



Report of a Children's Residential Centre

Name of provider:	The Child and Family Agency
Tusla Region:	Dublin North East
Type of inspection:	Announced
Date of inspection:	14 and 15 December 2022
Centre ID:	OSV-0005624
Fieldwork ID	MON-0038501

About the centre

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

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The centre provides long term placements of up to six years for up to six young people. Young people are considered suitable to be placed in the centre if they are aged 12-17 years at the time of referral and admission and they are seeking international protection. The centre focuses on building the necessary life, social skills and independence of each young person, which is suitable to their age, skills and capabilities. The centre aims to support the young people with their emotional and behavioural needs, through their model of care and to assist the young people in developing the appropriate coping skills to deal with the challenges that may face them in the future. The centre encourages and supports the young people in education, training, employment and continuing in further and higher education. The staff team act as advocates for the young people in relation to their rights as citizens and as a young person living in care. The centre aim's to help the young people foster positive relationships with other people in order to build up a supportive social network of friends and family where possible. The staff team identify any specialised services for therapeutic interventions and make referrals where applicable. The centre aims to support young people to move onto independent living/aftercare. The centre supports young people to practice their own spiritual and religious beliefs. The centre also aims to encourage and develop the young people's active participation in their placement to use their own voice and advocate for themselves.

The following information outlines some additional data of this centre.

Number of children on the date of inspection:	6
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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
14 December 2022	10:00 – 18:00	Jane Mc Carroll Rachel Kane	Lead Inspector Support Inspector
	10:00 – 17:20	Sheila Hynes	Support Inspector
15 December 2022 (Remote)	09:00 – 12:00	Jane Mc Carroll	Lead Inspector
	09:00 – 17:00	Rachel Kane Sheila Hynes	Support Inspector Support Inspector

What children told us and what inspectors observed

From what the young people said and from what the inspectors observed, young people in this service were receiving good quality care. There were six young people living in the centre at time of the inspection. The inspectors had the opportunity to speak with four young people and one young person completed a questionnaire in order to share their views. Inspectors also observed young people's interactions with staff during the inspection.

The atmosphere in the house was warm, welcoming and relaxed. The interactions observed between the young people and staff were caring and supportive. Young people described feeling safe in the centre. They spoke highly of the staff team and they could speak to them if they had a problem. One young person told inspectors that '*the staff are very good, they always help.*' For example, they said that they helped them to prepare for their independence. Another young person spoke about their keyworkers and how they support them by '*talking about life, like a teacher.*' A third young person said that when they feel '*sad or angry, staff support them.*'

There was a strong emphasis on children rights in the service. Children's Rights posters, and information about Tusla's complaints policy, 'Tell Us', were displayed in different rooms in the centre. The young people knew how to make a complaint. One young person said that they '*tell staff if they are not happy*' and '*I have no complaints.*' Some young people were aware of EPIC, the Ombudsman for Children and other sources of support for their rights. One young person said '*I meet with the judge and told my story, life got better.*' The centre had received an Investing in Children Membership Award in 2022 and this award was displayed in the entrance hall.

It was clear that the young people and staff team took pride in creating a homely and culturally sensitive environment. The centre was clean, homely, and nicely decorated. There were regular young people's meetings where the young people brought their ideas and suggestions to create a homely and positive environment. Young people said that they liked the centre. When asked if there was anything they disliked about the centre, one young person said '*nothing, I like everything.*'

Inspectors observed the national flags of the young people displayed in the entrance hall. There was also a display of the young people's artwork and photographs of the special occasions in their lives on the wall. Young people's bedrooms were decorated to suit their wishes and needs. Inspectors saw that young people could cook their own food and food from their country of origin was purchased. Meal times and sharing food was something that the young people and staff enjoyed and

they described these occasions as enhancing the feeling of belonging and togetherness within the centre.

Cultural and religious occasions were celebrated in the centre and routines were adjusted to support young people to practice their traditions and customs. There was a room where the young people could pray together. One young person talked to inspectors about the importance of '*we pray together*' which was communal pray. For example, they described the prayer room which was divided by a curtain to allow males and females practice their faith together. The delivery of care considered the adjustments that young people make to Irish culture and staff supported and promoted each young person's own cultural identity and heritage. The young people receive a monthly allowance to support them to promote their culture and they decide how they wish to spend this money.

Inspectors observed that staff were available to young people, while respecting young peoples' right to privacy. Two staff offices were located close to the kitchen and the doors were left open for accessibility between all staff and young people. The doors for communal areas were left open creating an inviting atmosphere, and young people had keys for their bedrooms and could lock the door if they wished.

The young people had very active lives in the community. Community support and integration was very important to the young people and this was supported and promoted by the staff team. The young people had time with their friends in the house. This time was planned with the young people who could choose to make food, play cricket or any activity of their choosing. One young person said that he likes to meet his friends in the gym and he said that '*I have lots of friends, too many friends.*' Other young people said they liked to meet friends in cafes and sportsclubs. The centre was located under two kilometers from a bus stop and staff facilitated young people to the bus stop. Inspectors observed that independent living skills were actively promoted within the centre.

There was a recreation room on the premises which provided the young people with a number of social activities such as a pool table, games table, art and craft supplies. There was a gym onsite which was well equipped. Young people also had the choice of joining a gym in the community and this was an option that many young people choose for the benefit of socialising, as well as fitness. There were two large reception rooms and one was decorated with a christmas tree by the young people. Inspectors found some areas of maintenance required in the premises. For example, there was a heat detector for detection and prevention of fire missing in the gym and a fire exit door in the laundry room was stiff on opening.

The inspectors spoke with at least one professional working with each of the young people. This included three social workers, two aftercare workers and two guardians

ad litem. All professionals described the staff team in positive terms and were satisfied with the level of communication between them about each young person. One guardian ad litem said that they would prefer full written report of significant events rather than summary notification. All professionals believed that the centre provided safe and good quality care by an experienced staff team. One social worker said that the team were skilled in the area of emotional and mental health. The relationship the young people develop with the staff was an area of strength that was highlighted by all professionals.

Capacity and capability

This inspection found that the centre had good governance and oversight structures in place to provide a safe service to young people. The centre was last inspected in March 2021 against eight standards. Six standards were found to be compliant and two standards were found to be substantially compliant.

On this inspection, management structures were clearly established. There was a deputy regional manager who had oversight of the operations of the service with established reporting lines to the national director. There was a centre manager and deputy centre manager who worked full time in the service. They managed a staff team comprising of sixteen staff including social care leaders and social care workers.

The centre's statement of purpose and function was mostly up-to-date with some minor improvements required to accurately describe the service being provided. The statement of purpose and function accurately described the premises and the staffing structure. It also reflected the centre's purpose, the centre's practice and the model of care that informed the daily care provided.

The statement of purpose and function did not clearly reflect the opportunity for the young people to live in the centre to complete their leaving certificate, beyond the age of 18 years. It also did not clearly outline the centre's affiliation with a bespoke after-care service and the roles and responsibilities of the management and some of the staff team in relation to this service.

Inspectors reviewed a comprehensive child friendly information booklet that was provided to young people on their admission to the centre. This booklet explained the centre's purpose and aims, the role of the staff team and rules and expectations. It also provided a range of information for young people such as; pocket money/allowances information, education information, medical and dental care information, the complaints procedure and information about their rights and responsibilities. This booklet was translated into the different languages of the young people.

The service had adopted and implemented a model of care that focused on meeting the individual needs of young people with a particular emphasis on promoting young people's right to participate fully in their placement and supporting young people to realise their full potential. The staff team were experienced, knowledgeable and competent in implementing the model of care which ensured the individual needs of each young person were met.

The centre organised and managed their workforce to deliver child-centred, safe and effective care and support. There was one part time social care worker vacancy but inspectors found that there were appropriate numbers of staff on duty and the centre had contingency plans in place, should any staffing gaps arise. There was flexibility, good skill mix and experience amongst the staff team to ensure that the young people's needs were consistently met.

Standard 5.3

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

The centre's statement of purpose and function was mostly up-to-date and clearly described the model of service delivered in the centre in line with the national standards. There were some minor improvements required to accurately describe the service being provided.

Judgment: Substantially compliant

Standard 6.2

The registered provider recruits people with the required competencies to manage and deliver child-centred, safe and effective care and support.

There was an appropriate number of staff with a good level of experience and skill employed in the service, with regard to the number and needs of the young people and aims and objectives of the service set out in their statement of purpose and function.

Judgment: Compliant

Quality and safety

The young people had a good quality of life in the centre. A committed and experienced staff team, provided care to young people which was responsive to their individual needs, with appropriate and thoughtful care planning. Young people's

developmental needs, cultural background and religious beliefs were supported and promoted. Young people participated in their care and their records included the young people's voice.

The young people received care and support based on their individual needs which promoted their wellbeing and personal development. Each young person had an allocated social worker who visited them. Two young people's child in care reviews were overdue, but dates had been scheduled for these to occur imminently. The centre records showed that there was regular contact between the staff team, the allocated social worker and guardian ad litem.

Each young person had a placement plan that detailed their needs and the plans to meet these needs, in line with their care plan. The placement plans were of good quality. The model of care supported and promoted the young people's participation in their care planning and goal setting. The progress that young people achieved was recorded and was accessible to them. The key working sessions between staff and young people and other individual work, was well recorded and showed good quality care and supported provided.

Young people were supported to maintain and develop positive attachments and links with their families. It was not possible for all young people to have visits with their families, however, the staff team assisted young people with their family contact by ensuring they had access to phones, mobiles and the communication applications they needed. Pictures of family were printed and photo albums were created with the young people. All young people were working on the reunification with their families and this was supported by social workers, guardians ad litem and legal representatives. Young people had strong community networks that were promoted and supported by the staff team. The young people attended religious services, sports and formal and informal social occasions in the community.

Inspectors reviewed a number of young people's significant events and found that incidents were well managed and in line with Tusla policies and procedures. The young people were supported following incidents and individual crisis management plans reflected the learning from incidents, and described the support that worked best for each young person. All staff were trained in Tusla's approved behaviour management approach. The incidents of challenging behaviour were low in the centre and there was one incident of physical restraint in the 12 months prior to inspection. There were no restrictive practices in operation in the centre at the time of this inspection. There was good oversight of significant events and team meeting minutes showed good reflective practice.

All staff had completed mandatory Children First training. The staff who spoke with inspectors were aware of their roles and responsibilities as mandated persons and

were aware of the Tusla policy on protected disclosure. Safeguarding and child protection was a priority of the centre staff and management. The centre manager was the designated liaison person for the centre and tracked and monitored any child protection concerns reported by the service. There were no child protection and welfare concerns in the 12 months prior to the inspection.

The young people could make a complaint at the young people's meeting or directly to staff. All young people the inspectors spoke to said that they knew how to make a complaint. There was information regarding the Tusla 'Tell Us' policy on the walls of two rooms in the centre. The complaints made by the young people were discussed at team meetings.

The young people's health, emotional and mental health needs were supported by the staff team. The response to young people's emotional needs were appropriate and supportive. Young people were supported to access external supports from mental health services such as CAMHS and Spirasi. The young people's individual crisis management plan reflected an awareness of a lack of knowledge of the young people's social history and need to respond to crisis in the least physically intrusive way possible. This thoughtful and careful consideration of the young people's life experience prior to seeking asylum was evident in conversation with staff and management.

The staff team worked with the young people on developing their independence and life skills. This was recorded in individual work and keyworking sessions. The young people cooked, had household tasks, took care of their bedroom and their laundry. The young people all attended formal education, and some were receiving grants for leaving certification exams. Two of the young people did not have an allocated aftercare worker and this issue had been identified and highlighted to their social workers by the service.

The health and safety of young people was promoted by the service. The fire safety register was well maintained. Staff completed fire safety and fire equipment maintenance checks as required and all young people had personalised evacuation plans and had undertaken fire drills. Covid-19 safety signs were on display in various languages. Vehicles used by the centre were maintained and serviced as required, with the relevant safety equipment held within each car. Audit and monitoring systems were in place to provide oversight and assurance of the health and safety of the building and premises. This was mostly effective, with some minor improvements identified on inspection.

The centre was spacious and comfortable with ample communal space as well as space for privacy for children. The centre had been painted during the summer and at the time of the inspection it was decorated for Christmas creating a warm and

homely atmosphere. The children enjoyed the facilities provided particularly the kitchen/dining area, where they enjoyed cooking and spending time with staff. Children had their own bedrooms which they were encouraged and supported to personalise.

The external grounds were spacious and generally well maintained. There was a large garden where the young people enjoyed playing sport such as cricket, football, and hurling. There were tables and chairs outside for young people and staff. Mature trees offered privacy from the neighbouring farms. There was electric entrance gates and CCTV was in operation in the centre. The appropriate signage was in place to alert visitor to the centre that CCTV was in operation.

Some minor maintenance issues required attention to drive full compliance in the service, and these were identified to the centre manager during the inspection. For example, the external evacuation assembly point sign had fallen down outside. There were old electrical appliances outside that needed to be discarded and a heat detector in the gym room was missing. Two external facing doors needed to be repaired to ensure ease of exit. One bathroom upstairs was not homely and had a clinical appearance. Some of these issues were known to the service and had been identified through management and oversight systems.

Standard 1.5

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

Regulation 8: Access arrangements

There were arrangement in place to support the young people's contact with their families, friends and community. The young people had developed strong community links and this was supported, promoted and facilitated by the staff team. The young people attended prayer services, were members of clubs and attended social gatherings.

Judgment: Compliant

Standard 2.2

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

Regulation 23: Care Plan

Regulation 24: Supervision and visiting of children

Regulation 25: Review of cases

Regulation 26: Special review

Care practices took account of the young people's individual needs in a respectful manner. Each young person had a placement plan, which was reflective of the

person's individual needs as outlined in their most recent care plan. There was effective communication between the centre and the relevant social workers.

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 spacious and comfortable with ample communal space as well as space for privacy for children. The health and safety of young people was promoted by the service. However, there were some low risk maintenance issues that required further action.

Judgment: Substantially Compliant

Standard 2.6

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

Young people were supported to develop their social and independent living skills, in line with their needs and preferences. Two young people of age did not have an allocated aftercare worker but the service was compliant in the support being provided to prepare young people for adulthood.

Judgment: Compliant

Standard 3.1

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

Safeguarding and child protection policies and procedures were effectively implemented. Young people were supported to develop skills and understanding for their own self-care and protection.

Judgment: Compliant

Standard 3.2

Each child experiences care and support that promotes positive behaviour.

A positive approach to the management of behaviour that challenges was promoted in the centre. Young people were supported and cared for appropriately following incidents. The staff team were consistent and skilled in supporting and promoting positive behaviour with the young people.

Judgment: Compliant

Standard 4.2

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

Regulation 9: Health care

Regulation 20: Medical examination

The young peoples' health and development needs, including their mental health were addressed and promoted by the staff team.

Judgment: Compliant

Appendix 1 - Full list of standards considered under each dimension

Standard Title	Judgment
Capacity and capability	
Standard 5.3 The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.	Substantially Compliant
Standard 6.1.2 The registered provider plans, organises and manages the workforce to deliver child-centred, safe and effective care and support.	Compliant
Quality and safety	
Standard 1.5 Each child develops and maintains positive attachments and links with family, the community, and other significant people in their lives.	Compliant
Standard 2.2 Each child receives care and support based on their individual needs in order to maximise their wellbeing and personal development.	Compliant
Standard 2.3 The children's residential centre is homely, and promotes the safety and wellbeing of each child.	Substantially Compliant
Standard 2.6 Each child is supported in the transition from childhood to adulthood.	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 4.2 Each child is supported to meet any identified health and development needs.	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-0038501
Provider's response to Inspection Report No:	MON-0038501
Centre Type:	Children's Residential Centre
Service Area:	CFA Dublin North East
Date of inspection:	14 and 15 December 2022
Date of response:	10/02/2023

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	
Standard : 5.3	Judgment: Substantially Compliant
<p>Outline how you are going to come into compliance with Standard 5.3: The residential centre has a publicly available statement of purpose that accurately and clearly describes the services provided.</p> <p><i>Purpose and function will be updated to include –</i></p> <ul style="list-style-type: none"> • aftercare service/supports provided by the service. • where a young person reaches 18 years and where consideration will be given to the young person remaining in placement, this will be subject to risk assessment following consultation with all relevant professionals. All young people who remain post-18 must have a completed aftercare plan. 	
Proposed timescale: 01/03/23	Person responsible: Social Care Manager

Quality and Safety	
Standard : 2.3	Judgment: Substantially Compliant
<p>Outline how you are going to come into compliance with Standard 2.3: The children’s residential centre is homely, and promotes the safety and wellbeing of each child.</p> <ul style="list-style-type: none"> • Back upstairs bathroom to be refurbished. These works will be completed by 1/8/2023. • Double doors to be replaced in recreation room. These works will be completed by 1/8/2023 • Old electrical items have been removed from back of house area. • Heat detector in Gym has been replaced. • Fire assembly point signage has been re-erected. • Back door in laundry room has been assessed by maintenance and will be replaced by 1/8/2023. 	
<p>Proposed timescale: 1/08/23</p>	<p>Person responsible: Social Care Manager</p>

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
Standard 5.3	The residential centre has a publicly available	Substantially Compliant	Yellow	1/03/2023

	statement of purpose that accurately and clearly describes the services provided.			
Standard 2.3	The children's residential centre is homely, and promotes the safety and wellbeing of each child.	Substantially Compliant	Yellow	1/08/2023