



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Report of a Children's Residential Centre

Name of provider:	The Child and Family Agency
Tusla Region:	Dublin North East
Type of inspection:	Announced
Date of inspection:	20 - 21 October 2021
Centre ID:	OSV-0004178
Fieldwork ID	MON-0034560

About the centre

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

The centre was a large detached house located in a rural setting near a town in North Dublin. It had a large well maintained garden to the front and rear of the house. There were two other Tusla services running from the location. The centre had capacity to provide medium to long term care for four children, male and female between the ages of 13 and 18 years.

The following information outlines some additional data of this centre.

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

To prepare for this inspection the inspector 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 summarize 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
20 October 2021	08:00hrs to 16:00hrs	Leanne Crowe	Inspector (Remote)
21 October 2021	09:45hrs to 16:00hrs	Leanne Crowe	Inspector
21 October 2021	09:45hrs to 16.00hrs	Bronagh Gibson	Regional Manager

What children told us and what inspectors observed

The centre was located in a rural area of Dublin, within driving distance of a nearby town. Staff had access to vehicles which they used to transport the children to activities, appointments and visits with families or friends. The children were also supported to use public transport in order to develop their independence.

Inspectors found that the service provided to the children was person-centred. Staff endeavoured to develop trusting relationships and positive attachments with the children in the centre. Children were involved in their care planning and were supported by staff to develop independent living skills. The children were encouraged to express their wishes, views and preferences, which were listened to and respected by staff. The staff team were aware of the children's needs and how best to provide them with quality care and support. Where appropriate, the children were encouraged and facilitated to maintain contact with their families, friends and other significant people in their lives.

There were two children living in the centre at the time of the inspection, both of whom spoke with the inspectors during the inspection. The inspectors also spoke with the centre manager, deputy manager, several staff and the children's parents and social workers.

The children described positive experiences of living in the centre. Both children felt that overall, staff were kind and supportive. They knew who the manager of the centre was and they described them as 'nice'. The children described how staff brought them for drives and transported them to other activities, including shopping trips and outings with their friends and families, which they enjoyed. The children liked their bedrooms, with and described how they had redecorated theirs by changing the layout and colour of the room as well as adding decorations and other items that they had chosen. One child would like an en-suite shower room; the centre manager was aware of this and confirmed that two en-suite shower rooms had been installed since the previous inspection in July 2020 and the installation of en-suite shower rooms in the remaining bedrooms was being considered as part of the overall refurbishment plan for the centre. The children enjoyed having their own personal space, as well as communal rooms to spend time with others.

Over the course of the inspection, inspectors observed staff members cooking meals and children lounging in living areas and watching television. The atmosphere was relaxed and homely, and the children appeared comfortable.

The children confirmed that they were facilitated to pursue their own individual interests. One child was supported to get a small pet and they were responsible for caring for the animal. The children were also supported to spend time with their families and friends in their local communities, in line with their own wishes and preferences. During the COVID-19 restrictions, contact with loved ones was maintained through visiting in line with public health restrictions as well as social media. The children described how staff have assisted them to develop independent living skills, such as shopping, cooking, baking and managing their allowances.

The inspectors spoke with the children's social workers and parents during the inspection. They all described having positive relationships with the management and staff in the centre, emphasising the quality and frequency of communication. They all said that staff kept them informed and updated on the children's progress and any important occurrences. The parents of both children felt that staff understood their needs and provided appropriate support as needed. They said staff acted in the best interests of the children and supported them in achieving their personal objectives. One parent particularly praised the support that staff provided in terms of developing relationships between the child and their family. They also emphasised the efforts made by staff in encouraging the child to develop their interests in hobbies, such as baking. The centre had experienced a challenging placement just prior to inspection, and the impact of this placement on other children was commented on by some parents and a child. However, overall, the social workers and parents felt that the children were well cared for within the centre.

The next two sections of this report provide the findings of this inspection on the governance of the centre and how this impacted on the quality and safety of care provided to the children.

Capacity and capability

The inspectors found that there were effective management systems in place to ensure the provision of good quality care. An experienced centre manager and deputy centre manager were responsible for the management of the centre. They were supported by four social care leaders. An alternative care manager also oversaw the operation of the centre.

The centre was last visited by inspectors in July 2020, where nine standards were inspected. Major non-compliance was found in relation to one standard, moderate non-compliance was found in relation to three standards, substantial compliance was found in relation to two standards while the three remaining standards were found to be compliant. The centre had made improvements in the interim period and had achieved a good level of compliance with the standards assessed in this current inspection.

The centre's statement of purpose had been written in November 2020 and was due for review in November 2021. It reflected the day-to-day operation of the service and contained all of the information required by the National Standards. This included the aims and objectives of the service, details of the management and staff structure and the range of services available to the children. It also contained information about the centre's complaints process.

A national suite of policies and procedures had been recently introduced and effectively implemented in the centre. Risks were well managed and records including, care files, placement plans, significant events notifications (SENS) and child protection referrals were well maintained and appropriately reviewed by the centre's management team.

Staffing resources in the centre were adequate in terms of numbers, but there were considerable vacancies and absences. This meant that gaps in staffing were filled by agency staff. While great efforts were made to use consistent agency staff members and to ensure stability for the children and team, arranging cover for shifts was an ongoing issue for the centre manager. By way of an example, 600 agency hours were required in the month prior to inspection. A recruitment campaign that was due to take place earlier this year had been delayed by a recent cyber-attack, and was now due to be completed in the weeks following the inspection. The centre manager was hopeful that this would result in an additional 4.5 social care work posts being filled. Both permanent and agency staff who spoke with the inspectors demonstrated good knowledge of their responsibilities and the governance structure. They were child-centred in their approach, which was reflected in their knowledge of each child's individual needs, preferences and placement goals.

The centre rota did not provide for waking night staff. While a move to a 'national rota', which included waking nights, was in the process of being negotiated, this was progressing slowly. As a result, staff who slept at night received overtime if they had to respond to the needs of children during the night. Although this was being managed and children's needs were being met, the lack of transition onto the national rota for the staff team added an additional strain to an already stretched team. Furthermore, failure to bring newly recruited or agency staff into the centre on a rota which included live night duty was a missed opportunity.

Standard 5.3

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

The centre had an up to date statement of purpose and function which accurately described the service and contained all of the information required by the national standards.

Judgment: Compliant

Standard 6.1

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

While the centre did not have a full complement of permanent staff at the time of the inspection, the centre was found to have sufficient staff on duty to meet the needs of the children. A bespoke recruitment campaign was due to be completed in the weeks following the inspection. There were missed opportunities to introduce live night staff to the centre rota.

Judgment: Substantially compliant

Quality and safety

The centre was nicely decorated and well maintained throughout. It contained a large kitchen/dining room, a conservatory, sitting room, office space and seven bedrooms, four of which could be used to accommodate children or young people. Both children had their own bedroom, with one including an en-suite shower room. A large shower/bathroom was adjacent to the other child's bedroom, which ensured that they both had good access to suitable facilities. Each child was supported to decorate their bedroom according to their personal tastes and preferences. The communal rooms included large TVs, games consoles and other items that the children used. The conservatory was decorated with paintings made by children who had stayed in the centre.

Since the previous inspection in July 2020, significant refurbishment of the centre had been carried out, with further work planned for the coming months. This programme included the installation of two en-suite shower rooms and a new kitchen, and the repainting and re-flooring of several rooms. This had helped promote a more homely environment in the centre, and a large collection of furniture, ornaments and soft furnishings was also in the process of being delivered to the centre at the time of the inspection. Some of these items had been chosen by the children and would be used to

significantly upgrade the centre's bedrooms, communal living areas and garden. Maintenance requests were reviewed and were found to be remedied promptly.

An up-to-date child in care review had been carried out in relation to each child. Individualised placement plans and placement support plans were informed by these reviews. The placement and placement support plans were comprehensive, clearly outlined the objectives for each child and were regularly updated in response to the children's needs and preferences. These records indicated that the staff and management were child centred in their approach and that the children's views were considered at all stages. Staff who spoke with inspectors could describe the goals for each child and the means of supporting them to achieve their goals. Appropriate actions were assigned to staff for completion. Relevant documentation relating to these actions was regularly reviewed by the centre manager. Staff were resourceful and creative in identifying external services that could provide additional assistance to the children, as needed, and how children could access these services.

Overall, the children in the centre experienced care and support that was nurturing and tailored to their needs. The children had developed positive relationships with many members of staff, who endeavoured to promote good quality care. Staff who spoke with inspectors were knowledgeable of each child's needs, routines and preferences.

The children were supported to meet any health and development needs that had been identified prior to admission or during their placement in the centre. Medical histories, medical cards and records of immunisation were sought from the referring social worker. Each child was supported to attend their general practitioner (GP), dentist, optician or any specialist services that they required, such as educational or mental health services. Staff carried out individual key work sessions with the children on various health related topics, such as self-care and sexual health. There were medication management policies and procedures in place to support good practice in relation to medication storage, administration and disposal. Records in relation to medication administration were complete and up-to-date, including details of any occasion when medication was not administered.

The centre had a system in place for identifying and managing risks. There was a risk register which recorded all open risks, monitored risks and closed risks, as well as each item's risk rating, actions taken to manage the risks and further actions required. Risks were reviewed and actions were updated regularly or as needed. The most significant risk recorded at the time of the inspection related to COVID-19. There were local and national procedures in place to mitigate this risk. The centre manager confirmed that open risks were communicated to the alternative care manager.

The centre promoted the safety and welfare of children. The centre manager was the designated liaison person (DLP) for the centre, and staff were aware of the procedures in place for reporting any concerns. Child protection concerns were found to be reported to Tusla as required, in line with Children First legislation. Staff monitored the overall safety of the children, assessed any identified risks and took action as required. Comprehensive and good quality safety plans had been developed in relation to these identified risks.

There was a system in place for the notification of incidents, accidents and significant events, in line with Tusla's notification system. On review, inspectors found that although the number and level of incidents in the centre were high, they reflected the complex needs of the children placed there, and the staff team worked with external professionals, and the children to reduce these risks. Although this was not always possible for some children, the team increased their level of vigilance and supervision of each child and planned their day, to keep them safe as safe as possible and reduce the risks involved.

Staff demonstrated a positive approach to the management of challenging behaviour. They endeavoured to develop trusting and respectful relationships with the children and to understand the context for each child's behaviour. Staff had completed training in managing behaviours that challenge, in order to support the children effectively. Each child had an individual crisis management plan, absence management plan and behaviour management plan which guided staff on how to respond appropriately to incidents of challenging behaviour. These documents were regularly reviewed and updated as needed. There was evidence that the centre engaged with external professionals to strengthen their ability to support the children and manage behaviours that challenge. A restrictive practice register was maintained in the centre which reflected minimal use of restrictive practices.

Each child had an allocated social worker, who visited them regularly in the centre. The centre manager, deputy centre manager and social care staff had ongoing communication with the children's social workers, as well as other health and social care professionals. There was evidence of good collaboration, information sharing, planning and review of the care provided to children.

The children were supported to develop and maintain relationships with their families, friends or other significant people in their lives. Family members who spoke with the inspectors acknowledged the efforts made by staff to facilitate visits and contact between them and the children. For example, staff regularly transported a child to and from visits with their parent and siblings. Additionally, a building on the same site as the centre was used to safely facilitate family visits during the COVID-19 pandemic. The

children were encouraged to pursue their personal objectives, as well as their interests and hobbies.

There was an up-to-date safety statement in place. All staff had up to date training in fire safety. There were adequate fire precautions in place throughout the building, such as fire doors, firefighting equipment and smoke alarms. Daily, weekly and monthly safety checks were completed by staff. Any issues identified were recorded and addressed. Each child had a personal emergency evacuation plan (PEEP) in place which accurately reflected their individual needs.

Standard 1.5

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

Regulation 8: Access arrangements

Staff encouraged and facilitated the children to develop and maintain relationships with their families and friends, and their links with their local communities. There were systems in place to support the children to engage in activities and hobbies in line with their personal interests.

Judgment: Compliant

Standard 2.2

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

Regulation 23: Care Plan

Regulation 24: Supervision and visiting of children

Regulation 25: Review of cases

Regulation 26: Special review

Each child had a comprehensive placement plan and placement support plan which accurately reflected the individual needs and key goals of their respective care plans. Care plans and records of statutory reviews were available for review by the inspectors. Each child had an allocated social worker who visited them regularly. There was effective and frequent communication between the centre and relevant professionals involved in the children's care.

Judgment: Compliant

Standard 2.3

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

Regulation 7: Accommodation

Regulation 12: Fire precautions

Regulation 13: Safety precautions

Regulation 14: Insurance

The centre was homely and well maintained. The centre had carried out some refurbishment of the centre since the last inspection, with more planned for the coming months. Two en-suite shower rooms had been developed within the last year, flooring had been replaced in some rooms and a number of areas had been repainted. Significant upgrading of furnishings was underway throughout the centre at the time of the inspection. There were effective fire safety measures in place.

Judgment: Compliant

Standard 3.1

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

There were good safeguarding practices in place. Staff in the centre were vigilant to indicators and signs of risk and they communicated these to social workers and external agencies appropriately. There was evidence that staff in the centre worked in partnership with children, their families, social workers and external agencies to promote their safety and welfare. Safeguarding and child protection policies and procedures were effectively implemented in the centre.

Judgment: Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

Restrictive practices were not routinely used in the centre. Staff were skilled in establishing positive relationships with the children and were responsive to their needs. They had the appropriate knowledge and training to manage behaviours that challenged.

Judgment: Compliant

Standard 4.2

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

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

The children's health and development needs were promoted and attended to. Children had access to primary care services and other health and specialist services as required.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
Standard 5.3 The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.	Compliant
Standard 6.1 The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.	Substantially compliant
Quality and safety	
Standard 1.5 Each child develops and maintains positive attachments and links with family, the community, and other significant people in their lives.	Compliant
Standard 2.2 Each child receives care and support based on their individual needs in order to maximise their wellbeing and personal development.	Compliant
Standard 2.3 The children's residential centre is homely, and promotes the safety and wellbeing of each child.	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
Standard 4.1 The health, wellbeing and development of each child is promoted protected and improved.	Compliant