

**Health Information and Quality Authority
Regulation Directorate**

**Compliance and Monitoring Inspection
Report - Children's Residential Centres
under the Child Care Act 1991**



Name of Service Area:	Cork	
Centre ID:	38	
Dates of inspection:	02/07/2014 – 03/07/2014	
No. of Fieldwork days:	2	
Lead inspector:	Sharron Austin	
Support inspector(s):	N/A	
Type of inspection:	<input type="checkbox"/> Announced <input checked="" type="checkbox"/> Unannounced	
Inspection ID:	694	

About monitoring of compliance

The purpose of monitoring is to safeguard vulnerable children of any age who are receiving residential care services. 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 lives.

The Health Information and Quality Authority (the Authority or HIQA) 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 compliance of the Child and Family Agency with the National Standards and advises the Minister for Children and Youth Affairs and the Child and Family Agency as to the level of compliance.

In order to drive quality and improve safety in the provision of children's residential services, 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 and young people
- **Seek assurances** from service providers that they are **safeguarding children** through the mitigation of 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.

Monitoring inspections can be announced or unannounced, take place at any time of the day or night and take place:

- to monitor compliance with regulations and standards
- arising from a number of events including information affecting the safety or well-being of children.

The findings of all monitoring inspections are set out under a number of themes based on the requirements of the Child Care Act, 1991, of SI No. 259/1995 – Child Care (Placement of Children in Residential Care) Regulations, 1995, and the National Standards for Residential Care.

The Authority has decided to carry out a number of themed inspections during 2014 which will specifically look at how behaviour is managed in these residential centres. The purpose of the inspections is to take a closer examination of how behaviours that challenge are managed in these settings as well as identifying what approaches and

models are most effective. An overview report arising from the findings of the inspections will be published in late 2014.

Summary of compliance with Child Care Act, 1991, the Child Care (Placement of Children in Residential Care) Regulations, 1995, and National Standards Residential for Children's Residential Services

This inspection report sets out the findings of a monitoring inspection:

- ☒ to monitor ongoing regulatory compliance with National Standards
- ☐ following receipt of solicited and unsolicited information
- ☐ following notification of a significant incident or event

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

Theme 1: Individualised Supports and Care Services for children are centred on the individual child and his/her care and support needs. Child-centred services provide the right support at the right time to enable children to lead their lives in as fulfilling a way as possible. A child-centred approach to service provision is one where services are planned and delivered with the active involvement and participation of the children who use services.	<input checked="" type="checkbox"/>
Theme 2: Effective Services Effective services ensure that the proper support mechanisms are in place to enable children to lead a fulfilling life. Personal planning is central to supporting children to identify their goals, needs and preferences and what supports need to be put in place by the service to ensure that each child maximises his/her personal development.	<input checked="" type="checkbox"/>
Theme 3: Safe Services Services promote the safety of children through the assessment of risk, learning from adverse events and the implementation of policies and procedures designed to protect children. Safe services protect people from abuse and neglect and follow policy and procedure in reporting any concerns of abuse and/or neglect to the relevant authorities.	<input checked="" type="checkbox"/>
Theme 5: Leadership, Governance and Management Effective governance in services for children is accomplished by directing and managing activities using good business practices, objectivity, accountability and integrity. In an effective governance structure, overall accountability for the delivery of services is clearly defined and there are clear lines of accountability at individual, team and service levels so that all people working in the service are aware of their responsibilities and who they are accountable to.	<input checked="" type="checkbox"/>
Theme 6: Use of resources The effective management and use of available financial and human resources is fundamental to delivering child-centred safe and effective services and supports that meet the needs of children.	<input type="checkbox"/>
Theme 7: Responsive workforce Each staff member has a key role to play in delivering child-centred, effective and safe services to support children. Children's services organise and manage their workforce to ensure that staff have the required skills, experience and competencies to respond to the needs of children.	<input checked="" type="checkbox"/>

<p>Theme 8: Use of Information</p> <p>Quality information and effective information systems are central to improving the quality of services for children. Quality information, which is accurate, complete, legible, relevant, reliable, timely and valid, is an important resource for providers in planning, managing, delivering and monitoring children’s services. An information governance framework enables services to ensure all information including personal information is handled securely, efficiently, effectively and in line with legislation. This supports the delivery of child-centred, safe and effective care to children.</p>	<input data-bbox="1358 376 1390 409" type="checkbox"/>

1. Methodology

As part of this inspection inspectors met with children, managers and staff. Inspectors observed practices and reviewed documentation such as statutory care plans, child in care reviews, relevant registers, policies and procedures and children's files.

The aim of on-site inspection fieldwork is to gather further evidence of compliance with the National Standards and Regulations.

During the inspection, the inspectors evaluated:

- the quality of care and safety of the service
- the organisation and management of the centre
- safeguarding processes
- the effectiveness of risk management processes
- the focus on the child or young person's needs and
- the effectiveness of multi-agency work at the point of, and immediately following referral.

The key activities of this inspection involved:

- the interrogation of data
- the review of local policies and procedures and minutes of various meetings
- the review of three children's case files by sampling information contained within their files
- the review of completed questionnaires returned by two children and external professionals including a social worker and a senior clinical psychologist
- meeting with two children
- interviews with the coordinator of residential services (Cork and Kerry), the centre manager, a social care leader and two social care workers
- interviews with one parent and a social worker
- telephone interview with the Child and Family Agency monitoring officer
- observation of a staff meeting
- observing staff in their day-to-day work

This report makes a number of findings which the provider is required to address in an action plan. The Authority received an incomplete response from the provider and re-issued the action plan, requesting the provider to respond to all of the actions as required. The Authority was not satisfied with the revised response as the provider had not addressed all of the actions as requested. Therefore the Authority has taken the decision not to publish the action plan.

Acknowledgements

The Authority wishes to thank the children, staff, and managers for the openness with which they engaged the inspection process and welcomed the inspector into the centre.

The inspector also wishes to acknowledge the cooperation of the members of the Child and Family Agency and senior managers in the South service area.

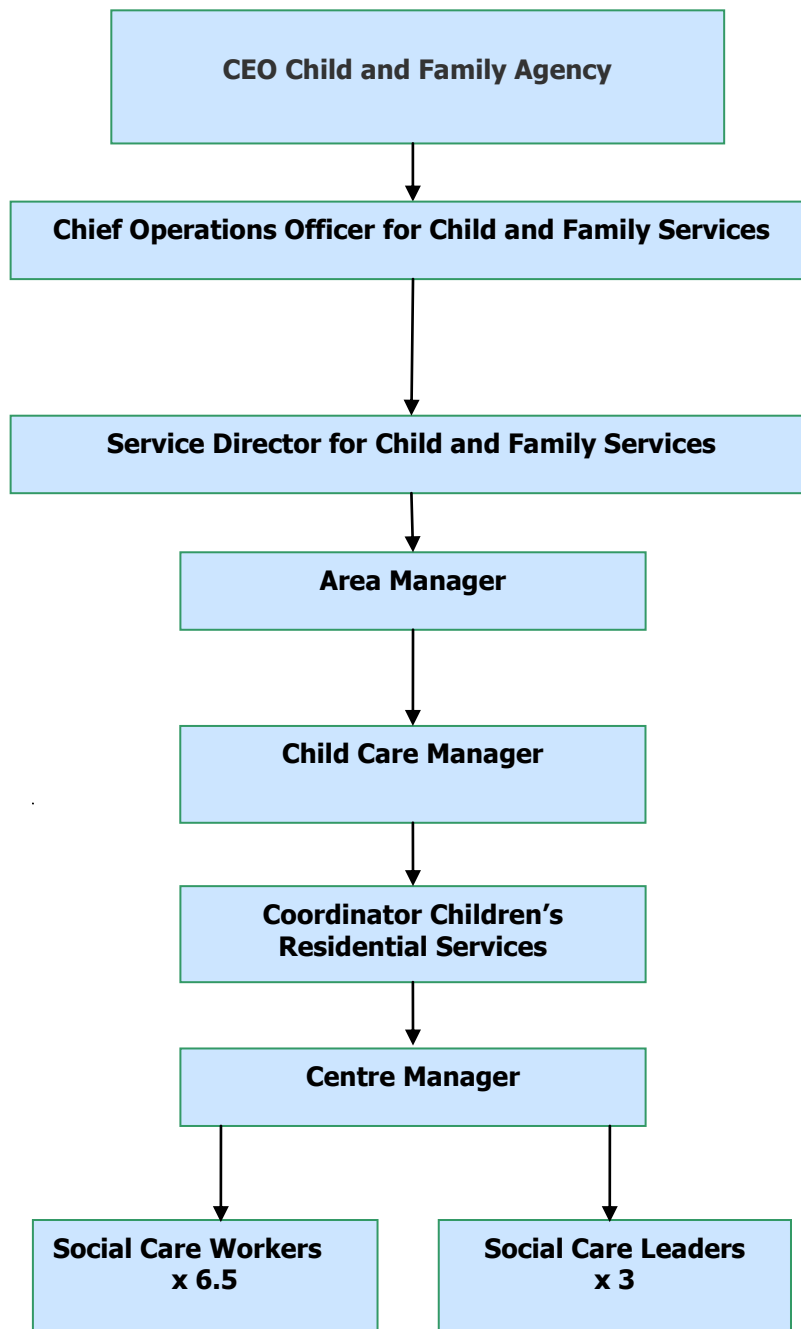
2. Profile

The centre was based in a detached two storey building on ample grounds on the outskirts of a busy town. It was in keeping with surrounding residences and had easy access to all facilities within the locality.

The written purpose and function provided to the Authority described the centre as providing short to medium term care for up to five children of mixed gender aged between 13 and 18 years. The centre currently operated as a three bedded facility due to staffing levels. At the time of inspection there were three boys living in the centre. Admissions to the centre were determined by the central admissions committee for residential care covering the area governing the centre.

The aim of the centre as outlined in their statement of purpose was to provide a safe and comforting environment for children and to help children to understand the significant events in their past, to acknowledge the impact of these events and to take an active part in the future planning of their lives. The model of care described authoritative parenting and positive behavioural support approaches alongside the Child and Family Agency approved approach to crisis intervention.

Figure 1: Organisational structure of the Children's Residential Services, South Area*



* Source: Child and Family Agency

3. Summary of Findings

Children who are placed in residential centres often endure a range of difficult experiences in their early years of life. They may be distressed and display behaviours that challenge those who care for them in these settings. The Child and Family Agency has statutory responsibility to promote the welfare of children and protect those who are deemed to be at risk of harm. Children in residential care require a high quality service which is safe and well supported by social work practice.

During this inspection, inspectors focused solely on how the needs of children with behaviours that challenge are met. The inspection looked at the individual needs of children in this regard, how effective the service was in meeting those needs and the leadership provided by managers in managing this issue. The main resource for meeting these children's needs is through the interventions and interactions provided by staff members. For these inspections, judgments are made against each standard solely in relation to behaviour that challenges.

The centre lacked capacity to safely manage the high risk behaviours that challenged and the centre manager did not have sufficient management oversight to ensure safe outcomes for children. The centre was not operated in such a way that the children were always safe and protected from themselves as they had been engaging in high risk behaviours outside the centre. There were no robust management strategies outlining staff interventions to ensure the safety of children.

The approach taken by the centre in the delivery of care to children was grounded in an authoritative parenting model which supported the aim of the centre as outlined in their statement of purpose. This approach included general strategies in communication skills, building self-worth and positive behaviour support planning. The model of care supported staff to respond to the needs of children in a consistent manner rather than react to challenging behaviours within the centre. However, the centre struggled to maintain the safety and welfare of the children when outside of the centre.

Access to specialist services for children was good and staff were supported in their practice by a dedicated psychologist as well as the centre manager and external line managers. Although all risks to children could not be eradicated, the systems in place in the centre endeavoured to promote the safety of children. However, the core capacity and ability of the centre to manage the risk taking behaviours of the children outside of the centre was limited.

The Authority have met with the Child and Family Agency to discuss the findings of this inspection.

4. Summary of judgments under each standard

Theme	National Standards for Children's Residential Centres	Judgment
Theme 1: Individualised Supports and Care	Standard 4: The rights of young people are reflected in all centre policies and care practices. Young people and their parents are informed of their rights by supervising social workers and centre staff.	Meets Standard
Theme 2: Effective Services	Standard 5: There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. This plan states the aims and objectives of the placement, promotes the welfare, education, interests and health needs of young people and addresses their emotional and psychological needs. It stresses and outlines practical contact with families and, where appropriate, preparation for leaving care.	Significant Risk identified
	Standard 6: 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.	Significant Risk identified

Theme	National Standards for Children's Residential Centres	Judgment
Theme 3: Safe Services	Standard 7: Attention is paid to keeping young people in the centre safe, through conscious steps designed to ensure a regime and ethos that promotes a culture of openness and accountability.	Significant Risk identified
	Standard 10: 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.	Requires Improvement
Theme 5: Leadership, Governance and Management Theme 7: Workforce	Standard 1: 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.	Requires Improvement
	Standard 2: 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.	Significant Risk identified
	Standard 3: The Health Service Executive, for the purpose of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements are in place to enable an authorised person, on behalf of the Health Service Executive to monitor statutory and non-statutory children's residential centres.	Meets Standard

Section 69 of the Child Care Act 1991 and Section 26 of the Child Care (Amendment) Act 2011

Compliance with Child Care Act, 1991, the Child Care (Placement of Children in Residential Care) Regulations, 1995, and National Standards for Children's Residential Services

Theme 1: Individualised Supports and Care

Children's rights are recognised and respected, including their right to make a complaint. Diversity is understood and children are valued as individuals. They participate in making decisions, and voice their opinions. Services are flexible and coordinated to respond to the individual needs of children.

National Standards for Residential Care

Reference:

Standard 4: Children's Rights

Child Care (Placement of Children in Residential Care) Regulations 1995

Part II, Article 4

Inspection findings

The rights of children were promoted by staff. The centre had written policies on children's rights, complaints and access to information. Children interviewed told the inspector that they were aware of their rights and could exercise these as they wished. Independent advocates from Empowering People in Care (EPIC) had visited the children in the centre and provided information in relation to their rights. Children and their families were supported to exercise their rights. The children and parent who met with the inspector confirmed this and said that they felt listened to by staff.

Children and families were aware of how to make a complaint. A review of centre records demonstrated that only one complaint had been made in the previous 24 months (June 2012 to June 2014) and this did not relate to the use of physical restraint or the management of challenging behaviour. Children who met the inspector said that they could raise issues with staff individually or in their house meetings and were generally satisfied that their issues were heard and discussed. A review of the minutes of the house meetings held with the children evidenced that a total of seven meetings were held between January and June 2014. Various issues were raised by the children such as minor day-to-day matters, e.g. clothes, activities, food, recreation as well as good discussions on centre expectations regarding behaviours, positive acknowledgement of achievements and the purchasing of a house pet. The children were also asked how they felt staff treated them and/or interacted with them at these meetings which allowed any concerns to be addressed as they arose.

The children in the centre had opportunities to be involved in influencing decisions in day-to-day matters as well as participating in their care planning and review meetings. A review of care files showed that each child was encouraged and facilitated to express their views ahead of and during their statutory review and monthly placement meetings. External professionals interviewed or who completed questionnaires as part of the inspection confirmed that children's views and wishes were regularly sought and/or represented through consultation processes and attendance at key meetings that impacted their lives.

Staff considered each child as an individual within the group setting. Staff were aware of each child's history, presenting challenges and agreed strategies and interventions for each individual. The inspector observed staff and children interacting in a respectful manner during the inspection. Professionals and staff worked together to try to manage children's behaviour outside the centre.

Standard	National Standards for Children's Residential Centres	Judgment
Standard 4	The rights of young people are reflected in all centre policies and care practices. Young people and their parents are informed of their rights by supervising social workers and centre staff.	Meets Standard

Theme 2: Effective Services

Effective services ensure that the proper support mechanisms are in place to enable children to lead a fulfilling life. Personal planning is central to supporting children to identify their goals, needs and preferences and what supports need to be put in place by the service to ensure that each child maximises his/her personal development.

National Standards for Residential Care

Reference:

Standards 5: Planning for Children and Young People

Standard 6: Care of Young People

Child Care (Placement of Children in Residential Care) Regulations 1995

Part III, Article 9

Part IV, Article 22, 23

Part V, Articles 25, 26

Inspection Findings

The needs of children were assessed prior to and during their placement within the care planning and review processes. Care files reviewed demonstrated that care plans and placement plans were generally of good quality and up-to-date and were subject to regular review. One child was without an up-to-date care plan which was subsequently furnished to the centre by the end of the inspection. This indicated that the care planning process was not in itself robust. Considering the risks posed by children's behaviour in the centre, inspectors found that the care planning system was not robust.

The centre had a clear admissions policy including criteria for admission. The inspector found the three young people living in the centre met these criteria at the point of their admission to the centre. Referrals to the centre were made to a central admissions committee (CAC) that considered all referrals to residential care in the area. There had been seven admissions including one emergency admission to the centre in the 24 months prior to the inspection. Staff and external professionals interviewed were generally satisfied that the centre was appropriate to meet the needs of the children living there. However, inspectors had serious concerns about the children's vulnerability, their at risk behaviour within a community based centre and the centre's capacity to meet their needs.

A requirement for the referral process to the CAC was a comprehensive social work report which included a needs assessment and initial care plan to be provided by the social worker prior to a child's admission to the centre. The purpose of this assessment was to establish the needs of the child and presenting behaviours and if they could be met by the centre. The manager and staff interviewed confirmed that they had received appropriate information in relation to the children prior to admission and had knowledge

of the previous history of substance misuse for two of the children. At the time of the inspection, one child was not suitably placed in the centre. The manager and social worker for the child confirmed that alternative placements were being considered due to the child's vulnerability and high risk taking behaviours.

Two of the children had an up-to-date care plan which were reviewed within the required timeframes. Each child had a placement plan that was based on the care plan and ongoing assessments of need and risk. These were reviewed regularly by the centre with social work involvement. Care records demonstrated staff's awareness of the needs of the children.

Services and supports were put in place to meet the children's emotional and psychological needs in a timely manner but these had been reduced. In spite of the supports in place, interventions had not resulted in a reduction in children's risk taking behaviour. Records showed that when there was an identified need in relation to behaviour that challenged, supports were made available to children such as psychology and drug addiction services. The centre was supported by a senior clinical psychologist as part of the area's child care services and this involved direct intervention work with children, indirect support for children through staff support, attendance at meetings and staff training. Managers and staff interviewed outlined the benefits of being able to access this service for children in response to assessed needs and as a support for staff in their interventions with children. This service has been reduced from a full-time to a part-time position. The senior psychologist told the inspector that despite timely referrals to this service, children did not have the amount of support time available that would be in their best interests.

At the time of the inspection, the inspector found that each of the three children were engaged with highly concerning risk taking behaviour involving the use of illegal substances. Two of the children had a previous history of substance misuse prior to admission and were linked with drug counselling services. These behaviours were a regular if not daily occurrence which on occasions found that the individual children would leave the centre throughout the day, return and may leave again late at night on receipt of a phone call and not return again for hours. The manager and staff reported that the children had returned to the centre on many occasions under the influence of illegal substances and that despite efforts made to manage these behaviours, the children continued to leave the centre and involve themselves in concerning behaviours in the locality. Room searches had been undertaken on five occasions between November 2013 and June 2014 for two of the children. Drug paraphernalia were removed on one occasion from one child's room. There was evidence of ongoing professionals meetings and serious incident reviews involving centre management and staff, social workers, Gardaí and other relevant professionals in relation to the risk

taking behaviours that challenged. Individual risk assessments in relation to these behaviours that challenged such as individual crisis management plans (ICMP) and individual absence management plans (IAMP) were in place. However, these only assessed the level of risk but did not evidence robust management strategies outlining staff interventions to ensure the safety of children. This was previously raised by the Child and Family Agency monitoring officer in the report dated 27 May 2014.

Restrictive practices were in place but were reported by managers and staff to be implemented if assessed as an appropriate response to challenging behaviours or as a last resort. Data provided to the Authority indicated that 80% of staff had up-to-date training in managing behaviour and in crisis prevention and intervention. No physical interventions were carried out in the previous 24 months (July 2012 to June 2014) within the centre. The policies and procedures in relation to the management of behaviour were followed by the centre in relation to children who absconded from the centre, which was a frequent occurrence. However, the measures in place to address the risk taking behaviours outside of the centre were ineffective and did not reduce the risks to the children.

Standard	National Standards for Children's Residential Centres	Judgment
Standard 5	There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. This plan states the aims and objectives of the placement, promotes the welfare, education, interests and health needs of young people and addresses their emotional and psychological needs. It stresses and outlines practical contact with families and, where appropriate, preparation for leaving care.	Significant Risk identified
Standard 6	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. Young people have similar opportunities and leisure experiences to their peers and have opportunities to develop talents and pursue interests. Staff interventions show an awareness of the impact on young people of separation and loss and, where applicable, of neglect and abuse.	Significant Risk identified

Theme 3: Safe Services

Services promote the safety of children through the assessment of risk, learning from adverse events and the implementation of policies and procedures designed to protect children. Safe services protect people from abuse and neglect and follow policy and procedure in reporting any concerns of abuse and/or neglect to the relevant authorities.

National Standards for Children's Residential Centres

Reference:

Standards 7: Safeguarding and Child Protection

Standard 10: Premises and Safety

Child Care (Placement of Children in Residential Care) Regulations 1995,
Part III, Article 7, 12, 13, 15

Children First: National Guidance for the Protection and Welfare of Children (2011)

Inspection findings

Practices regarding the safety of children were governed by national and regional policies and procedures in line with Children First (2011). Child protection concerns were reported, however, the ongoing risk taking behaviours of the three children in the centre demonstrated their vulnerability when outside of the centre.

Training records indicated that the majority of staff (90%) had received up-to-date training in relation to the reporting of concerns or allegations of abuse. Staff and managers interviewed said that there was an open culture to express concern or challenge each other's practice, however; they had little knowledge of the policy on protected disclosure. Centre records demonstrated that 41 child protection reports had been completed in the previous 12 months (August 2013 to June 2014). Only 14 of these were acknowledged by the child protection and welfare service. The centre manager did not know the status of any of these reports. No allegations had been against staff in the previous 24 months.

A review of these reports demonstrated that the information reported did not always constitute a new child protection concern and did not show clear consultation between the centre staff and other professions in order to determine how information should be reported. The number of reports issued to the respective social work departments ensured that all concerns were reported, but was done as a precautionary measure. This had also been a finding of a previous inspection of the centre in 2012. Some of the information reviewed during the inspection raised questions about the pathway taken in the reporting of concerns.

External professionals interviewed or who completed questionnaires as part of the inspection also reported that the vulnerability and risk taking behaviours of the children outside of the centre were of serious concern, particularly in relation to one child. A

high risk incident which occurred outside of the centre in May 2014 had resulted in serious injuries requiring medical attention. The ability of the centre staff to ensure the child's safety was limited, as it was an open unit and the children could come and go at will. The child protection needs of a child in care should be addressed by the statutory care planning process. However, as noted in an earlier section of this report, the inspector found that the care planning process was not in itself robust. Consideration was not given by the supervising social worker to a parallel process of a child protection case conference to determine if the child was at ongoing risk of significant harm due to their serious risk taking behaviours. The Child and Family Agency's national policy on The Child Protection Conference and Child Protection Notification System outlines that *"parallel processes, plans and meetings to co-exist for the minimum time necessary and only where there is clear benefit to the child."* This issue was raised by the inspector with the centre manager and the supervising social worker on the day of inspection. The inspector took the unusual step of requesting that a professionals meeting be convened immediately to discuss the serious risks for this child and put in place a child protection plan.

The design and layout of the centre was in line with the statement of purpose. Children had their own bedrooms. The centre was adequately insured against accidents or injuries to children placed in the centre and met the standard in relation to fire certification. Concerns were expressed by staff as to the security of the centre. Staff told the inspector of a recent incident whereby two intruders entered the building through a side entrance. They left the premises when discovered by staff and the Gardaí were contacted immediately. Staff were concerned as it was felt that this could be related to the possible drug use by the children in the centre as suspicious persons and vehicles not connected to the children or centre have been seen in the vicinity of the premises. A section of the perimeter wall had been damaged in storms earlier in the year and had not been fully repaired which allowed more open access to the centre. This highlighted the staff's concerns regarding the vulnerability of the children with members of the public involved in illegal substances.

Standard	National Standards for Children's Residential Centres	Judgment
Standard 7	Attention is paid to keeping young people in the centre safe, through conscious steps designed to ensure a regime and ethos that promotes a culture of openness and accountability.	Significant Risk identified

Standard 10	<p>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.</p>	<p>Requires Improvement</p>
--------------------	--	-----------------------------

Theme 5: Leadership, Governance and Management

Effective governance in services for children is accomplished by directing and managing activities using good business practices, objectivity, accountability and integrity. In an effective governance structure, overall accountability for the delivery of services is clearly defined and there are clear lines of accountability at individual, team and service levels so that all people working in the service are aware of their responsibilities and who they are accountable to.

Theme 7: Responsive workforce

Each staff member has a key role to play in delivering child-centred, effective and safe services to support children. Children's services organise and manage their workforce to ensure that staff have the required skills, experience and competencies to respond to the needs of children.

National Standards for Residential Care

Reference:

Standard 1: Purpose and Function

Standard 2: Management and Staffing

Standard 3: Monitoring

Child Care (Placement of Children in Residential Care) Regulations 1995

Part III, Article 5, 6, 17

Inspection findings

The centre had a written statement of purpose and function that set out the service being provided to children and the policies and procedures which guided practice but it did not outline the model of service delivery in detail. Staff interviewed were familiar with the statement of purpose and were knowledgeable in the model of care provided. While the children residing in the centre presented as appropriate referrals initially, the inspector found that the placement for one child was no longer appropriate to ensure his safety and welfare due to serious ongoing risk taking behaviours outside of the centre.

An authoritative parenting approach to the provision of care had been introduced which supported the aim of the centre as outlined in their statement of purpose. This approach included general strategies in communication skills, building self-worth and positive behaviour support planning. The centre aimed to provide an environment to help children understand the significant events of their past, to acknowledge the impact of these events and to take an active part in the future planning of their lives. The centre staff acknowledged positive behaviour regularly but had agreed consequences for certain behaviours that challenged. This was evident in a review of care records and was confirmed by those interviewed or those who had completed questionnaires as part of the inspection. The model of care supported staff to respond to the needs of children in a consistent manner rather than react to challenging behaviours. The

approach was successful in managing the care of the children within the centre through authentic communication demonstrating care for the children. However, the centre struggled to maintain the safety and welfare of the children when outside of the centre. Children engaged in dangerous activities and high levels of substance misuse and the service appeared to be powerless to intervene in an effective way.

There were clearly defined management structures in place that identified lines of authority and accountability. The coordinator for the area's residential services had taken on line management responsibility of the centre September 2013 and supervision of the centre manager in January 2014. The day-to-day operations within the centre were the responsibility of a part-time acting manager who worked four days a week and reported directly to the external line manager.

The inspector did not find that the centre was operated in such a way that the children were always safe and protected from themselves as they had been engaging in serious behaviours outside the centre for a significant time period placing themselves at risk. This had been a feature of previous inspections of this centre undertaken by the Authority in the past in 2011 and 2012. Deficits outlined in these reports had been identified and addressed and there had been a dedicated effort made by all to ensure a culture of accountability and safer care practices. Notwithstanding the genuine and dedicated commitment by the manager and staff of the centre in caring for the children, the inspector found that the manager struggled to safely manage the high risk behaviours that challenged and that s/he did not have sufficient management oversight to ensure safe outcomes for children. The external line manager and the Child and Family Agency monitoring officer told the inspector that a formal review was being undertaken to assess the core capacity of the centre and the ability of the manager to ensure safe care for children. The findings of this review should be provided to the Authority on completion.

There were some systems in place to report risks but there was no risk register. Managers and staff interviewed demonstrated a good knowledge of risk associated with the provision of care. Three serious incidents relating to behaviour that challenged in the previous 24 months had been reviewed and evaluated internally to ensure learning was communicated to the wider staff team. However, these learnings had not brought about a significant reduction in the number of adverse events. Despite interventions and strategies by staff, the outcomes for children had not improved as they continued to engage in risk taking behaviour outside of the centre.

There was a system in place for the reporting of significant events. Figures provided to the Authority demonstrated that in the previous 24 months (July 2012 to June 2014) there had been a total of 333 significant or adverse events. 305 (91%) were incidents of absence without authority of which 84 (27%) were classified as missing from care

episodes. A review of centre records demonstrated that significant events were appropriately recorded and notified to all relevant parties in a timely manner and interviews with staff and other relevant professionals confirmed this was taking place.

The inspector reviewed a number of these incidents and found that reports were made in relation to behaviours such as absences, criminal activity, substance misuse, assault and aggression outside the centre. An internal review of three significant events was carried out by the Significant Incident review Group (SIRG) in which staff members were involved and this allowed for good discussion. Recommendations arising out of the reviews were shared with the wider team so as to avoid similar incidents arising or to reduce the level of the presenting challenging behaviour. However, this process was not effective in reducing the number of events.

The centre was monitored by a Child and Family Agency monitoring officer who had carried out nine monitoring visits to the centre in the previous 24 months to the inspection. The most recent visit to the centre had taken place in May 2014. The monitoring officer provided the inspector with copies of the reports for February and May 2014 and told the inspector during interview of their concerns in relation to the increased significant incidents for the three children which placed them at serious risk in the community.

The inspector found that there were sufficient staff on duty during the inspection to deliver the service as outlined in the statement of purpose. However, staff arrangements were reported by the manager to be insufficient due to the current concerns for the children in the centre and the need for one child to have increased staffing levels in order to ensure his safety and welfare. The staff team comprised 12 staff members (9.5 whole time equivalents). One staff member was an agency staff who had regularly worked on the roster for the past three years. A review of staff files found that staff were appropriately qualified and copies of their qualifications with the exception of four staff were maintained on the file. Some external professionals reported that the service was safe, however; concerns for the safety of one of the children demonstrated that the manager and staff struggled with addressing the needs of all the children in the centre.

A sample of supervision records showed that staff received formal supervision every six weeks on average which was recorded. A new national supervision policy had been introduced in the latter part of 2014. The centre manager had been briefed on the new policy who then shared this information with the staff team. Staff interviewed reported that supervision was in place. Supervision of staff was provided by the manager and the social care leaders, each of whom had received appropriate training. The supervision model in place had not improved the service or the level of risk taking behaviour by children.

Data submitted to the Authority showed that 90% of staff had up-to-date training in child protection and 80% in the Child and Family Agency approved approach to crisis intervention. The external line manager had commenced a training needs analysis across the residential care services in the service area that would include a service wide trauma informed model of care which would be used alongside the existing crisis intervention model so as to ensure a more consistent approach to safe care and to improve outcomes for children in residential care.

Standard	National Standards for Children's Residential Centres	Judgment
Standard 1	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.	Requires Improvement
Standard 2	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.	Significant Risk identified
Standard 3	The Health Service Executive, for the purpose of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements are in place to enable an authorised person, on behalf of the Health Service Executive to monitor statutory and non-statutory children's residential centres.	Meets Standard