



**An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency**

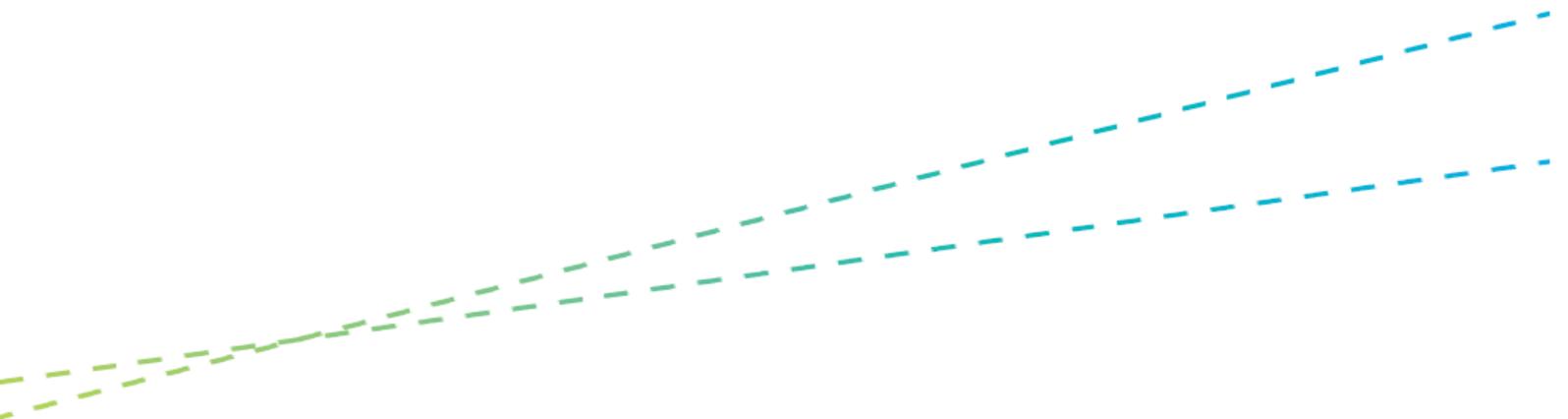
Registration and Inspection Service

Children's Residential Centre

Centre ID number: 018

Year: 2017

Lead inspector: John Laste

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Registration and Inspection Services
Tusla - Child and Family Agency
Units 4/5, Nexus Building, 2nd Floor
Blanchardstown Corporate Park
Ballycoolin
Dublin 15
01 8976857

Registration and Inspection Report

Inspection Year:	2017
Name of Organisation:	Kellsgrange Children's Services
Registered Capacity:	Four young people
Dates of Inspection:	19th April 2017
Registration Status:	Registered from the 11th of April 2015 to the 11th of April 2018
Inspection Team:	John Laste
Date Report Issued:	18th July 2017

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1. Foreword

The National Registration and Inspection Office of the Child and Family Agency is a component of the Quality Assurance Directorate. The inspectorate was originally established in 1998 under the former Health Boards was created under legislation purveyed by the 1991 Child Care Act, to fulfil two statutory regulatory functions :

1. To establish and maintain a register of children’s residential centres in its functional area (see Part VIII, Article 61 (1)). A children’s centre being defined by Part VIII, Article 59.
2. To inspect premises in which centres are being carried on or are proposed to be carried on and otherwise for the enforcement and execution of the regulations by the appropriate officers as per the relevant framework formulated by the minister for Health and Children to ensure proper standards and conduct of centres (see part VIII, Article 63, (1)-(3)). The Child Care (Placement of Children in Residential Care) Regulations 1995 and The Child Care (Standards in Children’s Residential Centres) 1996.

The service is committed to carry out its duties in an even handed, fair and rigorous manner. The inspection of centres is carried out to safeguard the wellbeing and interests of children and young people living in them.

The Department of Health and Children’s “National Standards for Children’s Residential Centres, 2001” provides the framework against which inspections are carried out and provides the criteria against which centres structures and care practices are examined. These standards provide the criteria for the interpretation of the Child Care (Placement of Children in Residential Care) Regulations 1995, and the Child Care (Standards in Children’s Residential Centres) Regulations 1996.

Under each standard a number of “Required Actions” may be detailed. These actions relate directly to the standard criteria and or regulation and must be addressed. The centre provider is required to provide both the corrective and preventive actions (CAPA) to ensure that any identified shortfalls are comprehensively addressed.

The suitability and approval of the CAPA based action plan will be used to inform the registration decision.

Registrations are granted by ongoing demonstrated evidenced adherence to the regulatory and standards framework and are assessed throughout the permitted cycle of registration. Each cycle of registration commences with the assessment and verification of an application for registration and where it is an application for the

initial use of a new centre or premises, or service the application assessment will include an onsite fit for purpose inspection of the centre. Adherence to standards is assessed through periodic onsite and follow up inspections as well as the determination of assessment and screening of significant event notifications, unsolicited information and assessments of centre governance and experiences of children and young people who live in residential care.

All registration decisions are made, reviewed and governed by the Child and Family Agency's Registration Panel for Non-Statutory Children's Residential Centres.

1.1 Methodology

The centre was granted their first registration in April 2011 to accommodate four children of both genders from age thirteen to seventeen years on admission on a short to medium term basis. This report sets out the findings of an inspection carried out to monitor the ongoing regulatory compliance of this centre with the aforementioned standards and regulations and the ongoing operation of the centre in line with its registration. This inspection was announced and took place on the 19th of April 2017.

The report is based on a range of inspection techniques including:

- ◆ An examination of pre-inspection questionnaire and related documentation completed by the Manager.

- ◆ An examination of the questionnaires completed by:
 - a) The care staff
 - b) The social worker with responsibility for the young person residing in the centre.
 - c) Other professionals e.g. General Practitioner's and therapists.

- ◆ An examination of the centre's files and recording process.

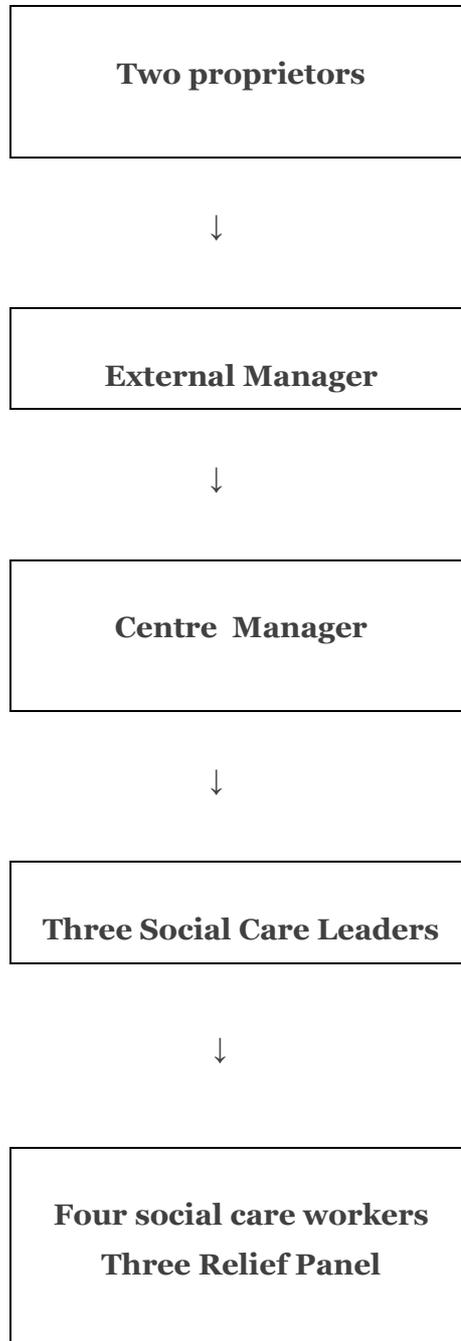
- ◆ Interviews with relevant persons that were deemed by the inspection team as to having a bona fide interest in the operation of the centre including but not exclusively
 - a) Director
 - b) The centre manager
 - c) Two staff members
 - d) Two young people
 - e) External auditor

- ◆ Observations of care practice routines and the staff/young person's interactions.

Statements contained under each heading in this report are derived from collated evidence.

The inspectors would like to acknowledge the full co-operation of all those concerned with this centre and thank the young people, staff and management for their assistance throughout the inspection process.

1.2 Organisational Structure



2. Findings with Regard to Registration Matters

The findings of this report and assessment of the submitted action plan deem the centre to be continuing to operate in adherence to regulatory frameworks and the National Standards for Children’s Residential Centres and in line with its registration. As such the registration of this centre remains **11th of April 2015 to the 11th of April 2018.**

3. Analysis of Findings

3.2 Management and Staffing

Standard

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.

3.2.1 Practices that met the required standard in full

Management

The inspector found that the newly appointed centre manager, who was the person in charge, was a suitably qualified person. They had thirteen years experience in residential care, both as a social care worker and as a residential care manager. The manager was supported in the role by three social care leaders.

There were clearly defined lines of authority within the operational procedures of this centre. The day to day management of the service was the responsibility of the centre manager. The centre manager reported to the two directors who were the proprietors of the centre. One of the directors took responsibility for the financial and business aspects of the centre while the other focused on the therapeutic care provision within the centre. The centre had an external auditor who also provided supervision to the centre manager.

The inspector found good evidence that the centre manager and regional manager were satisfying themselves that appropriate and suitable care practices were in place in the centre. There was good evidence that the centre records were regularly reviewed and signed by management. The directors were visiting the centre on a regular basis and the external auditor provided reports on average every three months.

The inspector interviewed one of the directors who was clear about their role, which was to assess the quality and effectiveness of the service and to provide support to the centre manager. The director received weekly reports of the centre's operational practices as well as receiving regular updates and significant event reports on young people from the centre manager. The inspector was provided with copies of recent

weekly reports which provided bullet point details of events in the centre. The weekly reports also covered any issues of concern the manager had regarding operational practices in the centre at the time. The inspector found these reports to be an effective tool for service planning and accountability of practice.

The inspector interviewed the external auditor who stated that they conduct quarterly audits at the centre. The external auditor was also the external complaints officer under the centres complaints procedure policy. There were no complaints under investigation at the time of the inspection. The quarterly audit reports provided by the external auditor offered positive feedback and critical analysis to the manager and team where deficits were found. The audit reports also provided positive feedback in areas where the centre was functioning well.

Register

A register of all young people who live in the centre was maintained by the centre manager. The inspector found that the register complied with the Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 21; the admission details of the residents were properly recorded, as were the discharge details of the previous residents. There was a system in place where duplicated records of admissions and discharges were kept centrally by TUSLA, the Child and Family Agency.

Notification of Significant Events

The inspector interviewed supervising social workers and examined the centre records and found significant event reports were promptly notified to both the inspection service and social work department in a timely fashion. This practice complies with the Child Care (Placement of Children in Residential Care) Regulations, 1995, Part III, Article 19, and the Child Care (Standards in Children's Residential Centres) Regulations, 1996, Part III, Article 16. The inspector found that the significant incident events reported were managed effectively.

Staffing

There was a centre manager, three social leaders, eight social care workers two part time social care workers and two relief workers. The majority of the team hold a social care or equivalent qualification. Team members were scheduled for duty at the key times and the inspector found that the staffing levels were sufficient. The

inspector found the team to be stable, with many years experience between them and they had a very good understanding of the centre's model of care.

Supervision and support

The inspector examined the staff supervision records. Each staff member had an agreed supervision contract. Supervision sessions were recorded and signed by the supervisor and supervisee. On average sessions were organised every four to six weeks. The centre manager supervises the childcare leaders who in turn supervise the team while the centre manager was supervised by the external auditor. The inspector found that the supervision records were of a good quality and staff appeared to be provided with good support in their work with the young people.

Administrative files

The administrative files were examined by the inspector and the required key records were in evidence. The recording system was well organised and accessible so that they facilitate effective management and accountability. There was good evidence that the manager and regional manager were monitoring the quality of records. The inspector interviewed the external auditor who stated that they found the quality of the recording in the centre to be of a high standard. Relevant records relating to the young people were kept in perpetuity and the management were familiar with the requirements of the Freedom of Information Acts 1997, and Data Protection Act 2003.

3.2.2 Practices that met the required standard in some respect only

Training and development

There was evidence of attendance at certified training in fire prevention, occupational first aid, health and safety, therapeutic crisis intervention, and child protection in the last year. The staff stated that they have good access to training opportunities. There were however, some deficits in required training regarding some staff members who had missed recent updates in child protection, first aid and fire prevention training. The manager must ensure that all staff are updated in child protection, first aid and fire prevention training.

3.2.3 Practices that did not meet the required standard

None Identified

3.2.4 Regulation Based Requirements

The Child and Family Agency has met the regulatory requirements in accordance with the *Child Care (Placement of Children in Residential Care) Regulations 1995 Part IV, Article 21, Register.*

The centre has met the regulatory requirements in accordance with the *Child Care (Standards in Children's Residential Centres) Regulations 1996*
-Part III, Article 5, Care Practices and Operational Policies
-Part III, Article 6, Paragraph 2, Change of Person in Charge
-Part III, Article 7, Staffing (Numbers, Experience and Qualifications)
-Part III, Article 16, Notification of Significant Events.

Required Action

- The manager must ensure that all staff are updated in child protection, first aid and fire prevention training.

3.5 Planning for Children and Young People

Standard

There is a statutory written care plan developed in consultation with parents and young people that is subject to regular review. The 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.

3.5.1 Practices that met the required standard in full

Suitable placements and admissions

The inspector found that admissions to the centre were planned and in line with the stated purpose and function. There were four young people in residence at the time of the inspection; two 17 year-old girls and two 17 year old boys.

Applications for admission to the centre were coordinated nationally by the Child and Family Agency private placements team. The inspector was satisfied that appropriate

information was provided about young people prior to admission. This was confirmed through the audit of four residents care files by the inspector. Pre-admission risk assessments were carried out prior for each new admission.

The inspector met with one of the young people who confirmed that they were clear about the reason for their admission to care. They also confirmed that they had received written information about the centre as part of the admission process.

Statutory care planning and review

The inspector reviewed compliance with the regulations on care planning. Child Care Plans were completed within the required time frame for the young people in compliance with the *Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 23*. The inspector reviewed the young people's care plans and found that they were comprehensive and placement plans linked to the care plans were drawn up by the centre. Care review meetings were being organised in line with the statutory defined time limits as set out in the *Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV*.

Contact with families

The young person and the manager interviewed confirmed that young people have contact with family and friends where this was in their best interest and welfare. This was also confirmed by the supervising social workers. Contact and visits with family and friends was facilitated by the centre. Records of all contacts and visits were adequately maintained.

Supervision and visiting of young people & Social Work Role

Standard

Supervising social workers have clear professional and statutory obligations and responsibilities for young people in residential care. All young people need to know that they have access on a regular basis to an advocate external to the centre to whom they can confide any difficulties or concerns they have in relation to their care.

There was evidence that they were carrying out their role and responsibilities in line with the regulations and standards. The centre manager stated that young people received regular visits from their social workers which was evident in the young

people's files. The inspector interviewed the four supervising social workers by phone during the inspection and confirmed that they were reading and signing records relating to the young people on visits to the centre.

Emotional and specialist support

The National Standards for Children's Residential Centres criteria 5.29 states 'All children in care should have early access to the specialist services they may require'. The inspector confirmed that the young people had access to the specialist services they required at the time of the inspection. They accessed a psychologist who was available to the young people and provided insight and clinical guidance to the staff team to support them in meeting the needs of the young people. The psychologist was available for consultation by phone or e-mail with the centre manager and occasionally visited to the centre. The young people could meet on an individual basis with the psychologist if they wished to which some young people chose to do.

The young people were each assigned a key worker. The inspector interviewed one of the key workers and found that they were knowledgeable about the young person they were assigned to and showed good insight into their emotional and psychological needs.

The young people had access to specialist services such as Child and Adolescent Mental Health Services (CAMHS), drug and alcohol counselling and other services as required in the community on an individual basis, which were accessed through the local and regional health services.

Preparation for leaving care

The centre had an independent living skills programme and it was clear from documentation, interviews with social workers, aftercare services and staff members that key workers were engaged in direct work in order to prepare the young people for leaving care. Key work sessions included: personal development; health promotion; drug awareness; sexual health and wellbeing; self care skills; budgeting and homemaking skills.

Discharges

The inspector was satisfied that the young people discharged from the centre were discharged in a planned way. There was one young person discharged from the centre

in the past year which was in a planned way and part of the young person's aftercare plan.

Aftercare

All the young people in the centre were in varying degrees of preparation for leaving care. The centre manager expressed concern regarding the difficulties in some cases, in accessing aftercare services for the young people in the centre. The supervising social workers informed the inspector that while it was at times difficult to access services the young people in the centre would be provided with aftercare services.

Children's case and care records

The inspector reviewed care files of the young people. Recordings were kept up-to-date and the records were filed in chronological order. The files were maintained in a standardised format which was accessible and easy to follow.

There was evidence that the key documentation as set out in the regulations and standards was properly recorded on the care files. The recording standard was good and the inspector could see that the records were scrutinised by management. The manager confirmed that the care files of ex-residents are archived and stored securely.

3.5.4 Regulation Based Requirements

The Child and Family Agency has met the regulatory requirements in accordance with the *Child Care (Placement of Children in Residential Care)*

Regulations 1995

-Part IV, Article 23, Paragraphs 1and2, Care Plans

-Part IV, Article 23, paragraphs 3and4, Consultation Re: Care Plan

-Part V, Article 25and26, Care Plan Reviews

-Part IV, Article 24, Visitation by Authorised Persons

-Part IV, Article 22, Case Files.

The centre has met the regulatory requirements in accordance with the *Child Care (Standards in Children's Residential Centres) 1996*

-Part III, Article 17, Records

-Part III, Article 9, Access Arrangements

-Part III, Article 10, Health Care (Specialist service provision).

Required Action

No action required.

4. Action Plan

Standard	Issues Requiring Action	Response	Corrective and Preventative Strategies To Ensure Issues Do Not Arise Again
<p>3.2</p>	<p>The manager must ensure that all staff are updated in child protection, first aid and fire prevention training.</p>	<p>The majority of staff have completed Child Protection and certificates are on file (There is one outstanding due to illness and this will be re-scheduled at our earliest convenience).</p> <p>First Aid training was undertaken by all staff team in June and Certificates have been provided.</p> <p>Fire prevention training was completed in April. There is a ‘fire walk’ now incorporated into induction pack for new staff members which must take place prior to beginning employment.</p>	<p>A Training Log has been completed with a clear timeline for required training for all members of the staff team. This will be subject to regular review by management.</p>