

Health Information and Quality Authority Regulation Directorate

Monitoring Inspection Report on children's
statutory residential centres under the Child Care
Act, 1991



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| Type of centre: | Children's Residential Centre |
| Service Area: | CFA DNE CRC |
| Centre ID: | OSV-0004174 |
| Type of inspection: | Unannounced Follow Up Inspection |
| Inspection ID | MON-0018291 |
| Lead inspector: | Catherine Vickers |
| Support inspector (s): | Niamh Greevy |

Children's Residential Centre

About monitoring of children's residential services

The Health Information and Quality Authority (the Authority) monitors services used by some of the most vulnerable children in the state. Monitoring provides assurance to the public that children are receiving a service that meets the requirements of quality standards. This process also seeks to ensure that the wellbeing, welfare and safety of children is promoted and protected. Monitoring also has an important role in driving continuous improvement so that children have better, safer services.

The Authority is authorised by the Minister for Children and Youth Affairs under Section 69 of the Child Care Act, 1991 as amended by Section 26 of the Child Care (Amendment) Act 2011, to inspect children's residential care services provided by the Child and Family Agency.

The Authority monitors the performance of the Child and Family Agency against the National Standards for Children's Residential Services and advises the Minister for Children and Youth Affairs and the Child and Family Agency. In order to promote quality and improve safety in the provision of children's residential centres, the Authority carries out inspections to:

- assess if the Child and Family Agency (the service provider) has all the elements in place to safeguard children
- seek assurances from service providers that they are safeguarding children by reducing serious risks
- provide service providers with the findings of inspections so that service providers develop action plans to implement safety and quality improvements
- inform the public and promote confidence through the publication of the Authority's findings.

Compliance with National Standards for Children's Residential Services

The inspection took place over the following dates and times:

From: 11 November 2016 09:30 To: 11 November 2016 14:30

During this inspection, inspectors made judgments against the *National Standards for Children's Residential Services*. They used four categories that describe how the Standards were met as follows:

- **Exceeds standard** – services are proactive and ambitious for children and there are examples of excellent practice supported by strong and reliable systems.
- **Meets standard** – services are safe and of good quality.
- **Requires improvement** – there are deficits in the quality of services and systems. Some risks to children may be identified.
- **Significant risk identified** – children have been harmed or there is a high possibility that they will experience harm due to poor practice or weak systems.

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

| Standard | Judgment |
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| Theme 1: Child - centred Services | |
| Standard 4: Children's Rights | Meets standard |
| Theme 2: Safe & Effective Care | |
| Standard 5: Planning for Children and Young People | Meets standard |
| Standard 10: Premises and Safety | Meets standard |
| Theme 3: Health & Development | |
| Standard 8: Education | Meets standard |
| Standard 9: Health | Requires improvement |
| Theme 4: Leadership, Governance & Management | |
| Standard 2: Management and Staffing | Requires improvement |

Summary of Inspection findings

The centre was a detached two story house located in a residential area of North Dublin. The service provided medium to long-term care to four young people from the ages of 12 to 18 years. The area was well served by facilities like schools, shops and public transport. At the time of the inspection, there were 4 children living in the centre.

During this inspection, inspectors met with or spoke to 1 child, managers and staff. Inspectors observed practices and reviewed documentation such as statutory care plans, child-in-care reviews, relevant registers, policies and procedures, children's files and staff files.

The purpose of this inspection was to review the actions undertaken as a result of a full inspection of the service (Mon:17154) carried out on 22 to 23 March 2016. At the previous inspection, four standards were met and six standards required improvement. Some areas that required improvement included records of individual work with children, the complaints process, education, and medication management. This inspection found that children continued to receive good quality care in the centre and that their rights were well respected and promoted. While several actions were implemented by the centre, some actions remained outstanding such as medication management and some quality assurance systems.

Inspection findings and judgments

Theme 1: Child - centred Services

Services for children are centred on the individual child and their care and support needs. Child-centred services provide the right support at the right time to enable children to lead their lives in as fulfilling a way as possible. A child-centred approach to service provision is one where services are planned and delivered with the active involvement and participation of the children who use services.

Standard 4: Children's Rights

The rights of young people are reflected in all centre policies and care practices. Young people and their parents are informed of their rights by supervising social workers and centre staff.

Inspection Findings

The previous inspection found that children's rights were respected and promoted by staff and that children felt listened to. However, there were some areas identified for improvement in relation to children's access to their records and also the complaints procedure.

Improvements were made in relation to children accessing their information, in particular their daily logs. The centre manager said that some children read their daily logs and sometimes but not always signed these when they read them. Inspectors reviewed children's daily logs and found evidence that children had accessed and signed these on several occasions.

Complaints were dealt with appropriately and children knew how to make a complaint. There were two complaints made by children since the previous inspection. These complaints were responded to in a timely way and the details were well recorded. Good individual work was carried out with children following each complaint and efforts were made to ensure that children were satisfied with the outcomes. Each record of complaint recorded the complainant's satisfaction. Staff encouraged children to link in with advocacy services to provide them with further support around their complaints. One complaint was followed up by the alternative care manager and records showed that the centre contacted the social work department in order to advocate on behalf of the child and support their wishes.

Judgment: Meets standard

Theme 2: Safe & Effective Care

Services promote the safety of children by protecting them from abuse and neglect and following policy and procedure in reporting any concerns of abuse and/or neglect to the relevant authorities. Effective services ensure that the systems are in place to promote children's welfare. Assessment and planning is central to the identification of children's care needs.

Standard 5: Planning for Children and Young People

There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. This plan states the aims and objectives of the placement, promotes the welfare, education, interests and health needs of young people and addresses their emotional and psychological needs. It stresses and outlines practical contact with families and, where appropriate, preparation for leaving care.

Inspection Findings

The previous inspection found that children at the centre received good quality care and that children spoke positively about their experience of living at the centre. However, some records did not reflect the level of work being done to support children around behaviour that challenged.

Improvements were made in relation to the quality of individual crisis management plans and these provided staff with good guidance around how to manage children's behaviour. For example, the crisis management plan for one child who presented with behaviour that challenged included detailed guidance for staff about how to manage pre-crisis, escalation, outburst and recovery stages of behaviour.

There was good individual work carried out with children. Staff supported and encouraged children to manage their own behaviour and stay safe. Inspectors reviewed records of individual sessions which were carried out following incidents such as substance misuse, property damage and children going missing from care. During individual sessions with children, staff ensured that concerns were clearly outlined to children, boundaries were set and children were given the opportunity to discuss their behaviour and explore their feelings.

The centre had completed a process of implementing a new placement plan format. Placement plans and placement progress reports contained good quality and relevant information in relation to the current needs of children and actions needed to address these needs. Placement plans were reflective of care plans, and where up-to-date care plans were not available, placement plans and placement progress reports were appropriately updated by the centre. However, while some placement plans provided timeframes for actions, some placement plans did not.

Judgment: Meets standard

Standard 10: Premises and Safety

The premises are suitable for the residential care of young people and their use is in keeping with their stated purpose. The centre has adequate arrangements to guard against the risk of fire and other hazards in accordance with Articles 12 and 13 of the Child Care (Placement of Children in Residential Care) Regulations, 1995.

Inspection Findings

The centre continued to be well-maintained, spacious and nicely decorated. There were improvements required from the previous inspection in relation to the recording of fire drills and this was implemented by the centre. There was one fire drill held since the last inspection. This was well recorded and included details of children and staff who participated.

Judgment: Meets standard

Theme 3: Health & Development

The health and development needs of children are assessed and arrangements are in place to meet the assessed needs. Children's educational needs are given high priority to support them to achieve at school and access education or training in adult life.

Standard 8: Education

All young people have a right to education. Supervising social workers and centre management ensure each young person in the centre has access to appropriate education facilities.

Inspection Findings

The previous inspection found that the centre prioritised and promoted education, but not all children had an identified educational placement. Inspectors found that all children at the centre were attending appropriate educational placements and that they completed state examinations. The centre worked collaboratively with children, their families, schools and social workers in order to support children to maintain their educational placements.

Judgment: Meets standard

Standard 9: Health

The health needs of the young person are assessed and met. They are given information and support to make age-appropriate choices in relation to their health.

Inspection Findings

Children continued to appropriately access healthcare services and were supported to engage in therapeutic services. Improvements were made since the last inspection in relation to medication management practices.

The centre had implemented interim guidelines around medication management and these provided clear guidance for staff in how to appropriately administer medication to children. Only medication that was prescribed by a registered prescriber was administered by staff. This included medications that would typically be bought over the counter. There were no children taking regular prescribed medication and only over-the-counter medication was kept at the centre. Prescribed over-the-counter medication

was given to children for minor ailments as needed. A copy of prescriptions were kept at the centre. Medication kept at the centre had clear instructions, was correctly counted and co-signed by staff and children. The centre manager and the deputy centre manager recently attended training in medication management. However the staff team had not received training in this. The centre was still waiting on a new national policy to be rolled out.

Judgment: Requires improvement

Theme 4: Leadership, Governance & Management

Effective governance is achieved by planning and directing activities, using good business practices, accountability and integrity. In an effective governance structure, there are clear lines of accountability at individual, team and service levels and all staff working in the service are aware of their responsibilities. Risks to the service as well as to individuals are well managed. The system is subject to a rigorous quality assurance system and is well monitored.

Standard 2: Management and Staffing

The centre is effectively managed, and staff are organised to deliver the best possible care and protection for young people. There are appropriate external management and monitoring arrangements in place.

Inspection Findings

The centre continued to be well managed with clear lines of responsibility and good leadership from the centre manager. However, some actions from the previous inspection remained outstanding.

There continued to be room for improvement in relation to the recording of decisions made by the centre manager and deputy centre manager. As the deputy centre manager had reduced their hours, they were no longer as involved in all decision-making processes. The centre manager said that decisions made between them and the deputy centre manager were recorded at supervision. Inspectors reviewed supervision records and found that some records contained information in relation to decisions about staff issues and plans but some records contained commentary rather than clear discussion and the decisions made.

There was no progress made in relation to some staff members obtaining appropriate qualifications.

Children's files continued to be well organised and of good quality. However, inspectors did not find documentary evidence of children's file audits being carried out.

Judgment: Requires improvement

Acknowledgements

The inspector wishes to acknowledge the cooperation and assistance of all the people who participated in the inspection.