



Report of a Children's Residential Centre

Name of provider:	The Child and Family Agency
Tusla Region:	West
Type of inspection:	Unannounced
Date of inspection:	10 and 11 March 2020
Centre ID:	OSV 4202
Fieldwork ID	MON 0028875

About the centre

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

The centre had temporarily relocated to a former children's residential centre in the suburbs of a city due to substantial renovation works being undertaken in the main residential centre. The move had occurred in August 2019 with a proposed timeframe for completion of the renovation works to the main residential centre within six months. The temporary accommodation was a detached two storey house located in a quiet cul-de-sac of a housing estate. It had easy access to all facilities within the locality. At the time of inspection, the statement of purpose and function provided to inspectors had been amended to reflect the move and the minor adaptations within the centre to allow for a semi-independent living space for the young people.

The centre provided placements for three young people aged 16 to 17 years on admission of a mixed gender who want to develop their skills and gain experiences which will strengthen their ability to live independently on leaving care. Young people could reside in the centre up to the age of 18 years. The programme works in partnership with young people.

The overall aim of the centre was to ensure that on leaving care, a young person would have the skills, confidence, network of support and educational or employment prospects to support them into adulthood.

Number of young people on the date of inspection:	2
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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
10 March 2020	10:30hrs to 17:15hrs	Sharron Austin	Inspector
	10:30 hrs to 16:00hrs	Erin Byrne	Inspector
		Leanne Crowe	Inspector
11 March 2020	08:30hrs to 13:30hrs	Sharron Austin	Inspector
		Leanne Crowe	Inspector
	08:30hrs to 12:30hrs	Erin Byrne	Inspector

Views of children who use the service

Two young people were living in the centre at the time of the inspection. The centre had re-located on a temporary basis from individual apartment type accommodation to a communal living arrangement and the young people had adapted well. Both young people had their own rooms and their privacy was maintained, despite the limitations of the house's recreational spaces.

Young people had appropriate access to areas within the centre and could leave the premises unimpeded.

Inspectors spoke with one young person who lived in the centre. When asked what they liked about the centre, they said "I like it here and they're (staff) there for you." "This place has supported me and done a lot for me." Comments about staff and their programme of care were generally positive and young people were well supported in their transition out of care to independent living.

Social workers and aftercare workers told inspectors that the programme of care in the centre met the individual needs of the young people in their preparation for leaving care and adulthood. They felt that the centre provided a good quality service to the young people living there. Individualised care was provided and the social worker stated that this has had a positive impact on the young person. The centre communicated well with the social worker and after care worker, and provided regular updates on the progress of the young people.

Inspectors spoke with a parent of one young person. The parent outlined that they were supported to be involved in the young person's plan of care, and were informed of any changes to this. However, they felt communication could improve, stating that the centre had not informed them of a recent incident.

Inspectors observed good communication between the staff team and the young people. It was obvious to inspectors that the young people were receiving a good quality service from a committed team.

Capacity and capability

The management structure in place ensured there were clear lines of authority and accountability. The centre had a suitably qualified and experienced interim centre manager in place who was supported by an interim deputy manager. The centre manager reported to a deputy regional manager, who reported to the regional manager of the national children's residential services in the West region.

The statement of purpose provided to inspectors had been amended to reflect the temporary re-location of the centre and the minor adaptations made to allow for a semi-independent living space for the young people pending their move back to apartment living.

As well as a physical move from the main location to the current residential centre, there had also been changes in the management structure. The centre manager was appointed to the role in July 2019, having previously been the deputy social care manager in the centre since August 2018. The centre had an interim deputy manager who was also appointed in July 2019. Roles and responsibilities between the management team were clearly defined and good working relationships were evident. The centre manager was supported and supervised by an experienced deputy regional manager appointed in April 2019. In spite of these changes and disruptions, a consistent service was maintained.

The centre was well led and there was strong leadership, which focused on high quality interventions. The staff who provided direct care to young people were experienced and skilled. From a review of documentation and interviews with staff, it was clear that the staff and management team strived towards the best possible outcomes for young people. Managers and staff had a shared understanding on what was appropriate and safe practice with young people.

Roles and responsibilities were well defined in the centre. The centre manager and deputy manager were present in the centre on a daily basis and actively observed practice and interactions between staff and young people. There was good management oversight of the service provided to the young people. Management systems were effective to ensure accountability for the delivery of services at individual and team level. Managers were assured of the quality and safety of the care provided to young people through regular management meetings, team meetings, the review and monitoring of centre documentation and practices as well as oversight of audits. Records of these meetings demonstrated the discussions held in relation to key areas of care provision as well as assurances in relation to resources, record keeping, interagency working, the risk register and overall outcomes for young people.

Statutory requirements in relation to the young people were in place and each had an allocated social worker and aftercare worker. Care and placement plans were on file and were found to be comprehensive and outlined clear goals for each young person based on their individual needs and how best they might be achieved.

Centre managers carried out daily checks of key documents such as daily logs, rosters, mentoring records and significant event notifications. This provided assurances that good quality care was provided to young people. Records also showed that the deputy regional manager for the West visited the centre at regular intervals to review documents, as well as to meet with staff and the young people. A record of these visits was maintained which

documented the activities or auditing undertaken by the regional and/or deputy regional manager during their visit to the centre. This was a good example of managerial oversight and showed that there were consistent efforts to embed a culture of learning and continuous improvement in the centre.

Communication systems in the centre were effective and were reported to be good by staff. Managers communicated well with each other and with the staff team. Handover meetings between shifts as well as regular team meetings covered all relevant aspects of young people's care planning along with other care and operational practices. Inspectors observed a team meeting during the inspection which demonstrated good discussion on agenda items related to all aspects of the service and clear decisions recorded for action.

Risks were well managed in the centre. An impact risk assessment was completed before any young person was admitted to the centre and a review of these records found that the risk assessment process was strong and well recorded. The centre maintained risk assessments in relation to the centre and individual young people which demonstrated evidence of appropriate actions being taken to mitigate risks. A social worker told the inspector that where risks had increased for one young person, the service was proactive in managing the risk and ensured full interagency planning to mitigate the risks.

Significant events were comprehensively recorded, reported and responded to promptly. Incidents were recorded as a significant event notification (SEN) and then notified to the relevant persons, such as the young person's social worker. These events were managed appropriately and in line with Tusla's national centralised notification system. Centre managers and the line manager maintained oversight of SENs. A review of a sample of these records demonstrated that comprehensive records were maintained, outlining all appropriate steps taken by staff to manage the situation. A comprehensive review of each event was completed by the centre managers with oversight by the deputy regional manager. Where required, significant events which occurred in the centre were selected for presentation at the regional significant event review group (SERG) which promoted learning among staff.

At the time of inspection, the centre had sufficient staff in place to ensure young people's needs were met at all times. However, the centre manager and deputy regional manager told inspectors that if and when a third young person was admitted to the centre, the number of staff would be insufficient to safely provide care over a sustained period. This was recorded on the centre's risk register. There had also been some changes to the staff team in the previous six months to this inspection. One staff had left the service, a second staff had been reassigned to another service within the region and three staff were on other leave. However, the current staff team were experienced and had a broad range of skills to meet young people's needs. External professionals who spoke with inspectors spoke highly of the staff team, outlining that the staff were very focused on the young person and ensured interagency involvement and communication at all levels.

Staff received an appropriate level of supervision on a regular basis and the quality of supervision records was good. A review of a sample of supervision records also found that staff were supported in the discussion of key themes within the new national standards for children's residential centres (2018) and what was required to meet those standards. This was good practice for the preparation of children's residential centres becoming designated centres in the future as well as currently ensuring the provision of a quality service to young people.

Collectively these aspects of leadership, governance and workforce informed the quality of service which is set out in the next section of this report.

Standard 2.4

The information necessary to support the provision of child-centred, safe and effective care is available for each child in the residential centre.

The young people had individualised care records that were securely stored. Care records reviewed by the inspectors found statutory requirements in relation to the young people were in place.

Judgment: Compliant

Standard 3.3

Incidents are effectively identified, managed and reviewed in a timely manner and outcomes inform future practice.

Incidents recorded as significant event notifications were notified to all relevant persons including social workers, monitoring officer, guardian ad litem and parents where appropriate. There was good oversight by the centre's line management and additional external review systems in place.

Judgment: Compliant

Standard 5.1

The registered provider ensures that the residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect and promote the welfare of each child.

There were effective governance and management arrangements in place for the centre with clear lines of authority and accountability. Management and staff had good knowledge of relevant legislation, regulations and national standards. The supervision of the staff team was regular and comprehensive records were maintained. These records

demonstrated the discussion of key themes within the new national standards for children's residential centres (2018) and what was required to meet those standards. This was good practice so as to ensure the provision of a quality service to young people.

Judgment: Compliant

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 systems in the centre ensured effective oversight, monitoring and review of all aspects of care provision. There were adequate systems in place to monitor the operation of the service and to review the quality and safety of the care provided. Risks were well managed in the centre. The centre maintained risk assessments in relation to the centre and individual young people which demonstrated evidence of appropriate actions being taken to mitigate risks.

Judgment: Compliant

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 and function clearly described the model of service delivered in the centre. The statement of purpose described the organisational structure and the management and staff employed in the service.

Judgment: Compliant

Quality and safety

Inspectors found that the young people living in the centre received person-centred care and support, which enhanced their quality of life. The model of care in the centre facilitated a good quality programme of care for young people. This programme was effectively co-ordinated between various services, was developed for each young person, and was regularly reviewed in line with their individual needs and goals. This model of

care focused on promoting positive outcomes, independence and life skills for the young people, particularly in relation to transitioning to an aftercare programme. Each goal was set out in detail, as well as the supports required in achieving these goals. Integrated care planning was supported by input from various services and professionals. Each young person had a social worker and after care worker, and other professionals were involved as necessary. Family members and the young people were also actively involved in the care-planning process. One young person who spoke with inspectors confirmed that they were invited to and attended the care plan review meetings. However, inspectors found that one young person had not had a child-in-care review since becoming a resident in the centre in November 2019. On the second day of the inspection, it was confirmed that this review was due to take place in the coming weeks. Staff who spoke with inspectors were very knowledgeable of each young person's individual needs.

The centre had a clear admissions process. The centre's model of care required young people referred to be motivated to make the best use of the care programme. This was to ensure that young people had the appropriate skills, confidence and network of supports so as to transition to adulthood. A pre-admission assessment meeting was held with the young person and their social worker, so as to identify the young person's areas of strengths and those that required development. An impact risk assessment was completed prior to a young person's admission to care and these were evident of the care files reviewed.

Young people were supported to maintain relationships with family and significant others. For the most part, inspectors found that there was good communication between the centre and the relevant people in the young people's lives. Social workers told inspectors that they received regular updates on young people's progress and were notified promptly of any issues arising.

The young people were supported to attend school. The young people were encouraged and supported to participate in activities relevant to their interests and hobbies, such as motor cross and volunteering as a youth leader.

There were systems in place to maintain young people's safety in the centre. This was confirmed by a young person who spoke with inspectors, who confirmed that they felt safe. Safety planning was in place in relation to any identified risks and were regularly updated. Unplanned absences were well managed. Staff were appropriately trained in Children First (2017) and demonstrated a good knowledge about safeguarding and child protection practices.

The centre was previously located in another building, which comprised a number of independent living apartments. These premises were undergoing significant renovations, resulting in the young people being accommodated in the current location since August 2019. Each young person had their own bedroom in the current premises, but they were

required to share communal spaces such as the kitchen and sitting room. However, one young person informed inspectors that they were satisfied with the premises. Staff outlined how they ensured the young people's privacy was maintained, despite the limitations of the house's recreational spaces. On the day of the inspection, the centre was found to be comfortable, clean and in a good state of repair. A maintenance log was held in the centre, and staff described a recent issue with the premises that had been quickly rectified once reported. All vehicles used by the centre were maintained and serviced as required. Records indicated that each car was assessed in an approved garage on a weekly basis.

Fire safety was adequate in the centre. Fire fighting equipment was in place, and appropriate checks were carried out on a quarterly basis. The fire register in the centre had records of fire drills involving staff and young people.

Incidents were comprehensively recorded, and appropriate mentoring or structured conversations were held with the young people to explore the incident and what could be different in the future. There had been no incidents of the use of restrictive interventions or practices in the 12 months prior to the inspection.

Standard 2.1

Each child's identified needs informs their placement in the residential centre.

Young people admitted to the centre were subject to a pre-admission assessments including an impact risk assessment. There was good communication between the young people's allocated social workers, aftercare workers and the staff team to ensure the placement continued to meet the young person's needs. Young people were supported to participate in activities relevant to their interests and hobbies and attend educational placements

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.

Integrated care planning was supported by input from various services and professionals. Each young person had a social worker and after care worker, and other professionals were involved as necessary. Care and placement plans were on file and were found to be comprehensive and outlined clear goals for each young person based on their individual needs and how best they might be achieved. One young person had transitioned to the centre in November 2019 as a step down placement from another centre within the service. While the centre had a system in place to promote the holding of regular child in care reviews with social workers in line with the regulations, the last child in care review for this young person took place in July 2019. A review date for the end of March 2020 had been confirmed during the inspection.

Judgment: Compliant

Standard 2.3

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

The centre was found to be comfortable, clean, well maintained and in a good state of repair. Each young person had their own bedroom in the current premises, but they were required to share communal spaces such as the kitchen and sitting room. Young people's privacy was maintained, despite the limitations of the house's recreational spaces. Records indicated that each car was appropriately serviced and assessed on a regular basis. The fire precautions in place ensured the centre was sufficiently prepared in the event of a fire.

Judgment: Compliant

Standard 2.5

Each child experiences integrated care which is coordinated effectively within and between services.

Inspectors found that the young people living in the centre received person-centred care and support, which enhanced their quality of life. The model of care in the centre was effectively co-ordinated between various services, was developed for each young person, and was regularly reviewed in line with their individual needs and goals.

Judgment: Compliant

Standard 2.6

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

The model of care focused on promoting positive outcomes, independence and life skills for the young people, particularly in relation to transitioning to an aftercare programme. Care records demonstrated the direct work or mentoring undertaken with each young person to achieve their goals.

Judgment: Compliant

Standard 3.1

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

There were sufficient measures in place to ensure young people were safeguarded in the centre and that their care and welfare was protected and promoted. The centre had

an up-to-date safeguarding statement in place. All staff had garda vetting in place and had a good understanding and working knowledge of Children First (2017).

Judgment: Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

Staff maintained good relationships with the young people, promoting positive behaviour and updating interventions in line with their placement plan and programme goals as required.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
<p>Standard 2.4 The information necessary to support the provision of child-centred, safe and effective care is available for each child in the residential centre.</p>	Compliant
<p>Standard 3.3 Incidents are effectively identified, managed and reviewed in a timely manner and outcomes inform future practice.</p>	Compliant
<p>Standard 5.1 The registered provider ensures that the residential centre performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect and promote the welfare of each child.</p>	Compliant
<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>	Compliant
<p>Standard 5.3 The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.</p>	Compliant
<p>Standard 5.4 The registered provider ensures that the residential centre strives to continually improve the safety and quality of the care and support provided to achieve better outcomes for children.</p>	Compliant
Quality and safety	
<p>Standard 2.1 Each child's identified needs inform their placement in the residential centre.</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 2.5 Each child experiences integrated care which is coordinated effectively within and between services.</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>	Compliant