



Report of a Children's Residential Centre

Name of provider:	The Child and Family Agency
Tusla Region:	South
Type of inspection:	Unannounced
Date of inspection:	19-20 January 2023
Centre ID:	OSV00-005720
Fieldwork ID	MON-0038687

About the centre

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

The service is able to provide care for up to three male children aged 13 to 17 years. It has a particular focus on supporting young people with behaviours that challenge. The objective of the service is to provide a high standard of care and intervention to enable young people to address their life experiences and develop alternative skills and coping strategies to help them live safely in their community. Centre staff aim to achieve this through a supportive, nurturing and holistic living environment that promotes their wellbeing, safety, rights, education and community involvement.

The care practice of centre staff adheres to Tusla's nationally approved model of care which aims to provide a therapeutic living environment for each young person. Each young person has an individual intervention plan, which is regularly reviewed and tailored to their unique developmental needs. The involvement of the young people, their families and other agencies is at the heart of care interventions.

Number of children on the date of inspection:	2
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How we inspect

To prepare for this inspection, the inspectors reviewed all information HIQA holds 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 young people were safe. It includes information about the care and supports available for young 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
19 January 2023	09.00-17.00	Sue Talbot	Inspector (On site)
19 January 2023	09.00-17.00	Sheila Hynes	Inspector (On site)
20 January 2023	09.00-16.00	Sue Talbot	Inspector (Remote)
20 January 2023	09.00-16.00	Sheila Hynes	Inspector (Remote)

What children told us and what inspectors observed

Overall, inspectors found that centre staff actively promoted young people's rights, and recognised their individual needs and strengths which led to the delivery of a high standard of child-centred care. The staff team prioritised the safety and wellbeing of young people and supported them to reach their full potential.

Inspectors spoke to young people, their families and other professionals about their experience of the service and of their relationships with the staff team. All were complimentary about the centre staff and their approach to the delivery of care.

Inspectors spoke with both young people resident at the time of the inspection. They said they knew about their rights and that this was regularly discussed with them by staff and their social workers. Young people were encouraged and supported to participate in their child-in-care reviews, and their choice not to attend their meetings was respected. Young people said they were satisfied with the support they received and that staff listened to them. They also said they would prefer not to be in residential care or placed at a distance from their home and community.

Inspectors spoke with one parent who said they were pleased with the quality of care provided. They recognised that it had taken time to build a routine and structure that worked for the young person in all aspects of their life. They reported good communication with centre staff who kept them up to date with what was happening. They were encouraged to participate in planning and decision-making about the best ways to help their child. They said they had seen good progress in the time since the young person was placed:

'The difference is fantastic- everything is going well at the moment. The staff are wonderful. I have nothing but praise for them'.

Inspectors also spoke with the young people's social workers and Guardians ad litem¹. They said young people had given good feedback about the centre staff and that they were treated well. All were very satisfied with the quality of care provided. They commented on the levels of staff attention, skill and support available to help the young people achieve better outcomes. They also spoke about the thoughtful and persistent approach shown by staff in seeking to engage young people and help them explore a range of activities and access specialist help.

¹ Court appointed independent social workers who represented children in decisions about their care.

They reported that the service had appropriate systems for responding to safeguarding concerns, and that the staff team reported and carefully monitored areas of increased risk to the young people. Overall, they said they thought the service was well managed and that staff were calm and kind in their approach:

'Staff have a good way of working with him, they recognise and meet him where he is at. They promote his rights and ensure his voice is heard.'

The next two sections of the report provide the findings of this inspection on aspects of management and governance and the quality and safety of the service.

Capacity and capability

Overall, inspectors found that this was a well-run centre. Managers and staff were suitably skilled and experienced. They clearly understood their roles and responsibilities for keeping young people safe, promoting their rights and meeting their individual needs. The roles and accountabilities of centre managers and social care leaders were clearly defined, and the leadership and governance of the care provided was good. Management cover and on-call arrangements worked well. Since the last inspection, a new centre manager had been appointed who ensured the centre's previous high standard of performance was sustained, while encouraging new approaches to organisational development and service improvement.

Management oversight and support for the work of the frontline team was strong across all service operations at both the centre and regional provider level. This included direct work with the young people, multi-agency meetings and review of case records. Partnership working with families, social workers, An Garda Síochána and other professionals and specialist agencies was actively promoted and well-managed. This helped ensure a high standard and consistency of care in working together to address risk and meet young people's individual needs.

The centre's management team had clear priorities underpinning its service improvement activity. Plans were progressing well to re-locate the centre to a more suitable location in a community setting. This had been a priority for the service provider for some time and was recognised in Tusla's regional strategic plan for residential centres. The centre risk register contained analysis of the nature and severity of organisational risk, with appropriate control measures in place and ongoing monitoring and review.

Staff training, development and supervision arrangements were well-established and effective. Handover arrangements were thorough and helped ensure continuity of care and recognition of workload priorities in enabling young people to have a good day or work through any outstanding issues.

Inspectors observed strong communication and teamwork at the heart of service operations. Policies, procedures and risk management systems were effectively embedded within care practices. This helped ensure a shared approach to improving outcomes for young people and provided a clear structure for the identification, management and ongoing monitoring of risk. All staff spoken with were striving to provide children with the best possible care and to maximise their potential.

Staff team meetings were regularly held and had agreed agendas which helped ensure ongoing monitoring of the quality and safety of care delivered. Records contained checks of outcomes from child protection reports and complaints, and evidenced sharing of learning. Managers sought and received assurances that young people's case records, including their placement, support and crisis management plans were up to date. Team discussions reflected progress made and ongoing challenges for each young person. Significant event notifications were also reviewed at team meetings and helped to promote shared understanding of young people's emerging or changing needs, risks and alternative strategies required at an individual and peer group level.

The centre's statement of purpose was recently reviewed following the appointment of the new manager and centre provision returning to its original location. The review sought to ensure the service offer was in line with organisational objectives and that its structures and systems could support better outcomes for young people. The new statement of purpose clearly and accurately described the service offered, including its aims and ethos, staffing arrangements and facilities. It provided an overview of its therapeutic approach and culture of partnership working. It also clearly outlined its arrangements for safeguarding young people and improving their outcomes in line with Tusla's national approach and its wider policies and procedures for residential care services. This detail was also included in an information booklet for young people which was written in a child-centred, right-based way. Children, families and other professionals inspectors spoke with were aware of the model of care and the expected standards of practice.

Centre managers clearly understood their responsibilities for achieving the standards of governance and care practice set out in the *National Standards for Children's Residential Centres* (2018). They were actively preparing for the centre's future registration with HIQA in anticipation of additional regulatory powers being approved by government. Managers had prioritised and taken appropriate action to address areas for improvement highlighted in HIQA's previous inspections and Tusla's performance assessment and service monitoring (PASM) team reports.

The service annual plan for 2023 was under development at the time of the inspection. The centre management team had clear actions to support implementation of its service improvement priorities. Centre managers together with regional managers, regularly conducted quality audits and checks of the impact of care provided. This included health and safety checks and review of compliance with the expected standards of practice in line with organisational policies and procedures. Managers sought assurances that risks were appropriately managed and that records were up to date. Practice review with the wider staff team helped promote consistent implementation of the nationally approved model of therapeutic care. The manager together with the deputy regional manager analysed key performance data, themes and trends and issues arising from the management of significant events in relation to the safety and welfare of the young people and their experiences of care.

Inspectors found the service had well-established systems for reviewing and monitoring the quality and safety of care provided to each young person, and was open to learning from its successes and what had not worked well. Centre staff had a good understanding of and appropriately implemented Tusla's policies and procedures. Managers convened regular professionals meetings with others to explore alternative strategies for managing young people's episodes of challenging behaviour. Nevertheless, unauthorised absences and recurrent episodes of the young people going missing from care remained areas of high concern to the service provider.

The centre staff had good access to a range of specialist support and consultation in planning, assessing and reviewing the impact of work undertaken to improve young people's outcomes. Children's placement and progress plans and their individual and collective risk assessments were effectively overseen, reviewed and updated by the centre staff and management team, the child's case manager and key workers. Barriers to, and the sustainability of young people's progress were carefully considered in work to promote their engagement.

Risk escalation processes including significant event notifications, children missing from care and 'Need to Know'² processes were appropriately managed. Relevant others; including the young people's families, senior managers and partner agencies were promptly informed of concerns. Inspectors reviewed these records and found incidents were clearly and comprehensively recorded by the staff team and reviewed by centre and regional managers. Inspectors observed, and staff members interviewed reported that managers were visible, responsive and supportive of the team through what has been a recent period of significant challenge and risk.

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 service was effectively led, governed and managed. Managers and staff were suitably skilled, experienced and accountable for their work. Care practice was underpinned by a strong child-centred culture and systems which recognised young people's rights and promoted their safety.

Judgment: Compliant

Standard 5.3

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

The service provider's statement of purpose was up to date, and clearly and accurately outlined the standards of care and support provided by the centre. Children, their families, other professionals and frontline staff all had a good understanding of the aims and objectives of the service.

Judgment: Compliant

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.

The service provider's leadership, systems and team working culture enabled a high standard of care in supporting young people with complex needs and behaviours. This was grounded within a shared ambition to achieve better outcomes for young people, with strong promotion of organisational learning, partnership working and a shared commitment to continual service improvement.

² Tusla's system for informing senior managers about significant risks to the safety and welfare of children.

Managers made effective use of audits and regularly reviewed service performance in line with organisational objectives, policies and procedures. They had good oversight of the day-to-day experiences of young people.

Judgment: Compliant

Quality and safety

Overall, inspectors found the service delivered a high standard of child-centred care, with staff actively working to help young people feel safe and valued. They sought to build open and supportive relationships with young people that recognised their individual needs, age and stage of development and their potential. Young people's identity and contact with their families was promoted in line with their wishes. Care practice adhered to Tusla's policies and procedures and staff effectively discharged their responsibilities to protect children and act in their best interests.

Care provided recognised the diverse needs and backgrounds of young people, and promoted their rights and privacy. Behaviour support plans sought to help young people better understand the risks they were exposed to and the impact of their actions. The approach included clear strategies for dealing with situations they found difficult to handle. Time-limited restrictions of young people's freedoms were selectively used and regularly reviewed, and were balanced by a strong focus on incentives and recognition of their progress and achievements.

Inspectors observed that the staff team communicated effectively and worked well together in implementing young people's individual care and support plans. Children's rights were actively promoted by the staff team who encouraged young people to speak up about the things that mattered to them. They were enabled to give feedback on their experience of the service and to use the complaints process, and were provided with opportunities to meet with and speak with independent advocates.

Young people's meetings were regularly held and provided a forum for them to raise issues or make requests. Such meetings also helped ensure young people were aware of key policies such as complaints or smoking and the need to balance their rights with risks including discussions about the routines and boundaries required to help keep them and others safe. Matters raised by the young people in turn were discussed in staff team meetings, with timely feedback given to them. It was evident from centre records that issues raised by young people were prioritised and carefully considered by the whole staff team.

Care and placement plans recognised the diversity of young people's needs and their preferences, including in the practice of their faith and what they liked to eat. Good attention was paid to promoting their health and welfare, with evidence of creative approaches and involvement of specialist agencies in shared work to help them have better outcomes. Staff prioritised young people's right to feel safe and protected, including supporting them to recognise and manage any issues arising from incidents of bullying or assault and their use of social media.

Young people's right to an education was strongly promoted by centre staff. Together with other relevant professionals, they continued to explore a range of support strategies, education and training options to help promote young people's engagement and recognition of the value of learning to their future career prospects. The approaches taken recognised young people's complex histories, motivations, interests and the additional support they needed. However, the young people had not been able to sustain their attendance; and at the time of this inspection, both young people were not attending school. Education and further training remained a high priority for them within their placement and progress plans.

Young people's right to privacy and personal space was recognised and sensitively managed. Day-to-day care routines promoted this, including enabling them to have time on their own. Young people's bedroom areas were respected and they could lock their bedroom doors. There was ample space where they could store their personal belongings. Young people were supported to purchase their own clothing and to take care of their personal belongings.

Young people's care records were held securely and their right to confidentiality and limits to confidentiality were appropriately managed. Young people were advised of their right to see and sign their records; though for several months, they had chosen not to do so when this was offered. Managers were working to encourage young people to contribute to and review their personal records, including their daily diaries, and to sign their meeting and key worker records.

The centre's admissions process was effectively managed and took account of the complexity of existing residents' needs alongside consideration of the suitability of new referrals. The process was underpinned by detailed risk management processes, with careful thought given to matching and promoting placement stability. The process was effective in identifying young people whose needs could not be adequately met or where the timing of a new admission required further consideration. Senior managers had authorised time-limited restrictions to new admissions where it was seen to be likely to have a negative impact on the safe operations of the centre or not to be in the best interests of the young people.

Collective risk assessments were effectively used as part of the admissions process. They were completed by the centre manager together with the young person's social worker, and provided a clear structure for assessing and reviewing the complexity of young people's presenting needs. In addition, they assisted in the analysis of risks in relation to peer dynamics and matching. The approach also recognised additional considerations in relation to placing children 12 years or younger and those with intellectual disabilities with older children in the residential care setting.

Inspectors reviewed the individual and collective risk assessments for current residents and a potential future resident and found the record-keeping template provided a clear and succinct description of all relevant risks and protective factors. It provided key information about past patterns of risk, its frequency and severity, and the likely impact for the child referred. The process also took account of service capacity to manage and monitor such risks over time, and included agreed actions for promoting young people's safety.

Young people's admission records provided clear information about their need for therapeutic care in a residential environment. Decisions to admit young people to residential care were jointly approved by the centre and regional senior managers. Records evidenced good joint working with the young person's social worker in developing a comprehensive assessment of their needs, with effective co-ordination of their care plan and placement plan goals.

Inspectors saw that young people's care records contained all relevant documents as set out within the placement of children in residential care regulations. The timing and suitability of new admissions was carefully considered and subject to ongoing review.

Centre staff had a strong shared focus on enabling young people to settle and get the help they needed. Booklets were provided to them about what to expect from residential care and their rights. Staff demonstrated sensitivity and understanding of young people's history and to ensuring they felt welcome and well-cared for. Key workers played an active role in helping them start to address key gaps in their health, development and education.

Managers and frontline staff clearly understood their roles and responsibilities for keeping young people safe and knew how to report child protection concerns. The staff team ensured risks were effectively identified, managed and reported in line with *Children First* guidance (2017) and Tusla's policies and procedures. Centre staff worked closely with other agencies to address risk and reduce harms. The centre's Child Safeguarding Statement was clearly displayed on the centre noticeboard. Staff were also aware of their responsibilities to make a protected disclosure.

Staff at all levels had completed a range of mandatory and specialist training, and sought to keep themselves up to date with recent developments in policy and practice. Young peoples' families, their social workers, team leaders and Guardians ad Litem were promptly informed of any concerns, incidents or child protection issues. In the event of young people being hurt or having an accident, they received medical care in a timely manner. The young people were supported to be aware of risks and strategies for keeping themselves safe on line and in the local community.

Professionals and child protection strategy meetings were held when required, and involved all relevant people and agencies. Records of these meetings provided a clear summary of the nature and level of risks the young people were exposed to. They took account of their individual needs as well as wider contextual factors in developing joint approaches to help them stay safe within and outside the home. Such records also set out agreed priorities and plans for each young person to address areas of ongoing significant risk.

Arrangements for children missing from care were detailed within their individual absence management plans, and were regularly reviewed and updated in relation to risks of ongoing harm or exploitation. However, there continued to be recurrent unauthorised episodes when the young people left the service setting or went missing from care. Managers, through their sign-off and monitoring of significant events notifications tracked the levels and frequency of absence and ensured practice complied with the Joint Protocol with An Garda Síochána for reporting such concerns. Family members and partner agencies were routinely informed about these unauthorised absences. Trends and themes for each young person in relation to missing from care episodes were routinely reviewed. Young people were also spoken to on their return to the centre to better understand their reasons for leaving.

The service provider had appropriate arrangements for identifying, managing and reviewing young people's behaviours, including risks to their safety and that of others. Staff knew the young people well and recognised and sought to build on their strengths and interests. Their commitment to and high regard for the young people was reflected in the feedback given to inspectors by other professionals and evidenced in inspectors' review of their case records. Individual support plans contained strategies to prevent and defuse incidents of challenging behaviour and to ensure there was appropriate follow up and debriefing undertaken with children and staff following incidents.

When required, senior managers approved additional resources to enhance staffing and supervision levels during periods of high risk. They also provided good leadership in exploring alternative ways young people could access additional specialist support. Additional training and practical support for staff in managing risk was considered as required. Assistance from An Garda Síochána was sought when appropriate to help manage high risk situations.

Managers clearly recognised the impact for frontline staff in working through continuous periods of challenge and crises for the young people. Staff displayed a strong commitment to preventing placement breakdown. Managers paid good attention to the care and welfare of the staff team and checked in with them following significant events and in supervision as to whether they needed any additional support. Frontline staff told inspectors that they felt listened to and reported good out-of-hours support from centre managers.

Individual crisis management plans, behaviour support plans, risk assessments, placement and progress plans were effectively managed, with good co-ordination and review of priority actions. Such records accurately reflected children's complex needs and contained clear strategies for reducing, containing, reviewing and debriefing following incidents of challenging behaviour.

Staff had received appropriate training in promoting a safe environment and helping young people to have a better understanding of their behaviours and its impact on others. Such approaches sought to help them explore alternative ways of communicating and handling situations of anxiety or conflict. As a result, the service had not needed to use physical restraint as a means for managing children's high risk behaviours over the past three years. The centre staff regularly used incentives to help young people make safe decisions and become more independent. Sanctions and other restrictive interventions were selectively and appropriately used and regularly reviewed to ensure they remained relevant and remained in place for the shortest possible duration. Any such restrictions were carefully considered, recorded and overseen by managers. Clear records were kept of restrictions and sanctions with practice aiming to secure the right balance between keeping young people safe and promoting their rights

<p>Standard 1.1 Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child.</p> <p>Regulation 10: Religion Regulation 4: Welfare of child</p>
<p>The service provider recognised and promoted the individual rights of children in its care as set out within international and national legislation, policies and best practice. The young people understood and were supported to exercise their rights, and to choose when and how they wanted to participate in the things that mattered to them.</p>
<p>Judgment: Compliant</p>
<p>Standard 1.2 Each child's dignity and privacy is respected and promoted.</p>
<p>The service provider ensured young people were treated with respect and their right to privacy and personal space was recognised. They were helped to understand limits to their privacy, including where their personal information needed to be shared with others.</p>
<p>Judgment: Compliant</p>
<p>Standard 2.1 Each child's identified needs informs their placement in the residential centre.</p>
<p>The service provider had appropriate arrangements in place, including relevant risk assessments, to ensure young people were placed where their presenting needs could best be met. Young people admitted to the centre were appropriately matched to its statement of purpose and expertise of the staff team, and took account of the needs of other young people living at the centre.</p>
<p>Judgment: Compliant</p>
<p>Standard 3.1 Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.</p>
<p>Overall, centre staff managed young people's complex needs well and had appropriate systems in place that clearly identified any safeguarding concerns, with timely actions taken to promote their safety and welfare. All staff were appropriately trained. Concerns about, and risks of harm to the young people were promptly escalated to senior managers and addressed on a multi-agency basis.</p>
<p>Judgment: Compliant</p>

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

The service ensured the staff team were skilled and knowledgeable in the identification, management and review of children's complex needs. Placement plans, risk assessments, crisis management and behaviour support plans helped provide a clear structure for promoting positive behaviour. Children's rights and strategies for promoting their engagement were the centre of care interventions.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
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.	Compliant
Standard 5.3 The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.	Compliant
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.	Compliant
Quality and safety	
Standard 1.1 Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child.	Compliant
Standard 1.2 Each child's dignity and privacy is respected and promoted.	Compliant
Standard 2.1 Each child's identified needs informs their placement in the residential centre.	Compliant
Standard 3.1 Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.	Compliant
Standard 3.2 Each child experiences care and support that promotes positive behaviour.	Compliant