



An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

Alternative Care - Inspection and Monitoring Service

Children's Residential Centre

Centre ID number: 140

Year: 2021

Inspection Report

Year:	2021
Name of Organisation:	Solis MMC
Registered Capacity:	Four young people
Type of Inspection:	Announced themed inspection
Date of inspection:	17th, 18th and 19th May 2021
Registration Status:	Registered from 03rd August 2021 to 03rd August 2024
Inspection Team:	Lorna Wogan Anne McEvoy
Date Report Issued:	5th August 2021

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1. Information about the inspection process

The Alternative Care Inspection and Monitoring Service is one of the regulatory services within Children's Service Regulation which is a sub directorate of the Quality Assurance Directorate within TUSLA, the Child and Family Agency.

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

During inspection, inspectors use the standards to inform their judgement on compliance with relevant regulations. Inspections will be carried out against specific themes and may be announced or unannounced. Three categories are used to describe how standards are complied with. These are as follows:

- **Met:** means that no action is required as the service/centre has fully met the standard and is in full compliance with the relevant regulation where applicable.
- **Met in some respect only:** means that some action is required by the service/centre to fully meet a standard.
- **Not met:** means that substantial action is required by the service/centre to fully meet a standard or to comply with the relevant regulation where applicable.

Inspectors will also make a determination on whether the centre is in compliance with the Child Care (Standards in Children's Residential Centres) Regulations, 1996. Determinations are as follows:

- **Regulation met:** the registered provider or person in charge has complied in full with the requirements of the relevant regulation and standard.
- **Regulation not met:** the registered provider or person in charge has not complied in full with the requirements of the relevant regulations and standards and substantial action is required in order to come into compliance.

National Standards Framework



1.1 Centre Description

This inspection report sets out the findings of an inspection carried out to determine the on-going regulatory compliance of this centre with the standards and regulations and the operation of the centre in line with its registration. The centre was granted its first registration on the 03rd August 2018. At the time of this inspection the centre was in its first registration and was in year three of the cycle. The centre was registered without attached conditions from 03rd August 2018 to the 03rd August 2021.

The centre was registered to provide care for up to four children (boys and girls) aged thirteen to seventeen years on admission. The centre aimed to provide a high-quality standard of care that was responsive to the individual needs of young people within a child-centred, supportive and safe environment. An individualised programme of care was provided to assist children to develop physically, socially, emotionally, cognitively and educationally whilst also promoting their independence. The child's voice was central to the programme of care and there was an overall focus on developing resilience. The promotion of positive and effective relationships was underpinned by staff training in Laursen's Seven Habits of Reclaiming Relationships and the specific competencies within this training were utilised when working with the children. The team provided the children with the opportunity to develop positive relationships with caring adults who role model appropriate ways of dealing with emotion and the challenges of everyday life. There were three children living in the centre at the time of the inspection. The centre was granted a derogation to accommodate one of the children as they were under thirteen years of age on admission, which was outside of the centre's statement of purpose.

1.2 Methodology

The inspector examined the following themes and standards:

Theme	Standard
1: Child-centred Care and Support	1.1, 1.2, 1.3, 1.4, 1.5, 1.6

Inspectors look closely at the experiences and progress of children. They considered the quality of work and the differences made to the lives of children. They reviewed documentation, observed how professional staff work with children and each other and discussed the effectiveness of the care provided. They conducted interviews via teleconference with the relevant persons including senior management and staff, the allocated social workers and other relevant professionals. Wherever possible, inspectors will consult with children and

parents. In addition, the inspectors try to determine what the centre knows about how well it is performing, how well it is doing and what improvements it can make.

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

2. Findings with regard to registration matters

A draft inspection report was issued to the registered provider, senior management, centre manager on the 21st July 2021 and to the relevant social work departments on the 21st July 2021. This inspection found the centre to be operating fully compliant with the standards inspected therefore there was no issues requiring action identified. The centre manager reviewed the report for accuracy and returned the draft report on the 23rd July 2021.

The findings of this report and assessment of the submitted CAPA deem the centre to be continuing to operate in adherence with regulatory frameworks and standards in line with its registration. As such it is the decision of the Child and Family Agency to register this centre, ID Number: 140 without attached conditions from the 03rd August 2021 to 03rd August 2024 pursuant to Part VIII, 1991 Child Care Act.

3. Inspection Findings

Regulation 7: Staffing

Regulation 9: Access Arrangements

Regulation 11: Religion

Regulation 12: Provision of Food and Cooking Facilities

Regulation 16: Notification of Significant Events

Theme 1: Child-centred Care and Support

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.

The inspectors found that the children in the centre experienced care and support which respected their diversity and protected their rights. The inspectors found that staff were aware of children's rights as prescribed in the United Nations Convention on the Rights of the Child and in Irish law. Staff confirmed their induction training focused on children's rights and the promotion of these rights within the centre's care approach. There was evidence of regular discussions at team meetings in relation to supporting and promoting children's rights. The centre had a range of policies in place to promote the rights of young people in care such as policies on education, access to information, advocacy, complaints, anti-discrimination, confidentiality and anti-bullying. Staff were able to identify these policies and discuss how they supported and promoted children's rights in the centre. Feedback from interviews with children living in the centre evidenced they felt they had opportunities to have their voice heard and that staff listened to their views and were respected by the adults caring for them.

On admission the centre provided the children and their parents with a range of written resources that outlined the children's rights, complaints procedures and information in relation to their day-to-day care. There was a specific booklet that outlined children's rights with a focus on the special importance of some of these rights for children living in care. Key work records evidenced a focus on children's rights on admission and subsequent refreshing of this information as they progressed through their placement. Two of the children interviewed by the inspector confirmed that staff had explained their rights as children living in care.

A review of key work records, individual work reports, records of house meetings and placement plans evidenced children were informed of their rights and were supported by staff to exercise these rights in a manner appropriate to their age, ability and stage of development.

Individual work records, daily logs and the individual placement plans reviewed by the inspectors evidenced discussions with the children in relation to race, religion, ethnicity, cultural identity and sexuality. The inspectors found that discussions with the children were undertaken in a thoughtful and sensitive manner with evidence of the children's voice being heard.

There was good attention paid to the views of parents, family members and other significant people in the children's lives in relation to their care. This was evidenced in collaborative work between the social workers and the centre staff, records of family contact and statutory care plans maintained by staff on the individual care files.

There was evidence that staff supported the children with their dietary requirements and individual food preferences. The children were facilitated to participate in menu planning and food shopping each week. The children in placement did not have any special dietary requirements, however there was evidence that they had access to a healthy and varied diet with opportunities to engage in menu planning and cooking their own preferred meals.

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

The inspectors found that each child's dignity and privacy was respected and promoted and this was confirmed by the children interviewed and by external professionals interviewed by the inspectors. The centre had a written policy on the storage and retention of records that outlined the organisation's application of data protection principles. Staff interviewed were aware of the requirement to maintain the children's personal information in a confidential manner. The children were informed by the staff about how they protected their personal information and who it was shared with. The children's booklet also outlined to young people that personal information about them would be stored securely and confidentially by staff.

The inspectors found that the centre was spacious and afforded the children privacy and space as required. The children had their own bedrooms they could use throughout the day to take time out on their own. Where there were limits on privacy

there was a clear explanation for this on the records and the child was informed of the rationale for any limits on their right to privacy. The inspectors found many practices and procedures in place that supported the children's right to privacy such as providing them with their own bedroom, adequate bathroom facilities, secure storage space for personal belongings, access to daily telephone contact with family, privacy when visited by family members, their social worker or other professionals and when making calls to family and social workers. Social workers confirmed they were provided with the opportunity to meet the children in private.

Staff interviewed confirmed that life story work, memory boxes and memorabilia of their childhood and of their time in the centre was stored safely and maintained up to date for resident young people. The children were respectful of others personal belongings. Records of achievements and photographs of special occasions were displayed throughout the home.

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.

The inspectors found the children were provided with many opportunities to exercise choice in their daily lives and thus they were able to participate in making informed decisions about their care appropriate to their age and stage of development. House meetings took place on a fortnightly basis and there was evidence of meaningful engagement of all three children in these forums. The children had the opportunity to express their views about issues within the house or to make requests in relation to their care. There was evidence that feedback was provided to the children after the issues raised at house meetings were discussed at team meetings. There were good routines in place where staff and children sat together at mealtimes and children had the opportunity to share their views with staff in a more informal way. The children were involved in planning their week and in choosing recreation activities and hobbies they wished to pursue. There was evidence the children were provided with lots of opportunities to exercise choice and to practice their decision making skills on an on-going basis in the centre.

There was evidence that staff and social workers provided the children with opportunities to have their views and opinions represented at their care plan review meetings. External professionals interviewed by the inspectors also confirmed that the key workers and centre manager were strong advocates for the children and promoted the children's voices in their care practices and in care planning forums.

Two of the older residents had participated in person in their care plan review meetings and had monthly access to their records. There were clear decisions set out in the care plan for the younger child in the centre in relation to the level of information provided and their participation in planning meetings was based on their age, emotional well-being and stage of development. The views of the children and their parents about their care were also recorded in their care plan documents.

Written information on the national advocacy service for children in care (EPIC) was made available to the children in the centre. The role of the advocacy service was further explained to the children in key working. Advocates from EPIC visited the three children in placement to inform them about their service. There was evidence children were actively involved in EPIC events and with their advocacy service when required.

Each of the children had two named keyworkers and the key work case management was undertaken by the shift team managers. Key workers were assigned based on an assessment of staff the child naturally gravitated towards and where a good rapport had developed with that staff member.

There was evidence through key work records and placement plans that staff helped the children to understand their care history, their relationship with parents, siblings and other significant people in their lives. These discussions were sensitively and carefully managed by staff with good oversight from the centre manager and the external manager. The inspectors also found that the children were supported to develop self-advocacy skills through participation at care plan reviews, house meetings and being involved in decision making processes in relation to aspects of their care. Staff were aware of their responsibility to advocate for the children and to teach the children to self-advocate. The house information booklet provided information for children in relation to their participation in decision making. There was evidence that the children in the centre were confident in putting forward their views and requests and evidence that staff responded to the children's request in a prompt manner.

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

The centre had a range of information leaflets that provided information to children in a child-friendly format. There were other centre specific documents introduced at admission meetings to help the children understand the purpose of their placement, the goals to be worked towards and how staff would care for them throughout their

placement. The inspectors found that information provided on admission was revisited with the children in further key working sessions. The inspectors found that staff were skilled communicators and were good role models for the children in this regard. The inspectors found that staff members were skilled and experienced in sharing sensitive information with the children in an open and transparent manner. Information shared with the children was agreed with social work through regular communication and care planning meetings. Where children had specific language processing deficits staff were creative in using other communication methods to assist with understanding. There was evidence that staff worked hard to build relationships with the children and provided them with the individual time and space to assist them to talk with staff. As the children built relationships of trust with the staff it was evident they were more open to discuss information about themselves, their families and their life experiences. Significant conversations were recorded on the child's file and in individual key working records.

Each child was provided with a copy of the National Standards for Children's Residential Centres, 2018 (HIQA). One of the staff members was recently assigned to develop child-centred approaches to inform the children about the key principles of the national standards.

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

The inspectors found that staff interviewed demonstrated an awareness of the importance of family contact and provided examples of the many ways in which they supported the children in their contact with significant people in their lives. The inspectors found that the centre placed a lot of emphasis on maintaining contact with parents, siblings, relatives, foster carers and friends in their communities of origin. Family contact was set out in the care plan and recorded on the individual care files. The children were aware of the plans for family contact. Where family contact was cancelled or suspended for a period of time the reasons for this were explained to the children. When Covid-19 restrictions prevented regular family contact occurring this was explained to the children and alternative methods to maintain contact was arranged through social media platforms. There was an evident focus in both the care and placement planning processes to maintain connections and find alternative ways to maintain contact where required. There was evidence of efforts made to re-establish contact with siblings for one of the children. Where family contact was supervised the reasons for this were explained to the child.

The children were involved in leisure activities in their community and encouraged to engage in social activities and pursue interests and hobbies. These activities had been suspended due to the pandemic however some of the leisure activities were resuming in a phased manner for the children at the time of the inspection. The staff team were creative in their efforts to keep the children occupied over the months of restrictions on travel and leisure activities. One of the children was facilitated to remain in their school placement and continued to be involved in their community football team. Two of the children were supported by staff to spend free time with friends in their community. The staff supported friends to visit the centre however due to the pandemic this could not be facilitated over the past fourteen months.

The inspectors found that special occasions such as birthdays, Easter and Christmas as well as personal achievements were marked, celebrated and documented in the centre. There was evidence the children were consulted in relation to how they wanted to celebrate these events. There were rewards for the children in recognition of their efforts to adhere to the restrictions in place during the pandemic and for their engagement in on-line learning in their respective schools. One child told the inspectors they had a first anniversary party to mark their first year living in the centre.

Each child had appropriate access to a telephone and appropriate access to television, game consoles, books and the internet. The centre had a written internet safety policy. There were robust monitoring arrangements in place for all the children in relation to access to social media and the internet and this was built into their placement plans. There was openness and transparency with the children where there were restrictions on access to the internet/mobile phone was in place and appropriate risk assessments completed and on file. Individual work had been completed with the children in relation to appropriate use of social media and the internet.

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

The centre had a written complaints policy and procedure for staff to follow when children raised an issue of concern or a complaint. The policy was consistent with relevant legislation, Tusla complaints procedures and best practice. The staff interviewed demonstrated an awareness of the importance of having a robust complaints procedure to safeguard the children in placement. The children were made aware of the centre's complaints procedure on admission and it was outlined in the written information booklet for children that also included information on other

advocacy services such as the national advocacy service for children in care EPIC and the ombudsman for children. The parent's information booklet outlined the complaints procedure should parents wish to make a complaint about their child's care.

The children interviewed by the inspectors were aware of how to make a complaint and they were informed why it was important to make a complaint if they were unhappy about something. One of the children interviewed had made one complaint and was satisfied staff had acted on their concern and resolved the complaint. One of the children was recently supported by staff to submit a complaint into Tusla's complaints portal and was awaiting a response to this complaint; however there was evidence on file that the centre manager had followed up on this matter with the social worker to seek an outcome in relation to this complaint.

The centre maintained a complaint register and the inspectors reviewed this against other supporting complaints documentation. There were two complaints recorded on the register in 2021 and one complaint about an external service remained open. The inspectors were satisfied that these complaints were managed in line with the centre's policy and there was evidence that one child was satisfied with the outcome of their complaint and it was closed out on the register. There was evidence that complaints were notified in writing to the relevant social workers. The service manager had external oversight of complaints and the inspectors found that complaints were discussed at team meetings and learning outcomes were identified following the complaint investigation.

The centre had a mechanism in place to source bimonthly feedback from the children in relation to all aspects of their care. Resident young people informed the inspectors they were happy living in the centre and had no complaints about their care at the time of the inspection. The external professionals were satisfied the children received child-centred care and support and their needs were well met in the centre at this time.

Compliance with Regulations	
Regulation met	Regulation 7 Regulation 9 Regulation 11 Regulation 12 Regulation 16
Regulation not met	None identified

Compliance with standards	
Practices met the required standard	Standard 1.1, 1.2, 1.3, 1.4, 1.5, 1.6
Practices met the required standard in some respects only	None identified
Practices did not meet the required standard	None identified

4. CAPA

Theme	Issue Requiring Action	Corrective Action with Time Scales	Preventive Strategies To Ensure Issues Do Not Arise Again
1	N/A		