



An Ghníomhaireacht um  
Leanaí agus an Teaghlach  
Child and Family Agency

## Alternative Care - Inspection and Monitoring Service

### Children's Residential Centre

**Centre ID number: 248**

**Year: 2024**

## Inspection Report

<b>Year:</b>	<b>2024</b>
<b>Name of Organisation:</b>	<b>Odyssey Care</b>
<b>Registered Capacity:</b>	<b>Five young people</b>
<b>Type of Inspection:</b>	<b>Announced Inspection</b>
<b>Date of inspection:</b>	<b>22<sup>nd</sup> &amp; 23<sup>rd</sup> October 2024</b>
<b>Registration Status:</b>	<b>Registered from 11<sup>th</sup> July 2024 to 11<sup>th</sup> July 2027</b>
<b>Inspection Team:</b>	<b>Paschal McMahon Anne McEvoy</b>
<b>Date Report Issued:</b>	<b>27<sup>TH</sup> December 2024</b>

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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 in July 2024. At the time of this inspection the centre was in its first registration and was in year one of the cycle. The centre was registered without attached conditions from 11<sup>th</sup> July 2024 to the 11<sup>th</sup> July 2027.

The centre was registered as a bespoke multi-occupancy centre to provide medium to long term care for five siblings aged between 6 to 13 years old on admission. At the time of the inspection the organisation was moving from their previous model of care based on theoretical approaches underpinned by four pillars of care; entry, stabilise and plan, support and relationship building and exit to the Welltree model of care. There was an emphasis on understanding the young person's behaviour and helping them to learn alternative coping skills and set life goals. The team had received some training in the Welltree model and further training was scheduled in the coming months. At the time of inspection, there were five siblings living in the centre.

## 1.2 Methodology

The inspector examined the following themes and standards:

Theme	Standard
2: Effective Care and Support	2.2
3: Safe Care and Support	3.1
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 relevant social work departments on the 3<sup>rd</sup> December 2024. The registered provider was required to submit both the corrective and preventive actions (CAPA) to the inspection and monitoring service to ensure that any identified shortfalls were comprehensively addressed. The suitability and approval of the CAPA was used to inform the registration decision. The centre manager returned the report with a CAPA on the 13<sup>th</sup> December 2024. Following review by inspectors the CAPA was returned to the provider as they were not satisfied that all actions were being adequately addressed. The provider returned the CAPA on the 18<sup>th</sup> December 2024. This was deemed to be satisfactory and the inspection service received evidence of the issues addressed.

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: 248 without attached conditions from the 11<sup>th</sup> of July 2024 to the 11<sup>th</sup> of July 2027 pursuant to Part VIII, 1991 Child Care Act.



### 3. Inspection Findings

#### Regulation 5: Care Practices and Operational Policies

#### Theme 2: Effective Care and Support

#### Standard 2.2 Each child receives care and support based on their individual needs in order to maximise their wellbeing and personal development.

The inspectors found that statutory child in care reviews had taken place for all five children in placement in accordance with the regulations. Monthly statutory reviews had been conducted in line with the *National Policy in Relation to the Placement of Children Aged 12 Years and Under in the Care or Custody of the Health Service Executive* for the four children who were under 13 years of age. At the time of inspection, the centre did not have copies of all the children's care plans on file.

There was evidence in centre records that both the centre and regional manager had made attempts to obtain the care plans from the social work department. Efforts to access these care plans had been hindered by the fact that there had been a change in the allocated social worker since the children's admission. Inspectors interviewed the current social worker who was appointed in August 2024. They told inspectors that they were working to ensure care plans and other documentation requested by the centre would be sent to them promptly. In the absence of care plans, there were minutes of care plan reviews and strategy meetings on file recorded by the centre management which were used to inform the care planning process.

Inspectors found that at the time of inspection the centre was experiencing a staffing crisis due to insufficient staffing levels which had impacted on the placement planning process. Staffing is discussed in further detail under theme 3 of the report. There were placement plans on file for each child which had been developed by the centre manager and deputy manager. These plans identified goals for each child and were reviewed on a monthly basis. Overall, inspectors concluded that the quality of the placement plans was poor and in some cases the tasks required to achieve these goals were not clearly outlined. There was also limited evidence of individual work being undertaken with the children on file. Staff in interview reported that their capacity to undertake and record individual work had been impacted by the lack of adequate staffing. As a result, some individual work identified in the care and placement plans and in risk assessments in areas such as sexual health and appropriate use of social media had not been undertaken with the children.

While acknowledging the young ages of some of the children, inspectors did not find any evidence of the children's input into their care or placement plans. Inspectors were informed that one of the children had expressed an interest in attending their next child in care review meeting and efforts were being made to facilitate this. Inspectors recommend that the centre is more proactive in their efforts to find creative and child-centred ways to gain the children's input into their care and placement plans.

There was good evidence that the children's parents' views were considered in relation to their care. This was confirmed by a parent who spoke with inspectors and stated that they were very happy with the quality of care their children were receiving. Similarly, the social worker was very satisfied with the standard of care being provided, highlighting the relationships the care team had developed with the children and their attentiveness to their needs. Inspectors found that despite the staff shortages, management and staff were very committed to the care of the children, all of whom told inspectors that they liked living in the centre.

Inspectors were satisfied from interviews with the allocated social worker, centre management and a review of records that efforts were being made to link the children in with identified external support services and referrals were in progress. The organisation's behaviour analyst and positive behaviour support team had also provided some clinical support and guidance to the care team. There was evidence that the care team adapted their approach to ensure key information was explained to the children in a child-friendly manner appropriate to their age and stage of development. Inspectors were informed that due to the fact that the children were emergency admissions and the centres limited staffing capacity, the team had received no additional training to ensure they were attuned to the emotional and developmental needs of younger children and the complexities of working with a sibling group.

The centre management stated that communication with the social worker was effective, and the social worker was prompt to respond to concerns or issues relating to the children in placement. The social worker confirmed to inspectors that they were satisfied they were kept fully informed about the children's placements and how they were progressing in the centre. Centre records viewed by inspectors confirmed that there was effective communication between both parties.

<b>Compliance with regulations</b>	
<b>Regulation met</b>	<b>Regulation 5</b>
<b>Regulation not met</b>	<b>None Identified</b>

<b>Compliance with standards</b>	
<b>Practices met the required standard</b>	<b>Not all standards under this theme were assessed</b>
<b>Practices met the required standard in some respects only</b>	<b>Standard 3.1</b>
<b>Practices did not meet the required standard</b>	<b>Not all standards under this theme were assessed</b>

### **Actions required**

- The centre manager must ensure that each child's placement plan is based on their identified needs and the tasks to achieve their goals are clearly outlined.
- The centre management must ensure that the centre is more proactive in their efforts to find creative and child-centred ways to gain the children's input into their care and placement plans.
- The registered provider must ensure appropriate training is provided to the care team to ensure they are attuned to the emotional and developmental needs of younger children.

**Regulation 5: Care practices and operational policies**  
**Regulation 16: Notification of Significant Events**

### **Theme 3: Safe Care and Support**

**Standard 3.1 Each Child is safeguarded from abuse and neglect and their care and welfare is protected and promoted.**

The centre had policies and procedures in place to protect children from all forms of abuse and neglect. The inspectors found that these policies were in line with the National Standards for Children's Residential Centres, 2018 (HIQA) and Children First: National Guidance for the Protection and Welfare of Children, 2017. There was a comprehensive child protection and safeguarding policy in place. This included a range of safeguarding measures including policies on recruitment, training, child protection reporting procedures and maintaining professional boundaries with young people.

Training records provided to inspectors evidenced that all staff had completed Tusla's Children First e-learning, mandated person training and the organisations child protection training. The centre had a child safeguarding statement which was displayed in the centre. However, not all those interviewed were clear in relation to the potential risks of harm for children identified in the statement and the procedures for responding to a disclosure in accordance with Children First guidelines. There was also limited evidence that safeguarding and child protection policies had been reviewed at team meetings. Inspectors recommend that the centre manager regularly reviews the child safeguarding statement and safeguarding and child protection policies with the team to ensure they are aware of the safeguarding measures in place to protect the children living in the centre.

The level of staffing in the centre was a safeguarding issue. Since the centre opened in July 2024 the centre had been unable to increase their staffing levels from the minimum required to commence operation of the service as agreed with the national placement team. To meet the agreed rostering requirements a minimum of three staff were required on duty each day to ensure appropriate supervision levels and the children's needs were met. At the time of the inspection the centre was operating with two staff members on shift each day with the five children, some of these staff were redeployed from the organisation's other centres. All those interviewed reported that insufficient staffing levels was resulting in increased stress levels and burnout for management and staff. One of the children had also made a written complaint about staff shortages. The inspectors were informed by centre managers that they were actively recruiting. A number of individuals had accepted positions but a delay in the vetting process had prevented them from taking up their roles. Post inspection, inspectors received notification from the regional manager that four new staff had taken up their posts and a number of other staff were in the process of onboarding.

The centre had a policy and procedure in place to address all forms of bullying. While there was evidence of negative dynamics between the children at times this was assessed as more akin to sibling rivalry and conflict as opposed to bullying. The thresholds for risk of harm were discussed with the children's social work department and the centre in terms of the recording and reporting of these incidents.

As previously highlighted the care team's capacity to undertake individual work including supporting the children to develop age-appropriate knowledge, self-awareness, understanding and skills to keep themselves safe was limited due to staffing shortages. Inspectors found that three of the children had access to smartphones during their time in the centre with access to social media platforms

without appropriate monitoring such as parental apps or staff supervision. Inspectors were told that the children were in possession of these phones on admission and neither the centre nor the social work department had put any restrictions on them at the time. While there was a risk assessment in place and some evidence of discussions with the 13-year-old young person, in relation to the dangers of the internet, there was no evidence that the appropriateness and the risks of two of the children aged 10 and 12 years having access to smartphones had been considered. In the absence of the centres capacity to carry out key working sessions with the children to educate them of the dangers associated with inappropriate phone /internet use the centre management must ensure that there is a more robust supervision plan in place around the children's phone use. Inspectors discussed these concerns with the centre managers and the children's social worker during the inspection and were assured that action would be taken to address these concerns and safeguards put in place.

Insufficient staffing levels also had an impact on the centres systems in place for managing and monitoring other risk related behaviours. Pre-admission risk assessments had been undertaken prior to the children's admission to identify and address areas of vulnerability and there were a number of risk management plans on file for the children in relation to current risks. However, control measures identified in several of these risk assessments, such as increased levels of staff supervision and spending 1:1 time with the children were not possible to implement due to the fact that there were only two staff members on duty each day with the five children.

The inspectors examined the child protection register and found that a number of child protection and welfare report forms had been submitted through the Tusla Child and Family Agency portal since the centre opened. The majority were not concluded and there was documentation evidencing centre management's efforts in following up on the status of these reports with the relevant social workers on an ongoing basis. Inspectors found that there was no record of concerns the team felt did not meet the threshold for reporting in line with Children First, 2017 and recommend that a register or log of these concerns is also maintained. There were measures in place through joint working with social work departments to ensure parents would be made aware of any allegation of abuse.

The organisation had an "Honesty and Whistleblowing policy" that outlined the procedure in place for staff to raise concerns in relation to wrongdoing, illegal practices or unethical conduct of other colleagues which they may encounter in the course of their work. While all staff interviewed were aware that they could raise

concerns with the line management structure in the organisation they were not clear about who they should approach externally such as Tusla or An Garda Síochána. The centre management must ensure that this policy is revisited with the staff team.

<b>Compliance with regulations</b>	
<b>Regulation met</b>	<b>Regulation 5 Regulation 16</b>
<b>Regulation not met</b>	<b>None Identified</b>

<b>Compliance with standards</b>	
<b>Practices met the required standard</b>	<b>Not all standards under this theme were assessed</b>
<b>Practices met the required standard in some respects only</b>	<b>Standard 3.1</b>
<b>Practices did not meet the required standard</b>	<b>Not all standards under this theme were assessed</b>

#### **Actions required**

- The centre manager must ensure that the child safeguarding statement and safeguarding and child protection policies are regularly reviewed with the staff team to ensure they are aware of the safeguarding measures in place to protect the children living in the centre.
- The centre manager must ensure that individual work is undertaken in an age-appropriate way to assist and support the children's knowledge, self-awareness and skills needed for self-care and protection.

### **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.**

At the time of inspection all five children had allocated school placements in the community. The children had excellent attendance records in the period prior to the inspection and were being supported and encouraged by staff and school personnel. Inspectors found that there was very good communication with the schools with regular meetings taking place to review the children's progress. The school personnel displayed a strong commitment to the children and they had attended care plan reviews and provided feedback on the children's progress. At the time of inspection, one of the children's school placements was not meeting their needs and they required additional support. There were a number of meetings with the school to

review the child's progress and contact made with the Special Educational Needs Organiser support service (SENO) for support in accessing a formal assessment so that an appropriate placement could be identified.

The centre maintained a record of the children's current educational progress. The centre manager stated that due to the fact that the children were emergency admissions they were provided with limited educational information at the referral stage. Some additional information had been received since then and the centre must maintain their efforts to source information on the children's educational history.

The inspectors were present in the centre to observe the centres homework routine and the support and encouragement given to the children by the care team. Within the centre there were a range of educational resources available to the children including books, games and art materials.

The allocated social worker in interview was satisfied with the children's educational progress and emphasising the fact that they appeared to be enjoying school and building friendships. A parent of the children who spoke to inspectors stated they were kept updated on the children's progress and also expressed their happiness at the level of progress the children were making in school.

There was ample evidence to show how staff supported the children to reach their potential and maximise their individual strengths and abilities which was demonstrated by their level of involvement in a range of extracurricular activities in various sports and clubs in the community and in the organisations adventure programme.

<b>Compliance with standards</b>	
<b>Practices met the required standard</b>	<b>Standard 4.3</b>
<b>Practices met the required standard in some respects only</b>	<b>Not all standards under this theme were assessed</b>
<b>Practices did not meet the required standard</b>	<b>Not all standards under this theme were assessed</b>

#### **Actions required**

- None identified.



## 4. CAPA

Theme	Issue Requiring Action	Corrective Action with Time Scales	Preventive Strategies To Ensure Issues Do Not Arise Again
2	The centre manager must ensure that each child's placement plan is based on their identified needs and the tasks to achieve their goals are clearly outlined.	<p>The children's placement plans include goals identified within their child in care reviews (CICR) and are also guided by the Well Tree model of care. These placement plans for each child have been developed by centre management in conjunction with the centres Behavioural Analyst.</p> <p>Centre management attended a Well Tree training day on the 5<sup>th</sup> of December 2024 where placement plans for children were reviewed.</p> <p>The unit manager in conjunction with the deputy manager have completed the placement plans to ensure they are detailed on what goals we are working on with the children and tasks to allow the team to be aware of how these goals will be achieved in their daily work. This</p>	<p>Centre management will continue to formulate placement plans ensuring that these are detailed and give clear guidance to the team on how to support children in achieving goals. Placement plans will include goals from the CICR and the Well Tree scoring system to identify indicators.</p> <p>Placement plan goals will be discussed within team meetings, supervisions and daily handovers to ensure the team are aware of what goals we are supporting the children in achieving.</p> <p>Centre management will use information gathered in meetings with keyworkers, professionals including schools and information from the children's placement progress to determine any individual work needed with the children.</p>



		<p>information is communicated to the team through team meetings, handover and supervisions. Young persons overview of young persons has also been updated with any irrelevant information.</p>	<p>Centre management complete monthly service governance reports which are reviewed by the regional manager for content and quality. Monthly visits are completed by the regional manager and through unit manager supervision, placement planning is reviewed to ensure placement plans are to a good standard. The registered provider is currently recruiting for a quality and risk role and a quality auditing role.</p>
	<p>The centre management must ensure that the centre is more proactive in their efforts to find creative and child-centred ways to gain the children's input into their care and placement plans.</p>	<p>Monthly key working sessions take place with the children to explore and identify what goals they may like to work towards. Within this the children are asked what they would like to work towards in the month ahead.</p> <p>General house meetings take place weekly, within this the children are invited to have input into their placement - what activities they would like to do, any social groups they would like to join, meals etc. Since the time of the inspection the</p>	<p>Centre management will ensure that they advocate for the children to attend their CICR when requested. Planning will be undertaken on days the children are in school to allow them to attend.</p> <p>Where the children do not want to attend their CICR the centre management and key-workers where possible, will attend as an advocate for the child and bring their wishes to this meeting.</p>

		<p>children who have requested to join their CICR have done so.</p>	<p>Centre management will work with the social work department to ensure that the children have the opportunity to complete their TUSLA Young Persons form prior to this meeting</p> <p>The regional manager attends CICR at times as support and oversight of placement plans and key working plans to ensure these are in line with care plan goals. Supervision provided to centre manager from the regional manager to ensure staff team supervisions focus on the quality of work completed with the children and guidance around child friendly and creative approaches adopted.</p>
	<p>The registered provider must ensure appropriate training is provided to the care team to ensure they are attuned to the emotional and developmental needs of younger children.</p>	<p>There is now a full staff team in the centre which allows the children to have individual time with the grown-ups to discuss anything they would like to.</p>	<p>The organisations Positive Behaviour Support (PBS) Department will continue to guide team around strategies and implementation of behaviour support plans (BSP's).</p>

		<p>A team day took place on the 20<sup>th</sup> of November 2024, with the current staff and new members of staff which included the following-</p> <ul style="list-style-type: none"> <li>• Review of Child Safeguarding Statement, Statement of Purpose</li> <li>• Child Protection and Whistle Blowing policies</li> <li>• Overview of young persons and key working planning</li> <li>• Review of Well Tree model in connection to the children in the centre</li> <li>• Behavioural support plans and how to implement and record approaches used.</li> <li>• A therapeutic treasure box Dr Karen Treisman - Overview guidance example of recording.</li> </ul> <p>Centre management continues to attend meetings with the children's school and any supports needed are discussed with the team through handovers, supervisions and team meetings. Any information from</p>	<p>Members of the PBS department will be attending 'Triple P training- Positive Parenting Programmes' in February of 2025, once this training is completed the registered provider will plan for this training to be provided to the teams working with younger children.</p> <p>Centre manager will attend a trauma informed master class on the 23<sup>rd</sup> of February 2025. The centre manager will use information gathered within this training to support the children; centre manager will communicate any learnings from this training to the team within the next team meeting following the completion of the trauma training.</p>
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		<p>these meetings is communicated to the social work department and Guardian Ad Litem through the relevant reports.</p> <p>The centres behavioural specialist attended the team meeting on the 6<sup>th</sup> of November 2024 to review the Behavioural support plan for one child, and how to use the approaches within this.</p> <p>Centre management have contacted the Director of Nursing for Public Health who will assign a Public Health Nurse for the younger children living in the centre, a request has been made for training to be provided to the team around their developmental needs and how trauma can impact on milestones etc., we are awaiting a response for the same.</p>	
<b>3</b>	The centre manager must ensure that the child safeguarding statement and safeguarding and child protection policies are regularly reviewed with the staff team to ensure they are aware of	The team receive training in Child Protection, including CSE and Mandated Persons Training. A team day took place on the 20 <sup>th</sup> of November 2024 with all the team at which there was a review of the	The team meeting template includes a monthly review of the child safeguarding statement and child protection policies. The centre management will ensure that these policies are reviewed regularly within

	<p>the safeguarding measures in place to protect the children living in the centre.</p>	<p>centres Child Safeguarding Statement and the child Protection and whistle blowing policies.</p> <p>During the team meeting on the 11<sup>th</sup> of December 2024, the role of the Mandated Person was discussed.</p>	<p>team meetings and supervisions.</p> <p>The centre management will review training during their monthly service governance report to ensure that all the teams training is in date. Any training that is needed will be planned for by the centre management contacting the training department.</p> <p>The regional manager completes quarterly Child Protection Audits,. During the Regional Manager Audits, interviews will take place with the team to ensure they are aware of child protection procedures and the child safeguarding statement. A review of team meetings will occur during this audit to ensure that child protection and the child safeguarding statement is discussed on a regular basis. The regional manager will also identify any outstanding training within this report.</p>
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	<p>The centre manager must ensure that individual work is undertaken in an age-appropriate way to assist and support the children's knowledge, self-awareness and skills needed for self-care and protection.</p>	<p>The placement plans include any key working completed with the children. During monthly meetings with the keyworkers the centre manager, in conjunction with the key worker will identify any specific topics, programmes that need to be completed with the children i.e. the busy bodies programme has been completed with one specific young person.</p> <p>Monthly key working sessions take place with the children to explore and identify what goals they may like to work towards. Within this the children are asked what they would like to work towards in the month ahead.</p> <p>Key working is planned for in connection to the children's ages, for the younger children's activities are used to encourage the children to engage in these sessions.</p>	<p>Centre management will use information gathered in meetings with keyworkers, professionals including schools and information from the children's placement progress to determine any individual work needed with the children.</p> <p>Through monthly meetings with the key workers, the centre management will determine if a more creative approach is needed in how we are completing key working with the children i.e. do we need to change how the key working is delivered to ensure the children understand and engage in these session.</p> <p>Centre management will communicate any individual work that is happening with the children to the team through team meetings, supervision and handovers. PBS Department will continue to guide</p>
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			team around strategies and implementation of BSP's.
4	N/A		