



**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 Mid Leinster
Type of inspection:	Announced
Date of inspection:	28 and 30 June 2021
Centre ID:	OSV-0004163
Fieldwork ID	MON-0033427

## About the centre

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

The centre was a community-based children's residential centre managed by the Child and Family Agency (Tusla). It was a two storey detached house in a Dublin suburb with good amenities and access to public transport. The centre provided care for up to four children both male and female, between the ages of 13 and 17 years on admission. The children needed medium to long-term residential care, and were referred to the centre through the central referrals committee of Tusla's Dublin Mid-Leinster region.

The aim of the centre was to provide a safe and caring environment characterised by the quality of the relationships developed with the children in their care, in which they can address the issues that are preventing them from living at home with a view to facilitating their earliest possible return.

The objective of the centre was to ensure that the care practice was always young person centred, maintaining a needs-led multidisciplinary approach to looking after the children in their care, while complying with the requirements of the National Standards for Children's Residential Centres 2018 and the Childcare (Placement of Children in Residential Care) Regulations, 1995.

**The following information outlines some additional data of this centre.**

Number of children on the date of inspection:	3
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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
28 June 2021	09:00hrs to 17:00hrs	Pauline Clarke Orohoe	Inspector
30 June 2021	08:00hrs to 16:00hrs	Pauline Clarke Orohoe	Inspector

## What children told us and what inspectors observed

Feedback provided to the inspector about the centre presented a picture of a place where children were listened to, and their individuality was respected. Children's views were sought, listened to and acted upon, thereby ensuring that the children living in the centre knew their opinions were valued. Each child's needs were considered within the context of the child's life. Staff worked with the children to support them in relation to their needs, and what mattered most to them.

Some views of parents of the centre were that the centre staff were genuinely interested in their child, and were trying to do their best for the child. Social workers told the inspector that in their view, the staff were supportive of the children, and understood their needs. They said that staff provided children with space to express and explore their feelings, and had developed good relationships with the children.

Staff were attentive to the children's needs, and took on board concerns shared by parents. Social workers said that the staff kept them updated and informed on how the children were getting on. There was regular communication between the centre and parents, which supported the family to be involved in the child's care. Both the social workers and the parents agreed that they are informed of incidents that occurred in relation to the children.

Children had appropriate access to all areas of the centre. They could leave the centre for leisure and visiting purposes, and staff encouraged these independent living skills through the provision of public transport travel cards. One young person told inspectors that since the COVID-19 travel restrictions had been removed, they were able to go into town, and they felt this was better. Social workers told the inspector that children contributed to the décor of the centre and were involved in decorating their bedroom, which the child was very happy about.

Family members and professionals visited the children in the centre. Children were supported to have regular contact with family members which also happened within the family home. Children could call their parents regularly, and this was encouraged by the staff team. Social workers told the inspector that the staff were understanding of the children's family situations, and supported family contact between the child, their parents and siblings.

The parent who spoke with the inspector felt that the centre was a safe place for their child, and that the staff checked in with their child as much as they could. Social workers said that the staff worked to keep the children safe. While there were absences by children from the centre, some of which were for an extended period of time, the social worker

involved was satisfied that this did not raise any concern about the centre. When children were absent, the centre staff made every effort to maintain contact with them and encourage them to return.

The children were encouraged to develop their independent living skills, and participate in activities in the centre and the wider community. The inspector observed a hair and makeup station, computer facilities and a boxing bag that had been sourced following a request from a young person in the centre. Social workers said that the staff actively encourage the children to develop their skills for independence while living in the centre, and the staff worked with other services to achieve this. The parent who spoke with the inspector said that the staff were supportive of getting their child involved in education and activities. The inspector observed supportive interactions between staff and the children in the centre in relation to meal planning and self-care.

In summary, the centre was portrayed as a safe and supportive place for children to live where staff provided good quality care. There was agreement that the service was appropriately resourced with child-centred staff who developed positive relationships with the children. Children were listened to and were supported to maintain good relationships with their family. Staff worked to meet the needs of the children, and prepare them appropriately for independent living.

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

## Capacity and capability

There were effective management systems in place to ensure that the centre provided the services outlined in the statement of purpose. The centre was well resourced, and child-centred care was provided to the children living in the centre. Staff were aware of their roles and responsibilities and had a good understanding of children's needs.

The centre was last inspected in November 2019. At that time six of the standards were found to be non-compliant moderate, four were substantially compliant and three were compliant. This inspection found that there were improvements particularly in relation to the care and support of children, safeguarding and child protection, and the centre's purpose and function.

This inspection found that the centre had a statement of purpose and function that had been regularly reviewed and updated to ensure it accurately described the service provided.

The statement of purpose and function contained all the information required by the standards, describing the day-to-day operation of the centre and the policies underpinning practice. It described the model of care practiced in the centre and the philosophy on which it was based. There was an adapted version of the statement of purpose that was provided to children and their family. Staff described the model of care to the inspector and explained how they used it to assess each child's needs, and develop individual plans to help the child progress in the areas identified. The centre manager told the inspector that a review of the service had been scheduled with the deputy regional manager over the coming months

There were sufficient numbers of competent and experienced staff working in the centre to ensure the needs of the children were met on a consistent basis. The centre was staffed with a stable team. Three new staff members had joined the team in March 2021, and the centre had two vacant posts at the time of the inspection. The service had a core group of four agency staff that covered shifts within the centre when required, ensuring continuity of care for the children. Social workers who spoke with inspectors said that staff in the centre were child-centred in their practice, and had a good understanding of the children's needs. While the manager acknowledged that having a driver available on each shift can be a challenge at times, the inspector was assured that staff were available to bring children to appointments with services and family access visits. The centre manager spoke confidently about the commitment, flexibility and experience of the staff team. The inspector observed staff encouraging and supporting the children in line with their care needs.

### **Standard 5.3**

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

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

Judgment: Compliant

### **Standard 6.1**

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

#### **Regulation 6: Staffing**

There were sufficient numbers of competent and experienced staff working in the centre to ensure the needs of the children were met on a consistent basis.

Judgment: Compliant

## Quality and safety

Children in the centre received good quality, child-centre care where their needs were prioritised. The staff team worked to develop positive relationships with the children, and supported them to maintain family relationships, and prepared them for independent living. Care was provided in partnership with family and professionals involved with the child.

Staff in the centre valued family contact, and supported children to maintain contact with their family. Staff spoke with the inspector about the importance of family contact for the children, and were knowledgeable about the children's needs in relation to family contact. The staff team planned, supported and facilitated family contact in line with the child's care plan and their wishes. The inspector found that family contact took place within the family home and the centre. The children had appropriate access to the internet and phones. The children were supported to have regular phone contact with their family where agreed. Staff said that during the COVID-19 public health restrictions, video and phone contact was facilitated between children and their family members. The centre had appropriate private space to enable children to have visitors. Records of contact and visits with the child were maintained in the child's care records. The centre manager told the inspector that the team were reviewing their practice of checking in with children while on family access, in terms of the potential impact which this had on the child and their relationship with their family.

The children were encouraged and supported to become involved in leisure and social activities in the local area. Staff used keyworking sessions and children's meetings to explore individual areas of interest, and decide what activities the children may like to get involved in. These activities included boxing, gym, GAA and soccer. The staff also supported the children to celebrate birthdays with the involvement of family and friends. Individual personal achievements were also marked and acknowledged for the children. Staff in the centre supported the children to celebrate events that were specific to their culture. As the inspection took place during school holidays, the children were involved in making arrangements for summer activities.

The children living in the centre had care plans that were up to date, and appropriately detailed the child's needs. There had been a delay in receiving an updated care plan for one child, and the centre manager confirmed that it had been received on the second inspection day. Each child had a placement plan and a placement support plan which was reflective of the child's individual needs as



outlined in their care plan. Children were involved in developing and reviewing these plans through individual keyworking sessions, and also their attendance and involvement at their child in care review meetings. The placement plan and placement support plan included detailed information in relation to the child's needs, and included information on the supports and interventions required to meet these needs. The inspector found that there was good communication between the staff and the relevant people in the child's life. Social workers who spoke to the inspector said that they received regular updates on the child, and were notified promptly of any situation or event that arose for the child. The centre manager maintained oversight of the children's care records through the centre database, team meetings, staff handovers and by reviewing the shift planner. The centre manager told the inspector that each child's placement plan and placement support plan was reviewed every eight weeks to monitor the progress made in achieving the agreed outcomes for the child.

The centre provided a homely, warm and comfortable environment for the children. Each child had their own bedroom with good storage space for their personal belongings. Children were supported to personalise their bedrooms by the staff team. The staff also sought input from the children and included their voice in relation to the weekly food shopping, meal choices, paint colours for communal areas and activities. There were good indoor and outdoor recreation facilities provided for the children. Repairs were completed as needed, and the centre was being prepared for internal paint works which the children were involved with.

The centre had closed-circuit television (CCTV) in use on the exterior garden and driveway areas of the centre. There was appropriate signage visible in relation to the use of CCTV. Staff told the inspector that the children were aware that CCTV was used for security purposes. The centre manager told the inspector that while the children were aware of the use of the CCTV following a recent incident, this was going to be discussed further at the staff team meeting to ensure children were fully aware of the purpose of the CCTV.

The centre had a system in place for identifying and managing risks. The centre had a risk register system which recorded and tracked risks within the centre. Some of the risks that were recorded on the risk register had been addressed though the risks remained open on the risk register. The centre manager amended and updated the risk register during the inspection to address this issue. There was a system in place for the notification of incidents, accidents and significant events though the National Incident Management System (NIMS) and in line with Tusla's national centralised notification system. The centre completed self-assessment audits as part of the quality improvement framework, and also completed regular internal audits in relation to the service provided in the centre. Actions from these audits were

completed in a timely manner ensuring that children living in the centre received child-centred care.

Vehicles used by the centre were maintained and serviced as required, with the relevant safety equipment held within each car. The centre had a system for recording staff driving licenses and also which staff could drive the centre cars. Staff had received the required fire safety training. The safety statement for the centre was up to date. There had been gaps in health and safety meetings for a period of 14 months. The centre manager told the inspector that this was due to a delay in health and safety training for the new health and safety representative. This had been addressed at the time of the inspection, with health and safety meetings taking place on a quarterly basis in 2021.

Children were helped and supported to prepare for adulthood. The staff provided the children with opportunities to develop skills for independent living, and take increased levels of responsibility in line with their age and stage of development. Aftercare planning and preparation for independent living was promoted by the staff team. Aftercare services were involved with children in the centre, where appropriate. The staff were supportive of each child's relationship with their family, and this promoted the inclusion of parents in the preparations for children leaving care. The staff and centre manager told inspectors that children were supported and encouraged to read their files during their time in the centre.

There were appropriate systems in place to safeguard children and protect them from abuse. Tusla had recently developed a suite of national policies and procedures for its children's residential services. These policies and procedures guided the staff team in their daily work. The centre manager had provided briefings on these policies at team meetings. Staff had been completing e-learning modules on the policies prior to the cyber attack. The staff and managers had good knowledge of their obligations under Children First 2015, and had completed the appropriate training. Child protection concerns were appropriately referred to the relevant social work department in a timely manner. The centre manager then followed up with social workers where necessary to find out the outcome of the concerns reported. Keyworkers completed individual work sessions with the children focusing on their safety in different aspects of their lives. Interim measures had been put in place during the cyber attack to ensure that child protection referrals were made in a timely way as the portal was not available to staff. At the time of the inspection the regional manager was working with the Tusla national office to devise a new safeguarding statement. Social workers and the parent who spoke to the inspector said that the staff work hard to keep the children safe.

Staff in the centre had received training in an approved model of care to manage behaviours that challenged. The team had access to specialist therapeutic advice

and support which aided them in their practice, and guided their interventions with children living in the centre. Each child had an individualised crisis and situation management plan which outlined the interventions to be used by staff with the children which were in line with their care plans. Unauthorised absences of the children from the centre were managed in line with the child's absence management plan. There was an exceptional situation in the centre where although a child was admitted, they had not stayed in the centre for any meaningful period of time. However, their bed remained available to them while an alternative arrangement was being put in place by their allocated social worker. In the interim, the centre made every effort to maintain contact with the child, encouraged them to engage with the service and operated within their joint protocol for a missing child from care. Strategy meetings were taking place between the centre, social work and An Garda Síochána to promote the safety of the child. The effectiveness of planning in this case will continue to be monitored by HIQA.

Restrictive practices were not routinely used within the centre, and where they were, they were appropriate and proportionate. The inspector found that room searches and increased supervision had been used in the centre. These measures were found to be implemented only as required and on the basis of risk, and had been risk assessed and reviewed regularly.

Children's health and development needs were being met while living in the centre. Children had a medical completed on admission, where required. Children were supported to access and attend GP appointments. The staff team encouraged and facilitated children to attend additional support services, and noted when children declined to attend these appointments or assessments. Individual work sessions were completed with children by their keyworkers in relation to the child's health and development needs as outlined in their care plan.

The centre had a medication management policy in place which guided staff in the administration, storage and management of medication in the centre. Medication management audits took place on a monthly basis, and the actions from these audits were completed. Staff had received appropriate training.

**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**

The staff team planned, supported and facilitated family contact in line with the child's care plan and their wishes. The children were encouraged and supported to become involved in leisure and social activities in the local area.

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Judgment: Compliant

**Standard 2.2**

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

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

The centre had care plans that were up to date for each child. Each child had a placement plan and a placement support plan which was reflective of the child's individual needs as outlined in their care plan. There was effective communication between the centre and the relevant social workers.

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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**

While children were aware of the use of the CCTV following a recent incident in the centre, further discussion was required to ensure children were fully aware of the purpose of the CCTV on the exterior of the centre prior to incidents occurring. Risks that had been addressed had remained open on the centre risk register. This was amended by the centre manager at the time of the inspection.

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Judgment: Substantially Compliant

**Standard 2.6**

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

Children were helped and supported to prepare for adulthood. Aftercare planning and preparation for independent living was promoted by the staff team.

Judgment: Compliant

**Standard 3.1**

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

There were appropriate systems in place to safeguard children and protect them from abuse.

Judgment: Compliant

**Standard 3.2**

Each child experiences care and support that promotes positive behaviour.

Staff in the centre had appropriate skills, knowledge and training in an approved model of care to manage behaviours that challenged. The staff had access to specialist therapeutic advice that supported them in their practice. The centre managed situations in line with the required policy, procedure and protocol.

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**

Children were supported to meet identified health and development needs while living in the centre.

Judgment: Compliant

## Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
<b>Capacity and capability</b>	
<b>Standard 5.3</b> The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.	Compliant
<b>Standard 6.1</b> The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.	Compliant
<b>Quality and safety</b>	
<b>Standard 1.5</b> Each child develops and maintains positive attachments and links with family, the community, and other significant people in their lives.	Compliant
<b>Standard 2.2</b> Each child receives care and support based on their individual needs in order to maximise their wellbeing and personal development.	Compliant
<b>Standard 2.3</b> The children's residential centre is homely, and promotes the safety and wellbeing of each child.	Substantially Compliant
<b>Standard 2.6</b> Each child is supported in the transition from childhood to adulthood.	Compliant
<b>Standard 3.1</b> Each child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.	Compliant
<b>Standard 3.2</b> Each child experiences care and support that promotes positive behaviour.	Compliant
<b>Standard 4.2</b> Each child is supported to meet any identified health and development needs.	Compliant