



An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

Alternative Care - Inspection and Monitoring Service

Children's Residential Centre

Centre ID number: 026

Year: 2023

Inspection Report

Year:	2023
Name of Organisation:	Crosscare
Registered Capacity:	Five Young People
Type of Inspection:	Unannounced
Date of inspection:	5th & 6th September 2023
Registration Status:	Registered from 30th June 2023 to 30th June 2026
Inspection Team:	Lisa Tobin Lorraine Egan
Date Report Issued:	27th October 2023

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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 and Regulation 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 30th June 2002. At the time of this inspection the centre was in its eight registration and was in year one of the cycle. The centre was registered without attached conditions from 30th June 2023 to 30th June 2026.

The centre was registered as a multi-occupancy service. The centre was registered to accommodate five young people from age twelve to eighteen years on a short to medium term basis, for 3-6 months with the possibility of a further extension in consultation with the social work department. The centre accepted referrals through the Tusla Crisis Intervention Service. Emergency beds can be offered on a nightly basis depending on the current occupancy and mix within the centre. Their model of care was described as building relationships to support young people utilising a restorative approach and identification of individual needs. The centre maintained a statement of the values of the governing voluntary body of 'love, respect and excellence' as the guiding principles of their purpose and function. There were three young people living in the centre at the time of the inspection.

1.2 Methodology

The inspector examined the following themes and standards:

Theme	Standard
1: Child-centred Care and Support	1.3
2: Effective Care and Support	2.5
4: Health, Wellbeing and Development	4.3

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 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 and to the relevant social work departments on the 26th September 2023. The registered provider was afforded the opportunity to respond to any identifying factual inaccuracies in the draft report. As there were no actions identified in the draft report, there was no requirement for the organisation to submit a corrective and preventive action plan (CAPA) document. Centre management informed the Alternative Care Inspection and Monitoring Service on the 12th of October 2023 that there were no factual inaccuracies in the draft report.

The findings of this report 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: 026 without attached conditions from the 30th June 2023 to the 30th June 2026 pursuant to Part VIII, 1991 Child Care Act.

3. Inspection Findings

Regulation 5: Care Practices and Operational Policies

Regulation 17: Records

Theme 1: Child-centred Care and Support

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.

There were various policies and procedures in place which reflected children's rights such as participation and the right to advocacy. Inspectors saw evidence of how young people were involved in making decisions relating to their care through reviewing the young people's documents. Inspectors found staff had undertaken numerous individual work sessions with the young people in which the young person's responses were captured. This was noted during exploratory meetings where young people requested educational programmes or level of family involvement and staff responded to this. There were strategy meetings and review meetings relevant to their placement that occurred for some young people, and they had the opportunity to participate in these meetings should they wish to. There were occasions where young people did attend and some where they didn't, however inspectors found evidence of them given the opportunity to decide.

Inspectors found the centre had developed a placement plan specifically for young people, which consisted of seven parts that highlighted all the relevant areas of a young person life from their perspective with the following headings: A little bit about myself, looking after myself, my relationships, keeping myself safe, employment/education, independent living skills and future placement plans. This information was gathered by the keyworkers while linking with the young people and subsequently was the basis for the centre's placement plan goals for the young people. This was another example of how the centre was capturing the young people's voice in contributing to the decision-making process of their care planning.

Inspectors reviewed the admissions process for the young people which included an exploratory meeting, induction, and an admissions meeting. The young people were present for these meetings with social workers, centre staff and on some occasion's family members were also present. There was a checklist on each young person's file in which certain aspects/areas were required to be completed during the induction

and admission process. The checklist included the young people being informed about the key working role, aftercare services, shift changeover, curfew times, the intervention system, and the complaints system to name a few. Inspectors reviewed the minutes from these meetings and found that the young person's views and having their input was an important and integral part of the process. Inspectors found that there was good reflection and explanation of the processes in the paperwork of how young people were informed of what to expect while living in the centre and the supports available from staff in meeting their identified goals. There was a young person's booklet available and given to them during induction which outlined the purpose and function of the centre and included the rules which the young people were expected to follow. The young people were informed of advocacy services during their induction process. The young person's booklet highlighted the contact information for Empowering People in Care (EPIC), Ombudsman for Children (OCO) and the aftercare services available within the organisation. Inspectors saw there were noticeboards in the sitting room which had further leaflets and details available for the young people. Inspectors found while reviewing the young people's documents that the care provided to the young people was very much a rights-based service and was reflected in the practices taking place in this regard.

During the induction process, young people were informed of the records that were kept about them and about their right to access it with the supports of the staff team. Some young people did choose to read their daily logs but the majority of the time, the young people did not request to see their records. Inspectors saw individual work completed where different documents used by staff such as a significant event notification and missing child from care forms were explained to the young people along with the processes involved and the staff answered any further questions the young person had in a way to ensure they understood the information.

Inspectors found that house meetings which were due to occur weekly were happening sporadically and, in most cases, did not occur due to young people not being present in the centre at the time the meetings took place. There had been discussions at team meetings around addressing this issue where the team were looking at alternative ways to capture the young people's views and bring them to the team meeting for discussion. The young people were asked for their input in an informal way while out of the centre with staff or out on an activity and staff captured their views through this manner and recorded it as an individual work report.

Each young person was assigned two keyworkers and a case manager. Given the nature of the emergency service and at times unknowns about the young people

presenting, keyworkers and case managers were assigned based on availability when the admissions occurred. Key workers were responsible for linking with the young person, completing their weekly reports and creating and updated placement plans as needed. From the two staff interviewed, one was a key worker and the other was a case manager. It was evident both knew their roles and responsibilities relevant to the needs of the young people.

Compliance with Regulations	
Regulation met	Regulation 5 Regulation 17
Regulation not met	None identified

Compliance with standards	
Practices met the required standard	Standard 1.3
Practices met the required standard in some respects only	Not all standards were assessed in this inspection
Practices did not meet the required standard	Not all standards were assessed in this inspection

Actions required:

- No actions identified.

Regulation 5: Care Practices and Operational Policies
Regulation 8: Accommodation
Regulation 17: Records

Theme 2: Effective Care and Support

Standard 2.5 Each child experiences integrated care which is coordinated effectively within and between services.

The centre had a policy in place on transition from and in care, which outlined the three types of transitions that were possible; placement move, unplanned discharge from the centre and discharge from care. Inspectors found that the communication and cooperation between services for move on placements was effective and supportive to the young people. Staff were preparing the young people as much as possible for their next step, however the process systems require more structure to ensure the practice matches policy around discharges.

There were twenty-two discharges since the last inspection in December 2022, with twelve of these relating to the out of hours emergency beds. Three of these were placement moves, one was a discharge from care as they turned 18 years and six discharges were unplanned discharges due to negative behaviours and non-engagement.

There were relevant plans in place to address any areas of high risk or concern with referrals made to specialist services in order to support the young people. The staff team were quick to respond to any identified needs of the young people and offer assistance and guidance with addressing any issues such as family reunification, substance misuse and criminal proceedings. Inspectors found that the supports the young people received from the staff were in preparation for their future development, however it was at times not as productive due to non-engagement from the young people.

Inspectors found that placement review meetings and strategy meetings were occurring for the young people which discussed the current placement and the potential future placements for the young people. Social workers and family members were part of this planning process where possible. Inspectors saw how the impact of family being involved in the care of one young person was subsequently leading to a transition plan for family reunification. Out of the three young people residing in the centre, only one young person had their child in care review (CICR) completed in May 2023, however there were no care plans on file for any of the young people. Inspectors saw evidence of the staff team requesting CICR's, care plans and minutes from the relevant social work departments. This issue had been escalated internally to the senior manager and externally to social work team leaders and principal social workers. One social worker stated that there was a delay with care plans and minutes due to a resource issue for their area. Due to the lack of care plan guiding documents, the staff team created placement plans based on knowledge from the young person, their social worker, family members and any previous documentation received from prior placements. The centre focused on creating achievable goals through the placement plan with a number of steps involved in order to reach completion. This process was very clear, practical and easy to follow when reviewing. Inspectors would encourage the centre to continue this goal approach in particular keeping focus on an active goal around the move on/aftercare aspect for young people given the fact that this centre operates as a short-term placement and also ensuring discharge plans are in place as per centre policy.

In a sample of files reviewed, inspectors found that there were transition plans in place for those that were preparing to move on and for those who had moved on. Young people were encouraged to be part of the planning process. Despite plans being in place, some transitions didn't go to plan which required the centre to be flexible in how they approached it and they sought supports available from family and social workers to ensure transitions were as smooth as possible. The centre had a feedback form in place for young people, for family and for professionals. Inspectors saw one feedback form from a social worker which spoke very positively about the centre and the care the young person received. The staff had not completed feedback with the two most recent discharges as they were still settling into their new placements. Inspectors were informed by staff that there were many ex-residents that would contact the centre or visit the centre and seek advice and guidance from the staff or wanted to thank them for their care when they were residents. This was something the centre didn't document currently but would be a good opportunity to learn from what the ex-residents told them. For example, one ex resident that visited was asked what they would change about the centre, and they spoke of bars on the kitchen window, how it gave a prison feel. The following week, those bars were removed.

The young people were provided with their relevant documents on their discharge along with a positive book that the staff completed during their placement. The staff participated in a strength, weakness, opportunities, threats (SWOT) analysis during the team meeting with the senior manager. This was undertaken some weeks after a discharge in order for the team to have a clear perspective when reviewing a discharge. This process gave the team the opportunity to reflect on the work they had completed and discuss any learnings from working with that young person.

Compliance with Regulation	
Regulation met	Regulation 5 Regulation 8 Regulation 17
Regulation not met	None Identified

Compliance with standards	
Practices met the required standard	Standard 2.5
Practices met the required standard in some respects only	Not all standards were assessed in this inspection
Practices did not meet the required standard	Not all standards were assessed in this inspection

Actions required:

- No actions identified.

Regulation 10: Health Care**Regulation 12: Provision of Food and Cooking Facilities****Theme 4: Health, Wellbeing and Development****Standard 4.3 Each child is provided with educational and training opportunities to maximise their individual strengths and abilities.**

Inspectors found that the young people were provided with support for opportunities to engage in education and training in conjunction with how the young person was currently presenting. This was an area addressed with the young people at their exploratory meeting around how they planned on spending their day with involvement in education, training or work. Hobbies and interests were also discussed at this point to find out what the young person had an interest in and for staff to be able to source something local for them to participate in. Inspectors found that the staff focused on building relationships with the young people and showed their dedication and attention to the emotional needs of the young people alongside their practical needs.

The young people were offered the opportunity to return to their schools however, it was not the most suitable option for them at this time and alternatives were looked into. Inspectors saw that this was the young person choice to look at alternatives. Staff secured interviews at recognised training programmes. Practical things like travel, distance and placement availability were looked at when sourcing these opportunities for the young people. Education/work/training was part of each young person's placement plan. There was currently no involvement with an educational welfare officer as none of the young people were accessing mainstream education.

The young people were supported in having all they needed for their education, whether that was clothing, lunch or finance. Staff in the centre linked with the educational programmes to ensure young people's attendance and to complete check-ins on how the young person was getting on. There was a house routine in place around school/course hours and the young people were made aware of the expectation of having a daily routine. Staff were available to support the young people with their work and the young people had access to a house computer with

internet. There was also a tutor available within the organisation if the young people needed this resource.

Each young person had an interest or hobby, and this was supported by the staff team. A local football club was contacted for one young person, a local mixed martial arts (MMA) sports club was sourced for another young person and the third young person was involved with a rowing club which was supported by the team in attending a race. Inspectors spoke with one social worker, and they reported that all aspects of care planning and education/training was provided for by the centre in order to meet the needs of the young person. There were external supports available for the young people which they engaged with.

ompliance with Regulation	
Regulation met	Regulation 10 Regulation 12
Regulation not met	None Identified

Compliance with standards	
Practices met the required standard	Standard 4.3
Practices met the required standard in some respects only	Not all standards were assessed in this inspection
Practices did not meet the required standard	Not all standards were assessed in this inspection

Actions required:

- No actions identified

4. CAPA

Theme	Issue Requiring Action	Corrective Action with Time Scales	Preventive Strategies To Ensure Issues Do Not Arise Again
1	None identified.		
2	None identified.		
4	None identified.		