



Report of a Children's Residential Centre

Name of provider:	The Child and Family Agency
Tusla Region:	South West
Type of inspection:	Unannounced
Date of inspection:	16 – 17 September 2024
Centre ID:	OSV-08281
Fieldwork ID:	MON-0044602

About the centre

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

The centre is managed by the Child and Family Agency (Tusla). It provides a respite and support service for children and young people who have been identified as requiring additional support to help them to remain living at home with their foster carers or family.

The service aims to provide an early intervention response and where possible prevent further need for alternative care. The centre supports children between five and 17 years of age. Children younger than five years of age may also access the service with the agreement of the centre and senior regional managers. The centre has capacity to offer respite care to a maximum of four children each night.

The service aims to build on the strengths of young people and their families and carers and to provide a supportive, nurturing and holistic living environment that promotes children's wellbeing, safety, rights, education and community involvement.

The model of care is based on Tusla's nationally adopted model of care for its residential care services.

The respite centre opened in April 2022 and at the time of this inspection, it was offering support to 34 children.

The following information outlines some additional data of this centre.

Number of children on the date of inspection	04
---	----

How we inspect

To prepare for this inspection the inspector or inspectors reviewed all information about this centre. This included any previous inspection findings and information received since the last inspection.

As part of our inspection, where possible, we:

- Speak with children and the people who visit them to find out their experience of the service
- Talk to staff and management to find out how they plan, deliver and monitor the care and support services that are provided to children who live in the centre
- Observe practice and daily life to see if it reflects what people tell us.
- Review documents to see if appropriate records are kept and that they reflect practice and what people tell us.

In order to 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
16 September 2024	09:00hrs to 17:00 hrs	Lorraine O Reilly	Inspector
17 September 2024	08:30 hrs to 16:00 hrs	Lorraine O Reilly	Inspector

What children told us and what inspectors observed

This was a routine unannounced inspection. At the time of the inspection, 34 children were availing of the respite service. Children who availed of this were either living at home or in foster care. Over the course of the two days when the inspector was onsite, there were four children availing of the respite service. The inspector spoke with two children and three children completed questionnaires to provide feedback about the service.

Children who spoke with the inspector and completed questionnaires were very positive about the service. They said they were 'very happy' there, 'I come here to chill out' and 'staff are great'. The majority of children who spoke with the inspector and who completed questionnaires said that their social workers, foster parents and staff had talked to them about the centre before they went there. Children also said that they visited the centre before staying there overnight. They were provided with a child-friendly leaflet describing the centre, with the phrase 'be our guest' on the top of it. The leaflet described what the centre did, who they would meet, what they would be doing, and also let them know they could voice their views or what to do if they wanted to make a complaint.

Children told inspectors about their social workers. The majority said that they visited them regularly, listened to them and included them in decisions being made about their lives. Children sometimes decided not to go to meetings about their care plans but they felt that their points of view were included and their opinions were heard. One child provided feedback in their questionnaire that they did not feel listened to by their social worker and this was followed up by the inspector with the service following the inspection.

Children told inspectors that they were aware of their rights and knew where to get information about them. They said they could speak about things that were affecting them. Various important people in their lives spoke to them about their rights such as their social worker, foster carers, family and staff at the centre. They were aware they could talk to someone if they felt their rights were not being respected and they knew they could ask for help. Of the children who provided feedback, one child had made a complaint and was happy with how it was managed.

The inspector observed staff working with children who were availing of respite at the time of the inspection. Their interactions were friendly and relaxed which created a nice atmosphere within the centre. Children appeared to speak freely with staff and expressed themselves with ease.

The inspector spoke with two foster carers. They told the inspector they were very happy with the service provided to the children in their care. When talking about the staff, they said 'I think they're brilliant', 'staff are unreal', 'they are so nice' and 'they make a great effort'. They said children liked going there and had 'nothing bad to say'. They spoke about the various activities such as outings to the cinema, camping and going out for drives and walks. They were greatly appreciative of the support the centre staff provided to them as foster carers. For example, they told the inspector that staff washed uniforms, transported children to school and this was 'invaluable'. They also said 'personally I would be lost without the place'. They spoke about how the service helped to save their foster care placements. They also said 'I love what they do in terms of following through on our routine'.

The inspector spoke with four external professionals. They provided very positive feedback about the staff, management team and the service in general. They said that management were great with keeping them informed about what happened when children stayed there. They described the centre as being 'a very relaxed environment', there was 'a lovely energy' there and children 'will talk to staff as they feel comfortable there'. They said it was a really good service, staff were 'fantastic' and 'very inclusive'. One professional stated the only issue they had was that the centre would not provide them with a written account of when a child stayed there so they needed to attend the centre to read the child's records instead.

The centre was located on the ground floor of a three-storey building within a hospital campus. Other large buildings surrounded it, some were used as offices, other centres and others were not in use. The setting detracted from the quality of the service offered.

At the entrance of the centre, there was a nice, bright living area which also contained a bathroom and kitchenette. There was also a giant teddy bear and lounge chairs near the main entrance and reception area. There were two staff office spaces, one was located at the main entrance by the lounge chairs and another was located next to the bedrooms.

There were four single bedrooms each with an en-suite bathroom. The centre had a large kitchen and dining room, a sitting room, utility room, games room and another living area with a pool table. There were plenty of toys, games, sports equipment for children to play with and these were located throughout the centre. On the outside of the centre, there was a large green area with various sports equipment including a trampoline, goalposts and a basketball net. The centre had three cars and staff brought children to various activities offsite too.

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 the care provided to young people.

Capacity and capability

This was the second inspection of this respite service. Overall, there was good governance and management of the service. There were effective governance arrangements within the centre which ensured child-friendly practice and positive experiences for children availing of respite. Systems in place included an up-to-date risk register which was regularly reviewed, delegated duties to social care leaders and undertaking the national system for auditing as well as local audits. While the provider had local procedures and policies in place, national responses were required in relation to standardising the out of hours policy as well as making changes to the mainstream residential services policies to facilitate the operation of the respite services nationally. Management reported that these issues were being discussed at national level at the time of the inspection.

The service was inspected against 12 of the National Standards for Residential Care (2018). The service was:

- Compliant with nine standards
- Substantially compliant with three standards.

Management had the capacity to manage staff resources to meet the needs of the children availing of respite at the centre. Vacancies were being actively recruited to at the time of the inspection with any deficits in staffing being filled by agency staff. Management had measures in place to encourage staff to remain employed at the centre such as training, career pathways and promoting a culture of child-centred practice.

Staff were appropriately qualified and skilled to work in residential care. Issues raised during the last inspection in 2022 had been adequately addressed. For example, staff had identified additional training needs and support given the change in the age-range of the children availing of the service. This showed that management were committed to improving the service provided to children and also supporting staff in terms of their identified needs.

The team provided a child-centred, safe and effective service. This was evident through conversations with children, staff, management and reviewing a sample of children's records. Staff were kept informed of information through team meetings

and supervision. There were some delays in supervision and differences in how it was recorded. Management had identified this as an area for improvement and were transitioning to a new information storage system at the time of the inspection.

The process of transferring to their new information governance system was not finalised at the time of the inspection. As well as supervision records, some children's records were held electronically while some remained on paper files. Any information requested was provided in a timely manner. While there was some information missing in children's files, it was documented when this required follow up with the relevant social work departments. The centre's register of children required updating and this had been delegated to a social care leader at the time of the inspection.

Standard 5.2

The registered provider ensures that the residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability to deliver child-centred, safe and effective care and support.

There were effective governance arrangements within the centre which ensured child-friendly practice and positive experiences for children availing of respite. The organisational structure was outlined in the statement of purpose which reflected the care provided in the centre. Management were available to children and young people and this was observed during the inspection. Staff, managers, children, foster carers and external professionals were aware of the management structures in place.

The centre was managed by a centre manager and a deputy manager. The staff team consisted of four social care leaders, eight full-time social care workers and two relief social care workers. There were two social care staff awake at night.

There was a local on-call system in place for evenings and weekends to ensure staff were supported out-of-hours and management oversight was maintained. This was undertaken by the centre manager and another social care manager within the area. These arrangements were under review at the time of the inspection at a national level to make on-call systems more standardised across the country.

Tusla's national children's residential services policies were in place. It had been identified by management and by staff that these were sometimes not applicable

to children availing of the service. Discussions were happening at national level to develop additional bespoke policies for respite services. This had yet to be completed at the time of the inspection, despite the service operating as a respite centre since 2022. In the interim, the provider had developed their own documentation for respite arrangements to ensure the centre had clear records to provide a safe service for children.

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

Management were aware of the centre's capacity and the staffing resources required to ensure child-centred, safe and effective care and support. They ensured that staff were appropriately qualified and skilled to work in residential care.

There were appropriate numbers of staff employed to meet the children's needs and in line with the statement of purpose. There was a 12-week roster planned in advance which accounted for various types of leave taken by staff. Agency social care staff covered shifts when that was required. At the time of the inspection, there were two social care worker vacancies which were in the process of being recruited to. There was a local on-call system in place consisting of the centre manager being available to staff outside normal business hours and they had the support of another social care manager.

There were arrangements in place to promote staff retention. Management had completed a training needs analysis in 2024. This noted areas such as record keeping and report writing, social care worker responsibilities, specific training for working with younger children and computer skills. At the time of the last inspection, staff spoke about being open to additional training and to enhance their skills for working with younger children and those with additional or specialist needs. Additional training was sourced by management for the team and this showed the commitment to listening to staff's views as well as ensuring child-centred practice to meet the needs of children in the best possible way.

Another action implemented was a new career pathway programme of delegating duties to social care leaders which had commenced prior to the inspection. This meant that social care leaders had been given certain areas of practice for

oversight and accountability. These included areas such as file audits, placement plans and liaising with a children's advocacy service.

Judgment: Compliant

Standard 6.3

The registered provider ensures that the residential centre support and supervise their workforce in delivering child-centred, safe and effective care and support.

Staff were supported to provide a child-centred, safe and effective service. This was evident through conversations with staff, management, reviewing a sample of children's records and staff supervision records.

There were regular team meetings where various issues impacting on service provision were discussed. For example, from a review of meeting minutes the inspector found discussion were had on referrals to the centre, record keeping, training, audits, direct work with children as well as legal requirements which needed to be met such as fire evacuation drills. The team meetings were well attended. For staff who did not attend, there was no record to determine if they had read the meeting minutes or were informed of any updates or changes to policies or practice.

Staff received supervision and had implemented the most recent national supervision policy. Supervision contracts were on some files. While generally supervision occurred in line with policy, there were some delays. The inspector found from reviewing a sample of supervision files, some recorded reasons for delays. For example, if staff were on leave, on night shift or working weekends. However, in other files, reasons were not recorded so it was unclear as to why supervision had not occurred in line with policy. There were different ways supervision was recorded, some were printed and held in paper files while others were held electronically. Staff did not have development plans. This was acknowledged by management who advised they were aware that this was an area for improvement for the service.

The recording of supervision was an area for improvement and management acknowledged this during the inspection.

Judgment: Substantially compliant

Standard 8.2

Effective arrangements are in place for information governance and records management to deliver child-centred, safe and effective care and support.

Regulation 21: Maintenance of Register

The provider was in the process of transferring to new information governance arrangements at the time of the inspection. While there were some children's records held electronically, some remained on paper files. Records held were up to date, of high quality and child-centred. For example, for any staff working with children at the centre, there was a one page document detailing important information about the child, such as food preferences, bedtime routines and their specific needs. These were seen to be updated as required and in a timely way.

The provider had most of the records required by the regulations on children's files. The review of files by the inspector found that there were delays in receiving some care plans for children and the centre had taken action to make attempts to obtain them by contacting the relevant social work departments and these were recorded on files and audits.

There were arrangements in place to share information in a timely manner. For example, the pre-admission meetings occurred with social work departments and these were on kept on children's records.

The provider held a register of children and this required some updating at the time of the inspection. For example, ensuring the timely update of the register when external professionals working with children changed. This was acknowledged by centre management and a social care leader had been allocated the delegated duty to maintain the register.

Children were aware they could access their records. They were provided with written information about this and also told by staff what plans would be for them on their admission. For example, one information leaflet informed them about actions arising from meetings which created plans for their care and they were told they could have a copy of these plans.

Judgment: Substantially compliant

Quality and safety

Overall, the centre staff provided a good quality service to children availing of respite. This was done in a safe and child-centred manner. The location of the service remained an issue. The centre was on the grounds of a hospital campus which had a range of other services onsite including a public sports facility. The provider confirmed that plans were in place to relocate the service to another premises and this was being addressed at the time of the inspection.

Children's rights were promoted within the centre. This was evident through talking with staff, children, foster carers and external professionals. Staff were familiar with each child's needs and wishes and had a good understanding of what children required from the service when they stayed there. Additional support plans were put in place as required for children who required extra support, assurance or guidance while staying at the centre.

The provider had comprehensive policies and procedures in place about when children were admitted to the centre. The measures were clearly recorded on children's files and while assessing the child's suitability to stay at the centre, other resident's needs were also taken into consideration. There was good consultation with social work departments to get the information required to ensure a child-friendly service was provided to children from when they arrived at the centre.

While the centre appeared very welcoming for children, the location of it was not ideal because it was based on a large campus with several other buildings. As noted, there were plans to move to another premises and it appeared that careful consideration had been given to the needs of children availing of respite prior to moving the service.

Issues relating to the previous inspection had been adequately addressed at the time of this inspection such as fire safety. There was also good practice in terms of how the team managed fire drills with children of all ages and abilities.

Management of risks regarding to health and safety were clearly documented. This also showed improvement since the last inspection. Incidents were reported in a timely way to national office. In addition, car check records had also improved with a designated member of the staff team being assigned to this.

The centre staff were aware of their responsibilities and the centre operated in line with Children First: National Guidance for the Protection and Welfare of Children (2017). Concerns were appropriately managed and reported in a timely manner.

There were policies and procedures in place to address bullying, harassment and exploitation.

Any restrictive practices were carefully risk-assessed in a dynamic way to ensure the safety and wellbeing of children and of others within the centre. This was appropriately recorded on children's files and due to the nature of the centre offering a respite service, occurred very rarely. These practices had the oversight of the management team.

The health, wellbeing and development of children was promoted and protected in the centre. Staff met with children individually to discuss particular issues that arose for them. Health records were maintained and medical needs were recorded. The staff at the residential centre worked with children's allocated social workers and their general practitioner (GP) as required. There was a medicine management policy in place in line with national standards. Any errors were recorded and appropriately managed in a timely manner.

Children were supported to develop skills in an age-appropriate manner. From a review of children's files, this was evident for children of any age. They were encouraged to express their views and opinions and these were acted upon when appropriate to do so. For example, children and foster carers were spoken to about children's meal preferences and routine. The kitchen/dining area was the busy part of the centre and children had adequate food choices, ate with staff at meal times and these were seen as positive interactions in a relaxed atmosphere.

Staff supported children to develop their strengths, abilities and areas of interest to them. Children participated in various outings, they were encouraged to participate in alternative training courses when school was deemed not an option and were encouraged to engage in other activities when not engaged in school. These details were recorded on children's files and this meant it was clear for all staff what the plan was for each child availing of the service.

Standard 1.1

Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child.

Regulation 10: Religion**Regulation 4: Welfare of child**

Children's rights were promoted within the centre. Staff were very knowledgeable about the children who attended the centre and each child's file reviewed by the inspector clearly demonstrated the unique needs of each child appropriate to their age, ability and stage of development.

Children were treated with dignity and respect. Specific care arrangements were put in place depending on children's needs. For example, their bedtime routines were carefully followed through with while in the centre and how best to meet children's additional needs. When children did have specific additional needs, respite support plans were put in place to best inform staff and meet the child's needs in the most appropriate manner in areas such as toileting or showering.

Other aspects which were clearly documented in children's files and what children said included staff being considerate of their dietary requirements, food preferences, social activities and supporting them to engage in training programmes when appropriate.

Judgment: Compliant

Standard 2.1

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

The provider had an admission policy which was comprehensive and all the relevant information was recorded on children's files. For example, the admissions folder held on each child's file included information such as care plans, school reports, pre-admission assessments, external professional reports and activity consent forms.

The centre staff had good communication with social workers prior to the admission of children to the centre. When the centre was deemed suitable to meet the needs of a child, the referral by the social worker was accepted and there was a pre-admission assessment completed. A meeting with the social worker occurred to talk through how best to support the child, what may put them at risk and how staff could meet the needs of the child when they were stayed in the centre.

The needs and rights of children already availing of respite were also considered when a new referral for a child was made. This meant that the rights and needs of all children were considered and this led to appropriate planning of respite for children.

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 clean, appropriately decorated and welcoming for children arriving at the centre. Children were observed to walk freely around the centre and sought out the company of staff. There were communal areas and the large kitchen/dining area seemed to be the hub of activity where everyone mixed together. As well as living rooms and a games room within the centre, there was large garden space with various sports equipment. Several toys and activities were also observed throughout the centre.

The four bedrooms were single occupancy and had en-suite bathrooms. Children brought belongings with them and the bedrooms were observed to be clean, tidy and appropriate in meeting children's needs.

An area highlighted in previous reports was the location of the centre not being homely due to its location on a larger campus grounds with several buildings. At the time of this inspection, there were plans to move to another premises in the coming months. This had been secured and renovation works had commenced in the alternative premises. Management told the inspector that careful consideration had been put into the works prior to moving there. For example, some children would require en-suite bathrooms for privacy and dignity and they had insisted that some bedrooms would have these for that reason.

During the previous inspection in 2022, fire safety requirements required improving. Those works had been completed at the time of this inspection. The centre had an up-to-date fire safety statement as required by the standards. All children had taken part in fire drills and were told about fire safety. Good practice

was evident on children's files about how this was done. For example, for some children who were upset by loud noise, staff talked them through what would happen in the event of a fire and there were also noise cancellation headphones available for children.

There were procedures in place for managing risks to health and safety of children, staff and visitors at the centre. There were two risks identified in 2024 up to the time of the inspection. These were appropriately recorded and reported in a timely manner to national office in terms of staff health and safety incidents. There were no incidents in relation to children or visitors.

The centre had three cars to transport children. These were regularly checked, were roadworthy and insured. Car check records had improved since the last inspection and one staff member had oversight of ensuring the required checks were completed.

Judgment: Substantially compliant

Standard 3.1

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

Management and staff were aware of their responsibilities and the service operated in line with Children First (2017). Concerns were appropriately managed and reported in a timely manner.

There were four child protection concerns reported during the 12 months prior to inspection. The inspector reviewed the four child protection concerns with management. One of the four had been confirmed closed. The centre staff had followed up with the social work departments to establish the outcome of the other reports and management kept records of the follow up contact.

The provider had policies and procedures in place to address bullying, harassment and exploitation. These were some of the areas of concern reported appropriately. From speaking with staff during the inspection, they advised that children were happy when they stayed at the centre and child-centred practice was promoted. They also advised if they had any concerns about children or the service provided, they were aware of how to raise these and that there was a protected disclosures policy in place.

Children were assisted and supported to develop their knowledge, self-awareness and understanding to self-protect. Files reviewed by the inspector showed good evidence that this was completed through direct work with children. Areas of vulnerability were discussed and the impact of harmful behaviours on their safety and well-being.

Judgment: Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

Centre staff were aware and mindful to support children and they promoted positive behaviour. Due to the nature of the centre being respite, children wanted to go there for some time away from their main foster care placement and there was minimal challenging behaviours. There were two significant event notifications (SEN)'s in the twelve months prior to the inspection. Children and foster carers spoke positively about how staff support children while they stayed at the centre.

There were minimal incidents of behaviours that challenge due to the nature of the service provided to children. There were two recorded restrictive practices recorded during the twelve months prior to the inspection. Both related to keeping children safe. For example, a door was required to be locked to a sports equipment room to prevent injury to children or others and the second incident related to a room search. The rationale for both were clearly recorded and were assessed to be required to maintain safety within the centre. Practices clearly recorded the date of the incident, risk assessments and oversight by the centre manager.

Judgment: Compliant

Standard 4.1

The health, wellbeing and development of each child is promoted, protected and improved.

Regulation 11: Provision of food and cooking facilities

The health, wellbeing and development of children was promoted and protected in the centre. Direct work with children was guided by national policies and guidance. This involved children undertaking individual work with staff and these were recorded in children's files.

Health promotion initiatives and children's individual health needs were supported. Medical issues were clearly noted. Prescription sheets were obtained from children's doctors and social workers as required. These were shown to the inspector and the centre's deputy manager talked through the sheets to describe what was recorded and why. The inspector also saw reference to these documents on children's files as well as follow up with social worker and GP's for medical records as required.

Children were provided with adequate quantities of food, drinks and snacks. There were various options available throughout the day and evening. Staff joined children for mealtimes and the inspector saw positive interactions between them. They were encouraged to join in with cooking when appropriate. Children's cultural, religious and special dietary requirements were taken into consideration when required.

Children were supported to develop skills in preparation for leaving care. For example, encouraging them to be more confident in their ability to undertake tasks and enrol in alternative training programs when not engaged in school.

Children of all ages were encouraged to express their views in terms of their time spent in the centre. They were supported by staff in doing this and given recognition when they had the ability to tell staff what they wanted and there was evidence staff listened to children. For example, one sibling group wanted to spend more time together and it was evident that this was discussed at subsequent meetings and arranged.

The inspector found through file reviews and talking to external professionals that there was evidence of good quality work with external support services to ensure the coordination of care for children availing of the respite service. This included gathering relevant reports from various professionals to build the team's knowledge about the children availing of respite.

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's health needs were informed by appropriate assessments. The staff at the residential centre collaborated with children's allocated social workers. This meant that children's care records contained clear information on their relevant medical and health information. This included details of children's referrals to specialist services as required. Children had access to their GP and appropriate information was shared with them as required.

There was a medicine management in policy in place in line with requirements and best practice. When children were of an age to choose to self-administer their medication, this was held in the staff office and provided to children when required. There were no safe boxes in children's bedrooms to store medication given some of the assessed risks which would be associated with this arrangement. For example, consideration was given to the age cohort of children within the centre as well as risks which may be associated with children taking incorrect doses of medication.

There were two medication errors in the 12 months prior to the inspection. This were recorded on the Significant Event Notification (SEN) register and were appropriately responded to with no adverse impact on the children involved.

Judgment: Compliant

Standard 4.3

Each child is provided with educational and training opportunities to maximise their individual strengths and abilities.

Staff supported children to develop their strengths, abilities and areas of interest to them. There were arrangements in place for children to access educational and training supports, dependent on their needs, abilities and wishes.

Staff worked with various professionals involved in meeting children's needs such as their social workers, GP's, psychologists and schools. Inspectors found that children's educational plans and progress reports were well maintained on children's files. For example, they liaised with children's school staff, their social workers and others as required. Staff also transported children to or from school and children's records clearly indicated what plans for these arrangements were.

For example, where to wait for the child based on where they were expecting to be collected.

Foster carers spoke very positively about the support with transporting children to school or to their placement after school. They spoke about staff assisting and supporting children in this way also helped maintain their placements.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
Standard 5.2: The registered provider ensures that the residential centre has effective leadership, governance and management arrangements in place with clear lines of accountability to deliver child-centred, safe and effective care and support.	Compliant
Standard 6.1: The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.	Compliant
Standard 6.3: The registered provider ensures that the residential centre support and supervise their workforce in delivering child-centred, safe and effective care and support.	Substantially compliant
Standard 8.2: Effective arrangements are in place for information governance and records management to deliver child-centred, safe and effective care and support.	Substantially compliant
Quality and safety	
Standard 1.1: Each child experiences care and support which respects their diversity and protects their rights in line with the United	Compliant

Nations (UN) Convention on the Rights of the Child.	
Standard 2.1: Each child's identified needs informs their placement in the residential centre.	Compliant
Standard 2.3: The children's residential centre is homely, and promotes the safety and wellbeing of each child.	Substantially 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
Standard 4.2: Each child is supported to meet any identified health and development needs.	Compliant
Standard 4.3 Each child is provided with educational and training opportunities to maximise their individual strengths and abilities.	Compliant

Compliance Plan

This Compliance Plan has been completed by the Provider and the Authority has not made any amendments to the returned Compliance Plan.

Compliance Plan ID:	MON-0044602
Provider's response to Inspection Report No:	MON-0044602
Centre Type:	Children's Residential Centre
Service Area:	South West
Date of inspection:	16 September 2024
Date of response:	

Introduction and instruction

This document sets out the standards where it has been assessed that the provider is not compliant with the National Standards for Children's Residential Centres 2018.

This document is divided into two sections:

Section 1 is the compliance plan. It outlines which Standard(s) the provider must take action on to comply.

Section 2 is the list of all standards where it has been assessed the provider is not compliant. Each standard is risk assessed as to the impact of the non-compliance on the safety, health and welfare of children using the service.

A finding of:

- **Substantially compliant** - A judgment of substantially compliant means that the provider has generally met the requirements of the standard but some action is required to be fully compliant. This finding will have a risk rating of yellow which is low risk.
- **Not compliant** - A judgment of not compliant means the provider has not complied with a standard and considerable action is required to come

into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of children using the service will be risk rated red (high risk) and the inspector have identified the date by which the provider must comply. Where the non-compliance does not pose a risk to the safety, health and welfare of children using the service it is risk rated orange (moderate risk) and the provider must take action *within a reasonable timeframe* to come into compliance.

Section 1

The provider is required to set out what action they have taken or intend to take to comply with the standard in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that standard, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. It is the provider’s responsibility to ensure they implement the actions within the timeframe.

Compliance plan provider’s response:

Capacity and Capability: Responsive Workforce

Standard : 6.3	Judgment: Substantially compliant
<p>Outline how you are going to come into compliance with Standard 6.3:</p> <p>The registered provider ensures that the residential centre support and supervise their workforce in delivering child-centred, safe and effective care and support.</p> <p>All supervision will be recorded in line with the new national policy documentation and the reasons for cancellation or postponement of supervision will be recorded in Proforma 2: Schedule of Supervision Individual Meetings.</p> <p>All supervision meetings will be recorded in a typed format and saved electronically.</p>	
Proposed timescale: 23 October 2024	Person responsible: Centre Manager

Capacity and Capability: Use of Information

Standard : 8.2

Judgment: Substantially compliant

Outline how you are going to come into compliance with Standard 8.2:

Effective arrangements are in place for information governance and records management to deliver child-centred, safe and effective care and support.

The centre's register of children has been updated to accurately reflect changes of external professionals working with children.

A social care leader has been designated to oversee the register with governance by the centre manager.

Proposed timescale: 9 October 2024

Person responsible: Centre Manager

Quality and Safety: Effective Care and Support

Standard : 2.3

Judgment: Substantially compliant

Outline how you are going to come into compliance with Standard 2.3

The residential centre is child-centred and homely, and the environment promotes the safety and wellbeing of each child.

The centre will be relocated to a community setting which is presently undergoing renovations and refurbishment, the expected date for completion is February 2025 with an official opening in March 2025.

Proposed timescale: March 2025

Person responsible: Centre Manager

Section 2:

Standards to be complied with

The provider must consider the details and risk rating of the following standards when completing the compliance plan in section 1. Where a standard has been risk rated red (high risk) the inspector has set out the date by which the provider must comply. Where a standard has been risk rated yellow (low risk) or orange (moderate risk) the provider must include a date (DD Month YY) of when they will be compliant.

The provider has failed to comply with the following standards(s).

Standard	Regulatory requirement	Judgment	Risk rating	Date to be complied with
6.3	The registered provider ensures that the residential centre support and supervise their workforce in delivering child-centred, safe and effective care and support.	Substantially compliant	Yellow	23 Oct 2024
8.2	Effective arrangements are in place for information governance and records	Substantially compliant	Yellow	09 Oct 2024

	management to deliver child-centred, safe and effective care and support.			
2.3	The residential centre is child-centred and homely, and the environment promotes the safety and wellbeing of each child.	Substantially compliant	Yellow	31 March 2025