

TÚSLA

An Gníomhaireacht um
Leanaí agus an Teaghlaigh
Child and Family Agency

ALTERNATIVE CARE

INSPECTION & MONITORING

INSPECTION GUIDANCE SUPPORT FRAMEWORK

Theme 1: Child-Centred Care and Support

Children's Residential Centres

TABLE OF CONTENTS

1.0 Introduction	3
2.0 Purpose	3
3.0 Structure of the Inspection Guidance Support Framework	4
4.0 Glossary of Terms	4
5.0 Theme 1: CHILD-CENTRED CARE AND SUPPORT	6
Standards 1.1 - Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child.	6
Standards 1.2 - Each child's dignity and privacy is respected and promoted	9
Standards 1.3 - Each child exercises choice, has access to an advocacy service and is enabled to participate in making informed decisions about their care.....	11
Standards 1.4 - Each child has access to information, provided in an accessible format that takes account of their communication needs.....	14
Standards 1.5 - Each child develops and maintains positive attachments and links with family, the community and other significant people in their lives.....	15
Standards 1.6 - Each child is listened to and complaints are acted upon in a timely, supportive and effective manner.	18
6.0 References	22

1.0 Introduction

The Alternative Care Inspection and Monitoring Service is part of Children's Service Regulation and is a component of the Quality Assurance Directorate of the Child and Family Agency. The inspectorate which 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, the Child Care (Standards in Children's Residential Centres) Regulations, 1996 and the Health Information and Quality Authority (HIQA) National Standards for Children's Residential Centres, 2018, which replace the 2001, Department of Health and Children, National Standards for Children's Residential Services.

The Child Care (Standards in Children's in Residential Centres) Regulations, 1996 provide the framework against which registration decisions of children's residential centres are primarily made. The HIQA, National Standards for Children's Residential Centres, 2018 provide the framework against which inspections are carried out and provide the criteria against which centres structures and care practices are examined.

The Alternative Care Inspection and Monitoring 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.

2.0 Purpose

The Alternative Care and Monitoring Service, Inspection Guidance Support Framework has been developed as a guidance document to assist inspectors in understanding the process of inspection, complying with the Child Care (Placement of Children in Residential Care) Regulations 1995, the Child Care (Standards in Children's Residential Centres) Regulations, 1996 and the National Standards for Children's Residential Centres, 2018 (HIQA).

Whilst the importance of professional judgment remains paramount during the inspection process it is the purpose of this Inspection Guidance Support Framework to promote:

- A standardised approach amongst inspectors in relation to the process of inspection, complying with regulations and standards.
- A structured framework to identify to registered providers and persons who participate in the management of designated centres what is required in ensuring they are delivering a safe and effective service that complies with the regulations and standards and any other legislation.

3.0 Structure of the Inspection Guidance Support Framework

The Inspection Guidance Support Framework provides detailed guidance to assist TUSLA inspectors and approved centres to improve the quality of services provided to each child/young person.

For each Theme of the National Standards for Children's Residential Centres, 2018 (HIQA), the Inspection Guidance Support Framework shall outline the specific standard and examples of information/evidence in relation to observation and documentation reviewed as part of the inspection. Interviews with senior management, centre management, staff, child/young person and observations are also used as part of the process where appropriate.

The Inspection Guidance Support Framework aims to promote the continuous improvement of the quality of services provided to children/young people residing in non-statutory children residential centres.

4.0 Glossary of Terms

Accountability – being answerable to another person or organisation for decisions, behaviour or any consequences.

Care plan – A document generated from an assessment of the child, setting out their goals, needs, aims and objectives of the placement and how the centre proposes to address them. The child's care plan, supervision and child in care reviews are requirements for the social work department under the Child Care (Placement of Children in Residential Care) Regulations 1995.

Care record – is a record of all information relating to a child to support the residential centre to promote and protect the child's life, health, safety, development and welfare, as detailed in the regulations.

Child – a person under the age of 18 years. (Child Care Act, 2001)

Child safeguarding – ensuring safe practice and appropriate responses by staff and to concerns about the safety or welfare of children/young people, should these arise. Child safeguarding is about protecting the child/young person from harm, promoting their welfare and in doing so creating an environment which enables children and young people to grow, develop and achieve their full potential. (TUSLA, 2019)

Child Safeguarding Statement – a written statement that specifies the service being provided and the principles and procedures to be observed in order to ensure, as far as practicable, that a child/young person availing of the service is safe from harm. (TUSLA, 2019)

Competency – the behavioural definition of the knowledge, skills, values and personal qualities that underlie the adequate performance of professional activities.

Incident – an event or circumstance which could have (near miss) or did lead to harm. Incidents can be practice related or non-practice related and includes incidents associated with harm to or impact on:

- Children/young people.
- Staff or visitors.
- Non-compliance with standards or regulations. (TUSLA, 2017)

Key Worker – this is a member of the centre staff team who has particular responsibility for the child, liaises directly with them, coordinates health and social services and acts as a resource person.

Person in charge – in relation to a registered children's residential centre, means the person whose name is entered in the register as the person in charge of the centre - Child Care (Placement of Children in Residential Care) Regulations 1995. The person in charge's duties include overseeing the day-to-day running of the centre, managing the training and development of staff and ensuring the management of records, incidents and investigations in the centre. From time to time, some or all of these duties may be delegated to one or more suitably qualified staff members in the centre as appropriate. (HIQA, 2018)

Placement plan – outlines the needs and goals of the placement for the child for the duration of their placement. In the context of children's residential centres, the placement plan is informed by the care plan. (HIQA, 2018)

Registered provider – means the person whose name is entered in the register as the person carrying on the centre - Child Care (Placement of Children in Residential Care) Regulations 1995. The registered provider's responsibilities include overseeing the management of the centre's care practices, operational policies and procedures; ensuring the centre has sufficient resources, facilities and access to services in line with the centre's statement of purpose and ensuring each child/young person in the centre is suitably placed, receives effective care and support and is assisted in preparations for leaving care, in line with their individual needs. (HIQA, 2018)

Risk – The probability/likelihood of an adverse event, outcome, danger, loss or injury within the healthcare system. (HIQA, 2014)

Safe care and support – how children's residential centres protect children and promote their welfare. Safe services also avoid, prevent and minimise harm, and learn when things go wrong. (HIQA, 2018)

Serious Event Review Group – multidisciplinary fora concerned with serious incidents involving children/young people placed in Children's Residential Services. The aims of the SERG is to:

- review a serious incident/a number of interrelated serious incidents.
- identify opportunities for learning about the causes of that incident/those incidents and about care practice at centre level.
- to ensure that learning is operationalised in respect of that incident/those incidents i.e. that risk is managed, underlying issues are addressed and future occurrences of same are prevented wherever possible. (TUSLA, 2017)

Workforce – all people working in a service.

5.0 THEME 1: CHILD-CENTRED CARE AND SUPPORT

Standards 1.1 – Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child

Children's residential centres are child-centred and focus on the individual child and their care and support needs. A child-centred approach means recognising a child's rights, including their right to be listened to and to participate in decisions made about their lives, while taking into account each child's age, ability and maturity.

Children in residential care are entitled to the best quality care. The unique worth and individuality of each child should be valued and reflected in the ethos, management and care practices of each centre.

Child Care (Standards in Children's Residential Centres) Regulations, 1996, Part III Article 11:

The registered proprietor and person in charge of a centre shall satisfy the relevant health board that appropriate arrangements are in place to enable children residing in the centre, in so far as is reasonably practicable, to practice their religion.

Child Care (Standards in Children's Residential Centres) Regulations, 1996, Part III Article 12:

The registered proprietor and person in charge of a centre shall satisfy the relevant health board that children residing in the centre are provided with food in quantities adequate for their needs which is properly prepared, wholesome and nutritious, involves an element of choice and takes account of any special dietary requirements.

Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 23:

(1) Subject to sub-article (2) of this article, a health board shall, before placing a child in a residential centre, prepare a plan for the care of the child and the said plan shall, among other matters, deal with -

- (a) the aims and objectives of the placement,*
- (b) the support to be provided to the child, the residential centre concerned and, where appropriate, the parents of the child by the health board,*
- (c) the arrangements for access to the child by a parent, relative or other named person, subject to any order as to access by a court, and*
- (d) the arrangements for the review of the plan.*

(2) Where it is not practicable for a health board to prepare a plan before a child is placed in a residential centre, such plan shall be prepared as soon as practicable.

(3) In preparing a plan under this article, a health board shall consult the manager and, in so far as is practicable, the child and every person who in law is a guardian of the child.

(4) Particulars of a plan prepared by a health board under this article shall be made known by the board to the manager and, in so far as is practicable, to the child and every person who in law is a guardian of the child.

Examples of information/evidence that will be reviewed and how this will be done

Standard 1.1: Each child experiences care and support which respects their diversity and protects their rights in line with the United Nations (UN) Convention on the Rights of the Child.

Documentation Review

Inspectors will review documents including (but not limited to):

- Centre policies including but not limited to:
 - Cultural diversity.
 - Spirituality.
 - Child protection and safeguarding policy.
 - Complaints.
 - Bullying.
- Centre complaints log.
- Young people's meetings.
- Charter of children's rights.
- Young people's information booklet.
- Child safeguarding policy.
- Key work records.
- Daily records.
- Placement plans.
- Care plans.
- Policy on cultural diversity.
- Information on external advocacy groups.
- Minutes of team meetings.
- Daily handover records.
- Children's care files.
- Manager's meeting minutes.
- Training records.
- Statement of purpose and function.
- Governance audits.
- Weekly menu planning.
- Records of induction.

Observation

Inspectors will observe:

- The interactions between the staff and young people.
- Availability of food provided at mealtimes.
- What food is available in the centre.
- If there are leaflets or posters on external advocacy groups.
- Daily handover meetings.
- Team meetings.

Interview

Inspectors will communicate with children/young people:

- To determine whether staff talk with them about their rights and help them to understand these.
- To determine whether they are supported in expression of their culture, spirituality, religion, gender, sexuality, sexual orientation and identity.
- To determine whether their dietary needs are met.
- To determine whether they feel respected and if they feel their views are heard.
- To determine whether they have been made aware of and provided with information on external advocacy groups.
- To determine if they have an assigned key worker and the work that is undertaken with them.
- If they are happy in the centre.
- If there is anything, they would like to see change.

Inspectors will communicate with staff:

- To determine their awareness of policies that promote the rights of children in the centre.
- To determine staff awareness and understanding of the rights of the child.
- To determine how children are informed of their rights.
- To determine how children's rights are upheld in the centre.
- To determine how children are supported in expressions of their culture, spirituality, religion, gender, sexuality, sexual orientation and identity.
- To determine how children's dietary needs are planned for and accommodated.
- To determine if there is adequate funding in the centre to support planning for young people.
- To determine if there are adequate staff in the centre to meet the needs of children.
- To determine what training they have been provided with to support children's expressions of their culture, spirituality, religion, gender, sexuality, sexual orientation and identity.

Inspectors will communicate with the registered provider and person in charge or designated other:

- To determine their awareness of policies that promote the rights of children in the centre.
- To determine the mechanisms in place to promote diversity and protect the rights of children.
- To determine the effectiveness of the mechanisms in place to promote diversity and protect the rights of children.
- To determine how children are informed of their rights.
- To determine how children are supported in expressions of their culture, spirituality, religion, gender, sexuality, sexual orientation and identity.
- To determine how children's dietary needs are planned for and accommodated.
- To determine if there is adequate funding in the centre to support planning for young people.
- To determine how they allocate resources to the centre to meet the needs of children.

- To determine how they undertake a training needs analysis to ensure that staff have been provided with training to support children's expressions of their culture, spirituality, religion, gender, sexuality, sexual orientation and identity.

Inspectors will communicate with social workers/relevant professionals:

- To determine if they are satisfied that there are adequate staff in the centre to promote diversity and protect the rights of children.
- To determine if they are satisfied that the training.
- To determine if they feel the work being undertaken in the centre adequately promotes diversity and protects the rights of children.

Standards 1.2 – Each child's dignity and privacy is respected and promoted

Each child's privacy and dignity is respected by the staff caring for them and the other children in the centre. Their privacy is respected, for example personal space, personal communications and personal belongings. Information is only shared with someone who needs to know it to help support and care for children, for example social workers or staff caring for them in the centre. Staff caring for children make sure that things that are precious to them, such as important items from their childhood, photographs or certificates are kept safe for them to have when they leave care.

Children's quality of life will be influenced by the value placed on their dignity and individuality in all aspects of daily living.

Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 23:

(1) Subject to sub-article (2) of this article, a health board shall, before placing a child in a residential centre, prepare a plan for the care of the child and the said plan shall, among other matters, deal with -

- (a) the aims and objectives of the placement,*
- (b) the support to be provided to the child, the residential centre concerned and, where appropriate, the parents of the child by the health board,*
- (c) the arrangements for access to the child by a parent, relative or other named person, subject to any order as to access by a court, and*
- (d) the arrangements for the review of the plan.*

(2) Where it is not practicable for a health board to prepare a plan before a child is placed in a residential centre, such plan shall be prepared as soon as practicable.

(3) In preparing a plan under this article, a health board shall consult the manager and, in so far as is practicable, the child and every person who in law is a guardian of the child.

(4) Particulars of a plan prepared by a health board under this article shall be made known by the board to the manager and, in so far as is practicable, to the child and every person who in law is a guardian of the child.

Examples of information/evidence that will be reviewed and how this will be done

Standard 1.2: *Each child's dignity and privacy is respected and promoted.*

Documentation review

Inspectors will review documents including (but not limited to):

- Centre policies including but not limited to:
 - Discharge.
 - Aftercare.
 - Access to information.
 - Intimate care (if relevant).
 - Freedom of information and data protection.
- Specialist or clinical reports.
- Care records.
- Care plans.
- Placement plans.
- Key work records.
- Supervision records.
- Daily records.
- Risk assessments.
- Centre purpose and function.

Observation

Inspectors will observe:

- The interactions between the staff and young people.
- The physical premises and layout of the centre.
- Storage of children's belongings.

Interview

Inspectors will communicate with children/young people:

- To determine if they feel they have privacy and can spend time on their own.
- To determine if they are aware who their information is shared with.
- To determine where they can safely store their belongings.
- To determine if they are aware that staff keep their memorabilia safely for them.

Inspectors will communicate with staff:

- To determine their awareness of policies that promote the dignity and privacy of children.
- To determine how the promotion of dignity and privacy is implemented in day-to-day practice.
- To determine their awareness of their obligations under data protection and freedom of information.
- To determine how they inform children who their information is shared with.
- To determine how they keep children's information safe.
- To determine their understanding of risk management processes in the centre.

Inspectors will communicate with the registered provider and person in charge or designated person:

- To determine their awareness of policies that promote the dignity and privacy of children.
- To determine the mechanisms in place to ensure the promotion of dignity and privacy is implemented in day-to-day practice.
- To determine their awareness of their obligations under data protection and freedom of information.
- To determine their oversight of staff adherence to policies in relation to data protection and freedom of information.
- To determine the mechanisms in place to oversee the risk management processes in place in the centre.

Inspectors will communicate with social workers/relevant professionals:

- To determine if they are satisfied that the dignity and privacy of children is adequately upheld.
- To determine their involvement in risk assessments around limitations placed on children's space and movement.
- To determine how they ensure children's memorabilia and personal items are kept safe when they leave the centre.

Standards 1.3 – Each child exercises choice, has access to an advocacy service and is enabled to participate in making informed decisions about their care

Child-centred residential centres promote the participation of children in decisions about their lives and listen to what children have to say. Each child has access to an advocacy service that represents their views and acts in their best interests, especially if they have difficulties communicating their wishes or making informed decisions.

Children are supported and encouraged to share their views and wishes and to take part in making decisions. Children are asked their opinions when decisions are being made about their life or about day-to-day life in the centre. Staff caring for children talk with them about decisions that affect their lives and why these decisions were made.

Child Care (Standards in Children's Residential Centres) Regulations, 1996, Part III Article 7:

The registered proprietor and a person in charge of a centre shall satisfy the relevant health board that the number, qualifications, experience and availability of members of the staff of the centre are adequate, having regard to the number of children residing in the centre and the nature of their needs.

Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 23:

(1) Subject to sub-article (2) of this article, a health board shall, before placing a child in a residential centre, prepare a plan for the care of the child and the said plan shall, among other matters, deal with -

- (a) the aims and objectives of the placement,*
- (b) the support to be provided to the child, the residential centre concerned and, where appropriate, the parents of the child by the health board,*
- (c) the arrangements for access to the child by a parent, relative or other named person, subject to any order as to access by a court, and*
- (d) the arrangements for the review of the plan.*

(2) Where it is not practicable for a health board to prepare a plan before a child is placed in a residential centre, such plan shall be prepared as soon as practicable.

(3) In preparing a plan under this article, a health board shall consult the manager and, in so far as is practicable, the child and every person who in law is a guardian of the child.

(4) Particulars of a plan prepared by a health board under this article shall be made known by the board to the manager and, in so far as is practicable, to the child and every person who in law is a guardian of the child.

Examples of information/evidence that will be reviewed and how this will be done

Standard 1.3: Each child exercises choice, has access to an advocacy service and is enabled to participate in making informed decisions about their care.

Documentation Review

Inspectors will review documents including (but not limited to):

- Centre policies including but not limited to:
 - Children's rights.
 - Key working.
 - Access to information.
 - Consultation.
 - Placement planning.
- Young people's meetings.
- Charter of children's rights.
- Young people's information booklet.
- Child safeguarding policy.
- Key work records.
- Daily records.
- Placement plans.
- Care records.
- Care plans.
- Information on external advocacy groups.
- Minutes of team meetings.
- Daily handover records.
- Children's care files.
- Manager's meeting minutes.

- Statement of purpose and function.
- Governance audits.

Through observation

Inspectors will observe:

- The interactions between the staff and young people.
- Handover meetings.
- Staff team meetings.
- Information leaflets in the centre relating to advocacy groups.

Through communication (interview)

Inspectors will communicate with children/young people:

- To determine how they are consulted with.
- To determine if they feel their views and wishes are taken into consideration when decisions are made affecting their lives.
- To determine if they understand why decisions are made.
- To determine if they are provided with information from external supports.
- To determine if staff assist and support them to read their records.
- To determine if they have been given a choice in the allocation of key worker.
- To determine if they received information on their rights during their placement.
- To determine if they have been consulted prior to statutory reviews.
- To determine if they have been offered the opportunity to complete an exit interview if they are leaving the centre.

Inspectors will communicate with staff:

- To determine how children are supported to exercise choice and contribute to decisions about their care.
- To determine how children are encouraged to express their views.
- To determine how the opinions of children inform policies, practices and the daily running of the centre.
- To determine the process of allocating and changing key workers.
- To determine their understanding of the role of the key worker in the centre.
- To determine how they support and assist children to read their care files.

Inspectors will communicate with the registered provider and person in charge or designated person:

- To determine how children are supported to exercise choice and contribute to decisions about their care.
- To determine the mechanisms in place to oversee how children are encouraged to express their views.
- To determine the mechanisms in place to oversee how the opinions of children inform policies, practices and the daily running of the centre.
- To determine how they establish that key working is adequate and meets the needs of the child.

Inspectors will communicate with social workers/relevant professionals:

- To determine if they are satisfied that children are supported to have their views heard and how this informs decisions relating to their care.

Standards 1.4 – Each child has access to information, provided in an accessible format that takes account of their communication needs.

Young people are given access to information about themselves and services available in accordance with their age and level of experience. Being ‘child-centred’ means communicating in a manner that meets each child’s communication needs and that supports the development of relationships based on trust. Through good communication and providing information, children can participate in decision-making about their care in a meaningful way.

Examples of information/evidence that will be reviewed and how this will be done

Standard 1.4: *Each child has access to information, provided in an accessible format that takes account of their communication needs.*

Through review of documentation

Inspectors will review documents including (but not limited to):

- Centre policies including but not limited to:
 - Admissions.
 - Discharges.
 - Children’s rights.
 - Key working.
 - Confidentiality.
 - Access to information.
 - Consultation.
 - Placement planning.
- Young people’s meetings.
- Charter of children’s rights.
- Young people’s information booklet.
- Child safeguarding policy.
- Key work records.
- Daily records.
- Placement plans.
- Care records.
- Care plans.
- Social history reports.
- Information on external advocacy groups.
- Minutes of team meetings.

- Daily handover records.
- Children's care files.
- Manager's meeting minutes.
- Statement of purpose and function.
- Governance audits.

Observation

Inspectors will observe:

- That a copy of or a guide to the National Standards for Children's Residential Centres, 2018 (HIQA) is available.

Interview

Inspectors will communicate with children/young people:

- To determine how they are provided with information on the centre.
- To determine what they expect from living in the centre.
- To determine if they have an understanding of why they are living in the centre.

Inspectors will communicate with staff:

- To determine how information is communicated to children on the centre and what to expect while living there.
- To determine how information on support services is communicated to children.
- To determine how the National Standards for Children's Residential Centres, 2018 (HIQA) are explained to children.

Inspectors will communicate with the registered provider and person in charge or designated person:

- To determine how the ensure information is communicated effectively to children on the centre and what to expect while living there.
- To determine how information on support services is communicated to children.
- To determine the mechanisms to oversee how the National Standards for Children's Residential Centres, 2018 (HIQA) are explained to children.

Standards 1.5 – Each child develops and maintains positive attachments and links with family, the community and other significant people in their lives.

Residential care should contribute to the development of a positive sense of self. Links with the past and respect for the cultural, religious, ethnic and family background of the child are crucial to the formation of an integrated identity. Child-centred residential centres also consider the child's important relationships with family, friends and other significant people in their lives, and the reasons for the child being placed in the centre. Young people have opportunities to develop and maintain interests, talents and hobbies and to participate regularly in a range of leisure and recreational opportunities of their choice within the local area and community of origin.

Child Care (Standards in Children's Residential Centres) Regulations, 1996, Part III Article 9:

The registered proprietor and person in charge of a centre shall satisfy the relevant health board that appropriate arrangements are in place to facilitate reasonable access to children residing in the centre by parents, relatives, friends, or any other persons who, in the opinion of the person in charge of a centre, have a bona fide interest in the children.

Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 23:

(1) Subject to sub-article (2) of this article, a health board shall, before placing a child in a residential centre, prepare a plan for the care of the child and the said plan shall, among other matters, deal with -

- (a) the aims and objectives of the placement,*
- (b) the support to be provided to the child, the residential centre concerned and, where appropriate, the parents of the child by the health board,*
- (c) the arrangements for access to the child by a parent, relative or other named person, subject to any order as to access by a court, and*
- (d) the arrangements for the review of the plan.*

(2) Where it is not practicable for a health board to prepare a plan before a child is placed in a residential centre, such plan shall be prepared as soon as practicable.

(3) In preparing a plan under this article, a health board shall consult the manager and, in so far as is practicable, the child and every person who in law is a guardian of the child.

(4) Particulars of a plan prepared by a health board under this article shall be made known by the board to the manager and, in so far as is practicable, to the child and every person who in law is a guardian of the child.

Examples of information/evidence that will be reviewed and how this will be done

Standard 1.5: Each child develops and maintains positive attachments and links with family, the community and other significant people in their lives.

Documentation Review

Inspectors will review documents including (but not limited to):

- Centre policies including but not limited to:
 - Family contact or involvement.
 - Admissions.
- Young people's meetings.
- Charter of children's rights.
- Young people's information booklet.
- Child safeguarding policy.
- Key work records.
- Daily records.
- Placement plans.
- Care plans.

- Information on external advocacy groups.
- Minutes of team meetings.
- Daily handover records.
- Children's care files.
- Manager's meeting minutes.
- Family contact records.
- Statement of purpose and function.
- Governance audits.
- Petty cash records.

Through observation

Inspectors will observe:

- That there is space for children to meet with family and friends in private.
- That children can make phone calls in private.
- That special occasions are marked appropriately.

Through communication (interview)

Inspectors will communicate with children/young people:

- To determine if they feel they are supported to keep in touch with family and other important people in their lives.
- To determine if they feel their family and friends can visit the centre.
- To determine if they feel supported and assisted to visit their family and friends in their local community.
- To determine if they have an understanding of why they may not have contact with their family.
- To determine if they are supported to join local sport and community organisations and undertake activities in the community.
- To determine how they feel special occasions and achievements are celebrated in the centre.
- To determine if they feel family members and significant others can attend medical and school appointments.

Inspectors will communicate with staff:

- To determine how they maintain positive links with families, communities and other significant people in children's lives.
- To determine how they inform and consult with parents and significant others about the care of young people.
- To determine if families and significant others are invited to participate in meetings and appointments.
- To determine how families have input into all aspects of the care of the child.
- To determine how children are provided with opportunities to participate in activities in the local community and community of origin.
- To determine how special occasions are marked in the centre.

- To determine how young people are supported to have appropriate access to phone, television, internet and other media.

Inspectors will communicate with the registered provider and person in charge or designated person:

- To determine how they ensure that positive links with families, communities and other significant people in children's lives are maintained.
- To determine the effectiveness of mechanisms to inform and consult with parents and significant others about the care of young people.
- To determine if families and significant others are invited to participate in meetings and appointments.
- To determine how families have input into all aspects of the care of the child.
- To determine the effectiveness of mechanisms for families to have input into aspects of the care of the child.
- To determine how children are provided with opportunities to participate in activities in the local community and community of origin.
- To determine how special occasions are marked in the centre.
- To determine how young people are supported to have appropriate access to phone, television, internet and other media.
- To determine how resources are allocated to the centre to ensure that links with families, communities and other significant people in children's lives are maintained.

Inspectors will communicate with social workers/relevant professionals:

- To determine how children are supported to maintain links with families, communities and other significant people.

Standards 1.6 – Each child is listened to and complaints are acted upon in a timely, supportive and effective manner.

Having a robust complaints process provides children with the opportunity to express their view when their experience has not been what they expected and enables residential centres to identify areas for improvement. Good communication is important in successfully handling complaints and assists in minimising the likelihood of complaints arising in the first place.

Child Care (Standards in Children's Residential Centres) Regulations, 1996, Part III Article 16:

A registered proprietor and person in charge of a centre shall satisfy the relevant health board that procedures are in place for the prompt notification by the centre to the relevant health board of any significant event occurring in relation to a child being maintained in the centre.

Child Care (Placement of Children in Residential Care) Regulations, 1995, Part IV, Article 23:
(1) Subject to sub-article (2) of this article, a health board shall, before placing a child in a residential centre, prepare a plan for the care of the child and the said plan shall, among other matters, deal with -

- (a) the aims and objectives of the placement,*
- (b) the support to be provided to the child, the residential centre concerned and, where appropriate, the parents of the child by the health board,*
- (c) the arrangements for access to the child by a parent, relative or other named person, subject to any order as to access by a court, and*
- (d) the arrangements for the review of the plan.*

(2) Where it is not practicable for a health board to prepare a plan before a child is placed in a residential centre, such plan shall be prepared as soon as practicable.

(3) In preparing a plan under this article, a health board shall consult the manager and, in so far as is practicable, the child and every person who in law is a guardian of the child.

(4) Particulars of a plan prepared by a health board under this article shall be made known by the board to the manager and, in so far as is practicable, to the child and every person who in law is a guardian of the child.

Examples of information/evidence that will be reviewed and how this will be done

Standard 1.6: *Each child is listened to and complaints are acted upon in a timely, supportive and effective manner.*

Documentation Review

Inspectors will review documents including (but not limited to):

- Centre policies including but not limited to:
 - Complaints.
 - Children's rights.
 - Child safeguarding policy.
 - Protected disclosures (whistle blowing) policy.
 - Tusla 'Tell Us' policy.
- Complaints log.
- Complaints records.
- Significant event notifications.
- Child protection and welfare reports.
- Young people's meetings.
- Charter of children's rights.
- Young people's information booklet.
- Child safeguarding policy.
- Key work records.
- Daily records.
- Parents information booklet.
- Information on external advocacy groups.
- Minutes of team meetings.
- Daily handover records.

- Children's care files.
- Manager's meeting minutes.
- Statement of purpose and function.
- Governance audits.
- Supervision records.
- Records of training.
- Minutes of significant review group meeting minutes.

Through observation

Inspectors will observe:

- Interactions between staff/management and young people.
- Information on external advocacy groups and the complaints process/forms displayed in the centre.

Through communication (interview)

Inspectors will communicate with children/young people:

- To determine whether they feel that they are listened to and if they know how to make a complaint.
- To determine whether they have any complaints at present and how they feel this is being resolved.
- To determine whether they feel that they are supported to make complaints about any aspect of their care.
- To determine who in the centre that they can speak to if they have a complaint.
- To determine whether they have an understanding of any external advocacy groups or persons outside of the centre that they can make a complaint to.
- To determine if they have an understanding of the complaints process.

Inspectors will communicate with staff:

- To determine their understanding of the centre complaints policy.
- To determine how they explain the complaints policy to children.
- To determine how parents, significant others and social workers are made aware of complaints.
- To determine how tracking, feedback and learning from complaints occurs in the centre.
- To determine how the outcomes of complaints have impacted on the practices in the centre.
- To determine how feedback from children on the complaints procedure is gathered and how this leads to practice development.

Inspectors will communicate with the registered provider and person in charge or designated person:

- To determine their understanding of the centre complaints policy.
- To determine their oversight of the implementation of the centre complaints policy.
- To determine how they ensure parents, significant others and social workers are made aware of complaints.

- To determine their oversight of the mechanisms for tracking, feedback and learning from complaints occurs in the centre.
- To determine how the outcomes of complaints have impacted on the practices in the centre.
- To determine how feedback from children on the complaints procedure is gathered and how this leads to practice development.

Inspectors will communicate with social workers/relevant professionals:

- To determine if they are satisfied that children are listened and that complaints are acted upon in a timely, supportive and effective manner.
- To determine if they have informed children of the Tusla '*Tell Us*' policy.
- To determine if they have received prompt notification of complaints and their outcome.
- To determine if they have had an opportunity to provide feedback on the complaints policy in the centre.

6.0 References

Child Care (Placement of Children in Residential Care) Regulations, 1995

Child Care (Standards in Children in Residential Care) Regulations, 1996

Children and Family Agency (TUSLA) (2014). Alternative Care Practice Handbook. An Ghníomhaireacht um Leanaí agus an Teaghlaigh: Child and Family Agency.

Children and Family Agency (TUSLA) (2017). Child Safeguarding: A Guide for Policy and Procedure and Practice: Child and Family Agency.

Children and Family Agency (TUSLA) (2019). Incident Management Policy and Procedure: Child and Family Agency.

Cornell University (2009). *Therapeutic Crisis Intervention Student Workbook, Sixth Edition*. Cornell university: Residential Child Care Project.

Department of Children and Youth Affairs (2017). Children First National Guidance for the Protection and Welfare of Children. Dublin: Department of Children and Youth Affairs.

United Nations (June 2010). The United Nations Convention on the Rights of the Child. Children's Rights Alliance.

Government of Ireland (2015). Children First Act 2015 (No. 36 of 2015). Dublin: Stationery Office.

Health Information and Quality Authority (2018). National Standards for Children's Residential Centres. Dublin: Health Information and Quality Authority.

Health Information and Quality Authority (October,2014). *Guidance for Designated Centres Risk Management*. Dublin: Health Information and Quality Authority.

QMS Reference	ACIMS-GDE01.1
Version	V1.0
Date of issue:	03/03/2020