

Health Information and Quality Authority Regulation Directorate

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



Type of centre:	Children's Residential Centre
Service Area:	CFA DML CRC
Centre ID:	OSV-0004164
Type of inspection:	Unannounced Full Inspection
Inspection ID	MON-0017840
Lead inspector:	Caroline Browne
Support inspector (s):	Eva Boyle

Children's Residential Centre

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:	To:
17 August 2016 09:30	17 August 2016 17:30
18 August 2016 09:00	18 August 2016 17:30

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
Theme 1: Child - centred Services	
Standard 4: Children's Rights	Requires improvement
Theme 2: Safe & Effective Care	
Standard 5: Planning for Children and Young People	Requires improvement
Standard 6: Care of Young People	Requires improvement
Standard 7: Safeguarding and Child Protection	Requires improvement
Standard 10: Premises and Safety	Requires improvement
Theme 3: Health & Development	
Standard 8: Education	Meets standard
Standard 9: Health	Requires improvement
Theme 4: Leadership, Governance & Management	
Standard 1: Purpose and Function	Meets standard
Standard 2: Management and Staffing	Requires improvement
Standard 3: Monitoring	Meets standard

Summary of Inspection findings

The centre provided medium to long term care for up to four boys and girls aged between 13-17 years of age on admission. It is located in the Midlands region. At the time of the inspection, there were 4 children living in the centre.

During this inspection, inspectors met with or spoke to 4 children, 1 parent, 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.

Inspectors also spoke with the monitoring officer, an aftercare worker and four social workers.

Children had a good quality of life. There were good relationships and attachments formed between staff and children. Children and staff engaged in conversations about day to day life and inspectors noted a good atmosphere in the centre. Staff respected children's rights and acted as advocates for them. Children participated in interests and hobbies such as horse riding, trips to the beach and trips to local amenities. Complaints made by children were well managed and responded to in a timely way.

Children were consulted in relation to the running of the centre through children's meetings. However, not all issues raised by children at these meetings were followed up appropriately. Children had raised issues in relation to the décor of the house, but this had not been appropriately responded to by the staff team. The maintenance of the premises was not adequate and a number of issues required prompt repair.

Safeguarding measures were not always adequate or implemented in a timely way. Staff were aware of general safeguarding practices. However, safety plans had not been implemented in a timely way. Following the inspection, inspectors requested further information from the management team in relation to safeguarding measures implemented with regard to a particular concern raised. While the interim Service Manager responded with the identified steps taken to address the concern, the specific measures in place to safeguard children within the centre following this concern being reported were not adequate or timely in order to ensure children's safety at that time.

Governance and management arrangements of the centre were not always effective. Management systems in place such as risk management, monitoring and oversight were not sufficient to ensure the consistent quality and safety of the service for children.

There was a well established and experienced staff team. The majority of staff were qualified and most staff had up-to-date mandatory training. While, some additional

training needs had been identified in January 2016, in order to meet the needs of the children currently placed in the centre, this training had not been provided to date.

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

Children's rights were generally respected and promoted. All children had their own bedrooms and their right to privacy was respected. Children had been provided with child-friendly information packs when they were first placed in the centre, relating to the centre, advocacy groups and their rights. Children told staff that they were aware of their rights. Staff advocated for children and requested independent advocacy services for them when this was more appropriate. The advocacy group, Empowering People in Care (EPIC), which is a national agency that advocates for children in care, had visited the centre to meet with the children.

Children were encouraged to participate in decision-making about their lives. Staff and social workers supported children to be involved in the care planning process and the children attended most of their child-in-care reviews. On the day of inspection, one child had attended their child-in-care review. This child's key worker, social worker and the Centre Manager attended this review with the child. Inspectors observed staff supporting them prior to and following the review. The child told inspectors that they liked going to child-in-care review meetings as it was important to ensure that their voice was heard.

There was some consultation with children about the day-to-day running of the centre. However, consultation did not always result in change for children. Children were consulted and participated in the design of new booklets for children who would be placed in the centre in the future. Inspectors observed children being asked what they wanted for dinner and what activities they would like to do for the day. There were children's meetings held weekly in the centre, which were attended by children and some staff. On review of these meeting minutes, inspectors found that there was good attendance by children. However, records did not indicate whether children's requests at these meetings were followed up by the staff team. For example, inspectors found an issue raised by children on a continual basis in relation to redecoration of their bedrooms which had not been responded to by the staff team. The Centre Manager told inspectors that she had raised this matter with the interim Service Manager, but

the issue remained unresolved.

Complaints were effectively managed. Children were informed of the complaints process and were aware of how to make a complaint. There were eight complaints recorded on a complaint logs in the 12 months before the inspection, all of which had been made by children. Complaints made were taken seriously by the manager, were well managed and timely. All complaints had been closed. The majority of complaints related to bullying incidents in the centre. In response to the pattern of complaints, strategy meetings were held and children were informed of the outcomes of each of these meetings. Staff recorded the outcome of complaints on the complaints log and indicated whether children were satisfied with the outcomes.

There was closed circuit television (CCTV) in operation in the centre. There was a policy and appropriate signage in place for CCTV.

Judgment: Requires improvement

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

Admissions to the centre were not managed in line with policy. Admissions were approved by the Central Referrals Committee of which the interim Service Manager was a member. The Centre Manager was provided with adequate information about the child prior to their placement to the centre. Children visited the centre and were provided with age appropriate information about the centre prior to admission. The Centre Manager and staff team were consulted as part of the admission procedure to determine a child's suitability to the service. However, while all children were appropriately placed, there was no evidence of consideration given to, or a risk assessment being completed of, the impact of new admissions on the other children already placed in the centre to ensure their compatibility.

All children had an allocated social worker and children were visited by their social worker in line with the regulations. Children told inspectors that they sometimes went

out on various activities with their social workers and they were satisfied with the level of contact they had with them.

The majority of children had an up-to-date care plan; however, the quality of care plans varied. One child had a child-in-care reviews which was held a month previous and the Centre Manager was awaiting the updated care plan. Two out of three care plans were of good quality and gave sufficient detail to staff, but the third plan had errors throughout and was not sufficiently detailed in relation to decisions. The Centre Manager had not followed up on these issues with the social worker.

Child-in-care reviews were carried out in line with the regulations and children attended their child-in-care reviews. One child was having a child-in-care review every three months due to their age and in order to closely monitor the child's progress. However, not all minutes of child-in-care reviews were provided to the centre in a timely way. As a result, the staff team were not fully aware of what was discussed and actions to be taken to meet the needs of the child in a timely manner. The quality of minutes was mixed. Some review minutes recorded good decisions and agreed actions, other minutes did not record what was discussed in relation to the child's care planning. The Centre Manager had not followed up with relevant social workers in relation to the quality of minutes.

Placement plans reflected children's care plans and guided staff in ensuring positive outcomes for children. The majority of placement plans were regularly reviewed and identified goals, daily routines, person's responsible and timelines for achieving goals. The staff team reported on the progress of placement plans on a bi-monthly basis to the relevant social work departments. In a small number of cases, goals did not have specific timelines for achievement in order to ensure effective monitoring.

Children maintained positive relationships with their parents and siblings. Visits with family and friends were encouraged and facilitated in order to ensure children maintained links with their communities. Arrangements were in place for children to visit their families and staff facilitated these in line with care plans. Family members also visited the centre for events such as birthday parties. On the days of inspection, two children were visiting friends in the community. A parent spoken to was satisfied that they were kept informed about events in their child's life.

The quality of emotional and physical care provided to children was good. Staff interacted positively and warmly with children. Children's emotional and psychological needs were assessed and staff were aware of these needs. Children were attending specialist services such as psychology, specialist medical appointments and mental health services. Staff supported young people to attend these services. Children were also assigned to a team of keyworkers who provided emotional support to them through individual work. Issues discussed in individual work related to internet safety, healthy eating, bullying and independent living skills.

Young people's access to aftercare services had been delayed. While aftercare workers were now actively working with young people who were due to leave care within the next 12 months, this had not occurred in line with policy. Young people's needs in relation to aftercare were assessed, but the level of engagement by the young people in preparation for leaving care varied. Despite this, young people told inspectors of their

own plans for aftercare and what they hoped would be in place. However, formal aftercare plans were not in place. Recent meetings had occurred in relation to the young people's aftercare plans, but the Centre Manager was awaiting minutes from these meetings. Young people and staff were aware of goals in relation to aftercare as they had attended the meeting.

Young people were engaged in developing some independent living skills. Young people completed their own laundry, engaged in some grocery shopping, budgeting and staff completed one to one work with young people in relation to these areas. Inspectors observed staff consulting with young people and asking what they would like to learn to do in order to improve their independent living skills. However, further work in relation to these skills was required, for example, more frequent use of public transport, self administration of medication and researching possible accommodation options in the area. The aftercare needs assessment template referenced that some tasks such as painting, changing light bulbs were not permitted due to potential health and safety issues. The interim Service Manager identified that these tasks could have been incorporated into young people's preparation for leaving care. One social worker told inspectors that more time could be assigned by the staff team in order to develop young people's skills. Staff also identified that they needed to encourage young people to take responsibility for more tasks in order to build their independent living skills.

Judgment: Requires improvement

Standard 6: Care of Young People
Staff relate to young people in an open, positive and respectful manner. Care practices take account of young people's individual needs and respect their social, cultural, religious and ethnic identity. Staff interventions show an awareness of the impact on young people of separation and loss and, where applicable, of neglect and abuse.

Inspection Findings

Children were cared for in a manner that respected their choices and recognised achievements. Inspectors observed natural interaction between staff and children which was warm and respectful. Children enjoyed leisure activities similar to their peers such as horse riding, trips to the beach, walking and cycling. Significant events in children's lives such as birthdays were celebrated. Inspectors spoke with a parent who said that the staff team would do anything for the children and they were happy with the service provided.

Care practices took into account children's individual needs. Inspectors reviewed some individual work completed with children about religion. Staff accompanied children to religious ceremonies. Children showed staff photos which were displayed in the centre of the celebration of a child's confirmation. Children had contact with their families and friends. Furthermore, in order to meet children's specific needs, staff arranged briefing sessions with professionals in order to gain a greater understanding and insight of children's behaviours and underlying needs. Staff implemented interventions for children in order to assist them settling into life in the centre and promoted children's interests.

Children's nutritional intake was not consistently monitored. Inspectors observed children and staff share their meals together which were positive and sociable events. However, there were no records relating to meal planning in the centre. Some children's care plans identified their needs in relation to healthy eating. Staff made some efforts to address children's eating habits, but these were not consistent as inspectors found periods of time when children did not have a healthy diet. Records did not indicate whether children were encouraged with healthy options. In addition, there were periods when nutritional intake was not recorded. The Centre Manager acknowledged that some children's diets were limited and was trying to vary children's diets.

Behaviour that challenged was well managed by the staff team. There were some children who had complex needs and displayed behaviour that challenged. There were good quality behaviour management plans in place for each child which guided staff to manage those behaviours that challenged. Staff were aware of children's behaviour management plans and had received training in behaviour management. Children were provided with specialist interventions such as psychology in order to support both the child and staff team in the management of behaviour. Records indicated that the number of incidents of behaviour that challenged had reduced. Social workers and staff confirmed that incidents of behaviour that challenged had reduced significantly.

Incidents of children missing from care were well managed. There were seven incidents of children being reported as missing in care in the previous 12 months. All children had an absence management plan which were of good quality and plans took into account the age and personnel circumstances of the children. Staff reported these incidents appropriately in line with the missing child in care policy. In response to the number of reports of children missing in care, meetings were convened with staff, relevant social workers and An Garda Síochána in order to review and plan should future absences occur. On many occasions young people had telephone contact with staff and were not deemed to be at risk.

Consequences and incentives reviewed were reasonable and appropriate. There was a policy on the use of sanctions and there was a consequences log which recorded both positive and negative consequences. There was a total of 95 consequences in the previous 12 months. However, inspectors found that the central log was not completed in line with policy as there was no incentives or consequences recorded for a number of weeks. In addition, there was a lack of recording of the reason children received positive consequences which could result in inconsistency among the staff team.

There were no physical restraints used in the centre.

Judgment: Requires improvement

Standard 7: Safeguarding and Child Protection

Attention is paid to keeping young people in the centre safe, through conscious steps designed to ensure a regime and ethos that promotes a culture of openness and accountability.

Inspection Findings

Safeguarding measures were not consistently implemented to protect children from abuse. There were some good safeguarding practices within the centre which included good quality key-working sessions on issues relating to safeguarding, complaints, bullying and internet safety. This work was comprehensive and appropriate to the child's needs. Other safeguarding practices included absence management plans, social work visits and a complaint procedure available to children. Inspectors observed children discussing with staff the application of safe internet use principles to social media.

Not all safeguarding policies were implemented in order to ensure children's safety. Staff were trained in Children First (2011): National Guidance for Protection and Welfare of Children (Children First 2011). The Centre Manager was the designated liaison person and all concerns had been reported as child protection concerns on significant event forms to children's social workers. There were seven child protection and welfare concerns in the previous 12 months. There was a good level of communication between staff and social workers in relation to these concerns. The Centre Manager followed up with the social work department in relation to the outcomes of social work investigations. All of these child protection concerns had been closed, but parents were not consistently informed of child protection concerns or the outcomes of investigations relating to their children in line with Children First (2011). Inspectors wrote to the relevant principal social worker to highlight this and sought assurances that parents/guardians were informed of this information.

Allegations had been made against some staff members. While the outcomes of the allegations were unfounded, inspectors found that systems in place during this time to safeguard children were not robust. In the absence of an appropriate safety plan in relation to how the incident was managed HIQA sought assurances from the management team in relation to protective measures taken during this time. The interim Service Manager responded to HIQA with the steps taken to address the risk. However, inspectors found that risk assessments completed by the Centre Manager and the interim Service Manager in regard to this matter were inadequate. While the Centre Manager had appropriately referred the allegations to the relevant social work department and had consulted with the interim Service Manager, the allegations were not managed in line with the Trust in Care policy. Furthermore, there was an absence of managerial oversight over a period of two days.

Episodes of bullying within the centre were well managed. There were a number of incidents of bullying in the centre in previous months which had an impact on all children in the centre. In response to this, strategy meetings were held with all professionals which included all of the children's social workers and a principal social worker. Following this, a safety plan was agreed in order to ensure children's safety. Staff completed one to one sessions with children in relation to bullying and what behaviour was acceptable and not acceptable in the centre. Staff also facilitated children to make complaints and an independent advocacy service was made available to children during this time. Following these interventions, incidents of bullying had reduced significantly and children told inspectors that they were happy in the centre.

Staff were aware of the whistle-blowing policy.

Judgment: Requires improvement

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 health and safety of children was not always promoted or protected. The centre had policies and procedures relating to health and safety. The health and safety statement was dated 2016 and was signed by staff. All staff were trained in first aid. The centre was adequately insured and there were three vehicles in the centre which were insured, in good condition and well equipped.

However, inspectors found that the premises was not homely or well maintained. There was adequate space in the centre for children to have visits from friends, family members and social workers. However, while children were consulted in relation to redecoration of the house several months previous, the redecoration of the premises had not occurred to date. The living room was dark, there was a lack of pictures and soft furnishings and some areas of the house were not well heated. There was damage to some kitchen presses, damage to fascia and soffit required repair and some painting was required.

There were delays in responding to maintenance requests. Inspectors reviewed the maintenance log and found that there were delays of up to six months in responding to maintenance requests. Some maintenance requests relating to health and safety concerns, such as the lack of appropriate lighting outside the centre, were not responded to in a timely way. Inspectors found that the maintenance log was incomplete and some maintenance records did not clearly indicate whether the maintenance issue had been addressed appropriately. Records did not show that the Centre Manager had reviewed the log. The Centre Manager and staff told inspectors that there were delays in repairs to the kitchen and painting due to a lack of an assigned budget for capital works. The interim Service Manager told inspectors that maintenance issues had been escalated to the Regional Manager and health and safety issues were a priority but a budget was awaited.

The Centre Manager was not aware of all potential hazards within the centre. All staff were trained in fire safety. There was suitable fire fighting equipment available which was serviced regularly. There was a nominated fire safety officer among the staff team who completed, daily, weekly and monthly checks of fire fighting equipment. A fire report was completed in July 2016 which identified a number of risks in relation to fire safety in the centre. The report highlighted that the seals on fire doors required replacement. The Centre Manager had sent the report to the interim Service Manager and maintenance was requested to make the necessary repairs. However, the risks remained un-assessed and inspectors found that the Centre Manager did not have an understanding of the level of risk that this posed to children and staff. Despite maintenance replacing some fire door seals, not all seals were replaced. On the day of

inspection, the Centre Manager contacted the HSE fire officer who confirmed that this risk was high and that the work required completion within three months. However, he outlined to inspectors that the following factors mitigated against the risk; all staff were trained in fire safety, suitable fire equipment, waking staff at night and a fire alarm.

The majority of staff had not participated in a fire drill in line with policy. While five fire drills had taken place in the previous 12 months, only six of the staff team had participated in them. Neither the Centre Manager nor the interim Service Manager had identified this deficiency. All children had participated in a fire drill. Records of fire drills included the names of those who participated and the time and duration of the fire drill. However, not all records reflected whether the drills had progressed in a seamless manner or not in order to promote learning among the staff team. There were adequate means of escape and staff and children knew what to do in the event of a fire and where the fire assembly point was located. However, there was no signage in this area to identify it as the assembly point.

Medicines were safely stored in a secure cabinet.

Judgment: Requires improvement

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

All children were receiving appropriate education and support. Children were attending secondary schools, youth reach and training programmes.

Children's education was valued in the centre. Children went shopping for school supplies during the course of the inspection and inspectors observed discussions between staff and some children about their return to school. Children were encouraged to complete state examinations. Staff liaised with school staff in order for one child to receive appropriate supports to complete their examinations. Inspectors found that there was a good level of communication between the staff team, professionals and educational establishments in order to ensure positive outcomes for children's education and training. Inspectors saw certificates of achievements and school reports on children's files. Completion of state examinations were celebrated by the staff and children.

Social workers were satisfied that young people's educational needs were met and they were attending appropriate educational or training 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

The majority of children's health needs were appropriately assessed. Children had access to a general practitioner (GP) of choice, therapeutic supports and specialist services such as psychology, dietetics and specialist nurses. Children were medically examined upon admission to the centre and medical reports were available on file for children. One medical card was recently out of date and staff were following up on this. However, not all referrals to appropriate health services were made in a timely way. Some care plans had identified the need to access dietetic review, but this had not been progressed to date.

Staff endeavoured to promote children's health and encourage a healthy lifestyle. Inspectors observed staff encouraging healthy lifestyles for children. Staff provided age appropriate health education sessions in areas such as smoking cessation, sexuality and relationships. There was a no smoking policy in the centre or on the centre grounds. A small number of staff were trained in smoking cessation, alcohol and substance misuse and sexual health programmes and completed one to one sessions with children in relation to these areas.

Medication management practices required improvement. While the centre did not have a medication policy, there was a medication guidance document available to staff, which gave brief guidance on the administration of medication. However, staff were not trained in medication management, yet some of the children were prescribed complex medication. In addition, not all staff were fully aware of the information relating to medications children were being administered. Inspectors observed staff administering medication to children which was in line with the centre's guidance and records were maintained.

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 1: Purpose and Function

The centre has a written statement of purpose and function that accurately describes what the centre sets out to do for young people and the manner in which care is provided. The statement is available, accessible and understood.

Inspection Findings

There was an up-to-date statement of purpose for the centre which adequately described the service provided to children in the centre. The young person's booklet also described the service that children would receive in the centre.

Judgment: Meets standard

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

There were clear lines of authority and accountability. Staff were aware of their and each others roles, responsibilities and reporting structure. The Centre Manager was experienced, had a relevant social care qualification and had participated in some in-house management training. The Centre Manager reported to the interim Service Manager who in turn reported to the Regional Manager for Residential Care. When the Centre Manager was absent, a senior member of staff deputised in her role. However, as identified throughout this report managers were not always held to account. Inspectors found that line managers did not follow through to ensure that identified actions or requests had been implemented.

Management systems were not always effective to ensure that a quality service was delivered to children. There were policies and procedures in place in areas such as admissions, sanctions and child protection; however, some of policies required updating and others were not implemented in full. Revised policies and procedures were in the process of being developed at a national level.

Some communication systems required improvement. The staff team had a good awareness of what was happening within the centre. Team meetings were held twice monthly and there was good discussions at these meetings about each of the children. However, records did not reflect that other key items, for example risks, complaints and children's meetings were always considered for discussion. On review of a number of team meetings, it was not always clear who was responsible for the agreed action and timelines. Not all records indicated that decisions were reviewed at further team meetings and if actions had been completed in a timely way by the staff team.

Regional team meetings were held monthly and were attended by the Regional Manager, interim service managers and centre managers. There was good discussion and guidance provided at these meetings. Centre Manager meetings were also held on a monthly basis. Inspectors found that information was shared at these meetings and

there was good guidance provided to centre managers in relation to practice.

Risk management required improvement. There was no risk register in place. Not all risks in the centre were identified and assessed for example, the lack of appropriate external lighting and the poor maintenance in the house. The Centre Manager and staff had not received training in risk management. The risk assessments completed included general risks to children and environmental risks in the centre. However, the description of risk was vague and did not clearly identify what the actual risks were. The Centre Manager identified three main risks in the centre which were all related to the behaviours of children. However, she did not identify the fire safety risk as one of the key risks.

There was a prompt notification system for significant events which occurred in the centre. There were 149 notifications in the previous 12 months. Significant events recorded related to absences, conversations of note and incidents in relation to behaviour that challenged. On review of significant events, inspectors found that they were well managed by the staff team with appropriate follow up and notifications to the relevant parties which included social work departments, monitoring officer and the significant events review group (SERG). The Centre Manager reviewed incidents and noted whether the intervention was appropriate. All incident reports were reviewed external to the centre by the external review group SERG. The meeting minutes from this review were available for the staff team.

Monitoring and oversight mechanisms were not effective in assessing the quality of the service provided. The Centre Manager told inspectors that she observed day-to-day practice and reviewed files to assess the quality of recording. However, the Centre Manager told inspectors that she recorded her findings on sticky notes which she discarded once these issues were addressed. As a result, there was no record of monitoring being completed by the Centre Manager. While the Centre Manager also addressed some matters with staff through daily handovers, there remained gaps in the centre records on the day of inspection, for example, not all logs were complete. The Centre Manager and a staff member completed two health and safety audits of the centre in the previous 12 months. However, issues identified in the first audit continued to require attention. Therefore, these audits were not effective. The Centre Manager outlined that she had raised these issue with the interim Service Manager but this had not lead to the issues being addressed.

The interim Service Manager also carried out some monitoring of the centre. However, inspectors found that systems of monitoring were not completed regularly to ensure practice was effective and safe. When the interim Service Manager visited the centre she observed practice and completed reviews of supervision, children's care, placement support plans, central logs and health and safety. However, issues identified such as, incomplete maintenance records, gaps in the centre logs and children's care files had not been addressed by the Centre Manager and had not been followed up by the interim Service Manager. In addition, some of the recommendations for example in relation to supervision made in the Tusla monitoring report in January 2016, were outstanding and had not been addressed by the interim Service Manager.

There was also a national reporting tool in place; however, its use was not always effective. The Centre Manager used a governance reporting tool to report up the

National Director of Residential Care on a range of issues including the availability of children's care plans and risks on a monthly basis. Inspectors found that no issues had been escalated on this report by the Centre Manager, despite on-going delays in addressing maintenance and health and safety issues in the centre.

The register of children was up-to-date and complete. The register contained all required information such as the date of all discharges and where young people were discharged to. Children's records were stored in a locked cabinet and there was a system in place to archive old files. Children's files contained the majority of information required by regulations. For example, children's medical information, information relating to children's progress at school and records of visits by social workers.

There was a clear financial management system in place. A small number of staff members held procurement cards. Petty cash was used for some small purchases such as activities. Inspectors reviewed the petty cash and procurement card records and found that each procurement card holder kept receipts and completed a log of petty cash and purchasing card transactions. The Centre Manager reviewed these financial records on a monthly basis.

Staff members had been recruited in accordance with legislation, standards and policies. Inspectors reviewed a sample of staff files. Staff were appropriately vetted. While the majority of staff were qualified, a small number of staff did not hold a relevant qualification. One staff file did not contain evidence of a staff members qualifications.

There was a sufficient number of staff in place to deliver the service. Inspectors reviewed rosters and found that there were two staff who worked at night and three to four staff who worked during the day.

The quality of supervision was mixed and was not always carried out in line with policy. The Centre Manager and social care leaders provided supervision. All supervisors were trained in supervision. While supervision records reflected that both the children and the implementation of their plans were discussed during supervision, some supervision records were vague and did not specify actions to be completed. Other records identified that supervision was not provided in line with timeframes identified in the supervision policy. Staff told inspectors that they found supervision supportive and that it provided them with clear guidance and accountability for their workload. However, inspectors found that there was some duplication of the supervision role as the Centre Manager told inspectors that if there were performance issues with staff who were supervised by a social care leader, she addressed these issues separately.

Not all staff training needs were provided in a timely way in order to meet the needs of children. A training needs analysis had been completed in January 2016 and had been informed by the staff's training needs and the needs of the current children placed in the centre. This information was provided to the Tusla National Office Workforce Development Officer. The Centre Manager had followed this up in recent months with the National Office in order to advocate for training dates for the team. However, there was no training plan in place and no dates had been provided for the majority of training needs identified. There were some gaps in mandatory training. Three staff members required up-to-date children first training and one staff member required up-

to-date manual handling training. While the Centre Manager had received training in medication management, the staff team had not received this training. Some staff had received training in smoking cessation and suicide and self harm.

Judgment: Requires improvement

Standard 3: Monitoring

The Health Service Executive, for the purpose of satisfying itself that the Child Care Regulations 5-16 are being complied with, shall ensure that adequate arrangements are in place to enable an authorised person, on behalf of the Health Service Executive to monitor statutory and non-statutory children's residential centres.

Inspection Findings

The centre had an assigned monitoring officer whose role was to monitor the centre on a regular basis to ensure compliance with the regulations, standards and best practice. The monitoring officer had visited the centre in January and June 2016. The monitoring report from January 2016 was available in the centre. While the Centre Manager had a copy of the monitoring report from January 2016, the report from June 2016 was not available in the centre. Inspectors spoke to the monitoring officer who advised that this report had not been completed to date. The monitoring officer confirmed that he promptly received all significant event notifications in relation to children in the centre.

Judgment: Meets standard

Acknowledgements

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