented in the centre. It set out that staff would endeavour to develop meaningful and trusting relationships with young people. The centre aimed to provide a therapeutic living environment with interactions informed by attachment and trauma theory. The model of care outlined themes, under which individualised work with young people was to take place. Staff who spoke to the inspector demonstrated a shared understanding and consistent implementation of this approach.

Young people were facilitated to maintain appropriate contact with their families significant others. Although visits to the centre were not restricted due to COVID-19, some of the young people living in the centre were originally from areas that that were over two hours travel distance. This meant that visits from family members to the centre were infrequent given the travel time. However, the centre encouraged and accommodated appropriate contact through phone calls, video conferencing and they also transported young people to their families for pre-arranged visits.

Each of the three young people in the centre had an allocated social worker. Two of the three young people experienced changes to their social worker in the weeks prior to the inspection and the newly allocated social workers had not yet visited them. However, social work visits had been scheduled for the weeks following the inspection. Centre records showed that social workers telephoned the centre regularly, which ensured that social work contact was maintained in the absence of visits. In addition, where there had been a recent escalation of identified risks for one of the young people, the social work department scheduled multi-disciplinary meetings, every two weeks. This showed that professionals were alert and proactive at monitoring the placement and reviewing actions to address the

risks. At the time of the inspection, the professions who spoke with the inspector said that time was needed to see if actions would be effective.

All young people had meetings held to devise a care plan. Young people were encouraged and facilitated to participate in their child-in-care reviews and where they did not attend, the social worker sought their views in advance. Two of the young people had care plans on centre files. The third young person was admitted in the month prior to the inspection and a care plan had not yet been sent to the centre, from the respective social work department. The centre manager and identified key worker for the child attended the child in care review and recorded the actions while they awaited a written copy of the care plan. This ensured the centre had the required care planning details to enable placement planning to proceed.

The centre ensured that individualised placement plans and placement support plans were completed and up-to-date for young people. Placement plans were informed by overarching actions in the care plans, and broken down into comprehensive and detailed objectives, aligned to the needs and preferences of young people. The inspector reviewed two of the three placement planning arrangements and found they were good quality with specific actions to inform interventions with young people.

Young people were supported in the transition from childhood to adulthood. This was a key feature of placement planning in the centre. The inspector found that staff sought opportunities for young people to develop independent living skills, appropriate to their age, development and experience of trauma. One young person had an allocated aftercare worker and work was beginning to help this young person to prepare for adult life once they turned 18 and had left the centre.

The centre used a positive approach to the management of challenging behaviours. Personal relationships with young people were developed by staff to understand the context of behaviours and to reflect the impact of behaviours back to young people. There were no restrictive practices in use in the centre. Thirteen out of 15 staff members had up-to-date training in a Tusla-approved approach to managing behaviours that challenge. The centre had systems and supporting documentation to guide staff when young people entered a time of crisis. All young people had an individual crisis management plan and an absence management plan to guide staff responses.

There was an appropriate system in place to identify and report significant events and incidents, in line with the Tusla national policy and procedures. The inspector reviewed significant event notifications (SENS) for two of the young people and found there had been a combined total of 235 SENS for the 12 months prior to the inspection. Of concern, 179 of these related to incidents when a child was not in the centre, either absent without permission, absent at risk or missing from care. The highest proportion of incidents related to missing from care (116), where a young person was not in contact with the centre for

five hours or more. In these situations, the centre appropriately notified An Garda Síochána to report them as missing from care. At the time of the inspection, missing from care incidents had reduced for one young person who appeared to be more settled. For the other young person, it was evident that risk taking behaviours had increased and as stated, multi-disciplinary meetings were held every two weeks to monitor and review actions put in place to reduce such incidents.

The centre promoted the safety and welfare of young people. The centre manager was the designated liaison person (DLP) for the centre. Staff who spoke to the inspector demonstrated an appropriate knowledge of how to recognise and report any concerns. It was evident that staff were vigilant in monitoring the safety and wellbeing of children. Young people who provided feedback to the inspector said they felt safe while living in the centre. The centre manager ensured that child protection concerns were reported to the respective social work departments, in line with Children First legislation. At the time of the inspection, there were four child protection concerns in respect of the children living in the centre. All related to incidents that occurred outside the centre and were open for assessment by the social work department.

There was an up-to-date safety statement in place. Fourteen out of 15 staff had up-to-date training in fire safety. Fire precautions throughout the centre were adequate and had evidence of regular checks by a relevant professional. Fire exits were clearly signposted and unobstructed. In addition, young people had a personal emergency evacuation plan (PEEP) in place which was aligned to their individualised needs.

The health and development needs of young people were identified prior to admission or soon after their placement in the centre. Records showed that young people were supported to attend their general practitioner (GP) soon after their placement. While medical cards were held on file for each young person, the centre did not hold records of immunisations and medical histories. Young people were also supported to attend dental, GP, optical or any specialist services that they required on an ongoing basis. Staff in the centre, assigned as keyworkers to young people, monitored areas such as sexual health education

The centre had comprehensive medication management policies and procedures in place to support the safe practice in relation to medication storage, administration and disposal. Fourteen out of 15 staff members had received up-to-date training in medication management. The inspector found that individual medication records, such as prescription and administration sheets, were appropriately maintained in line with policies and procedures. The centre manager carried out monthly audits to identify any potential errors, of which there was none for the 12 months prior to the inspection.

Standard 1.5

Each child develops and maintains positive attachments and links with family, the community, and other significant people in their lives.

Regulation 8: Access arrangements

Young people were facilitated to maintain appropriate contact with their families and significant others.

Judgment: Compliant

Standard 2.2

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

Regulation 23: Care Plan**Regulation 24: Supervision and visiting of children****Regulation 25: Review of cases****Regulation 26: Special review**

The centre ensured that placement plans were in place and up-to-date for young people. Placement plans were informed by overarching actions in the care plans and child in care reviews. At the time of the inspection, each young person had an allocated social worker. Communication between the centre and relevant professionals was frequent and effective.

Judgment: Compliant

Standard 2.3

The children's residential centre is homely, and promotes the safety and wellbeing of each child.

Regulation 7: Accommodation**Regulation 12: Fire precautions****Regulation 13: Safety precautions****Regulation 14: Insurance**

The centre was safe and homely. Both indoor and outdoor areas were tidy and well maintained. Communal areas provided a comfortable environment for children to live in. Each young person had their own bedroom and they were supported to decorate them in accordance to their preferences. There was an up-to-date safety statement in place. Fire precautions throughout the centre were adequate.

Judgment: Compliant

Standard 2.6

Each child is supported in the transition from childhood to adulthood.

Young people were supported in the transition from childhood to adulthood. Staff sought opportunities for young people to develop independent living skills, appropriate to their age and development.

Judgment: Compliant

Standard 3.1

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

The centre promoted the safety and welfare of young people. Young people who provided feedback to the inspector said they felt safe while living in the centre. Staff demonstrated an appropriate knowledge of how to recognise and report any concerns. The centre manager ensured that child protection concerns were reported to the respective social work departments, in line with Children First legislation.

Judgment: Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

The centre used a positive approach to the management of challenging behaviours. Of concern, there was a relatively high number of incidents when a child was not in the centre, either absent without permission, absent at risk or missing from care. At the time of the inspection, risk taking behaviours had increased for one young person. The centre had systems in place to manage risks, such as appropriately notifying An Garda Síochána to report them as missing from care and scheduling multi-disciplinary meetings every two weeks to monitor and review actions put in place to reduce such incidents. Nonetheless, these were ineffective at the time of the inspection and for this reason, the centre was judged as substantially compliant.

Judgment: Substantially Compliant

Standard 4.2

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

Regulation 9: Health care**Regulation 20: Medical examination**

Young people were supported to meet their health and development needs. The centre had comprehensive medication management policies and procedures in place to support the safe practice in relation to medication storage, administration and disposal.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
<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
<p>Standard 6.1 The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.</p>	Compliant
Quality and safety	
<p>Standard 1.5 Each child develops and maintains positive attachments and links with family, the community, and other significant people in their lives.</p>	Compliant
<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 2.3 The children's residential centre is homely, and promotes the safety and wellbeing of each child.</p>	Compliant
<p>Standard 2.6 Each child is supported in the transition from childhood to adulthood.</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>	Substantially Compliant
<p>Standard 4.2 Each child is supported to meet any identified health and development needs.</p>	Compliant

