



The Regulation and
Quality Improvement
Authority

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

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CHILD PROTECTION REVIEW REPORT

**Stage 1 - Corporate Leadership and Accountability of
Organisations**

Northern Health and Social Care Trust Report

February 2009

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1. BACKGROUND INFORMATION

1.1 The Role and Responsibilities of the Regulation and Quality Improvement Authority (RQIA)

The Regulation and Quality Improvement Authority (RQIA) is a non-departmental public body, established with powers granted under *The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003*. It is sponsored by the Department of Health, Social Services and Public Safety (DHSSPS), with overall responsibility for assessing and reporting on the availability and quality of health and social care services in Northern Ireland and encouraging improvements in the quality of those services.

1.2 Scope of Review

In May 2008, the RQIA began a two year review of child protection services in Northern Ireland. The review focused on selected recommendations from the report '*Our Children and Young People Our Shared Responsibility*'¹ (referred to as the SSI Overview Report). Where relevant, it also took into account recommendations from the '*Independent Inquiry Panel into the deaths of Madeleine and Lauren O'Neill*' (referred to as the O'Neill Report), and the '*Independent Report into the Agency Involvement with Mr McElhill, Ms Lorraine McGovern and their children*' (referred to as the Toner Report).

Due to the size and scale of child protection services in Northern Ireland and the number of recommendations in the SSI Overview report, the review was subdivided into discrete stages during year one, 2008/09:

- ❖ Stage 1 - Corporate leadership and accountability
- ❖ Stage 2 - The views of service users
- ❖ Stage 3 - Quality of record keeping
- ❖ Stage 4 - Site visits to assess front line services
- ❖ Stage 5 - Interagency working

Each stage used different methodologies and produced separate reports.

1.3 Review Team

A review team was selected by RQIA from experienced, independent peer reviewers from across the United Kingdom. The team comprised the following membership:

- ❖ Mr Phelim Quinn, Director of Operations and Chief Nurse Advisor, RQIA
- ❖ Dr Rosalyn Proops, Child Protection Advisor for the Royal College of Paediatrics and Child Health, Consultant Community Paediatrician, Norfolk and Norwich University Hospital Trust

¹ DHSSPS (2006) *Our Children and Young People - Our Shared Responsibility - Inspection of Child Protection Services in Northern Ireland* <http://www.dhsspsni.gov.uk/print/oss-child-protection-overview.pdf>

- ❖ Mr William McKitterick, Independent Children's Social Services Advisor and Lead in the Children's Workforce Development Council
- ❖ Mrs Juliet Norman, Nurse Consultant Child Protection and Vulnerable Children, NHS, Lanarkshire

1.4 Approach for Stage 1

Stage 1 focussed on Corporate Leadership and Accountability which are the main themes in Chapter 2 of the SSI Report '*Planning, commissioning, monitoring and management and provision of child protection services*'. Reference was also made to the *Quality Standards for Health and Social Care*, theme one, Corporate Leadership and Accountability of Organisations.

Stage 1 began in July 2008 with a submission to the RQIA of the action plans each organisation had produced in response to the SSI Overview report. Action plans were analysed by the review team and an interim report was produced to inform the review team.

In October 2008, Trusts were also asked to provide a self assessed score, using a "maturity matrix", illustrated in Table (a) below, to describe their progress against the implementation of each of the nine recommendations from the SSI Report being examined in stage 1.

Maturity Matrix				
1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
There is awareness of the issues to be addressed, but no approaches have been developed to address them.	There is recognition of the key issues to be addressed and there is a range of options identified to address them.	Steps are being taken to address the key issues with evidence of practical application across the organisation.	There are well-developed plans being implemented throughout the organisation that address the key issues with evidence of evaluation and benchmarking leading to continuous improvement.	There is evidence of innovative practice, which is being shared across and beyond the organisation to others. They are further developing their approaches to ensure long term sustainable improvement.

Table (a)

During January 2009, the review team interviewed the following senior executive and non executive officers from the Northern Health and Social Care Trust, as part of the process to validate and clarify the Trust's self assessment return:

- ❖ Ms Norma Evans, Chief Executive
- ❖ Mr Stanley Forsythe, Non-Executive Director
- ❖ Mr Glenn Houston, Director of Children's and Women's Services and Executive Director of Social Work
- ❖ Dr Alison Livingstone, Named Doctor for Child Protection
- ❖ Ms Judith Lees, Named Nurse for Safeguarding Children
- ❖ Ms Jacinta Melaugh, Director of Human Resources

The review team made an assessment of the Trust's progress against recommendations 5 to 13 of the SSI Overview report, using both the information supplied in the Trust's self assessment and the information provided during a group interview with the officers listed above. **(Refer to Appendix 1 for the SSI recommendations relating to this report)**

1.5 Report Outline

This report includes the Trust's self assessment and the findings of the review team. It is presented in four discreet sections. Section 1 provides a context to the review. Section 2 outlines a summary of the findings presented in the maturity matrix and includes an overview of the high level findings. Section 3 covers a more in-depth analysis of the Trust's performance against the recommendations. This includes the Trust's self assessment and the review team's assessment based on the maturity matrix and the interview process. Section 4 outlines two key recommendations for the Trust.

2. Main Findings

2.1 Summary of Findings

In October 2008, the Northern Health and Social Care Trust submitted a self assessed score of its progress against nine selected recommendations from Chapter 2 of the SSI Overview Report. **(Refer to Appendix 1 for the SSI recommendations relating to this report)**

Based on the information provided by the Trust on the maturity matrix and the interviews with senior officers, the review team assessed the Trust's progress on the implementation of these recommendations. The summary of the results of both assessments are presented in Table (b) below.

SSI OVERVIEW REPORT - CHAPTER 2		
Planning, commissioning, monitoring and managing, and provision of child protection services	Northern Health and Social Care Trust	Review Team
Recommendation	Trust Assessment	Team Assessment
5 - Lead roles – Director	Practising	Practising
6 - Lines of responsibility & accountability	Practising	Practising
7 - Lead roles - doctor & nurse	Practising	Practising
8 - Corporate parenting reports	Practising	Practising
9 - Workforce strategy	Practising	Practising
10 - Lead roles & corporate parent	Practising	Practising
11 - Funding for children's services	Practising	Practising
12 - Escalation of difficulties in discharging statutory functions	Developing	Developing
13 - Escalation of staffing difficulties	Practising	Practising

Table (b)

Table (b) shows that there was a broad consensus regarding the Trust's self assessment and the review team's findings following the interview process. A more detailed outline of the Trust's performance against these recommendations is presented in Section 3 of this report.

2.2 High Level Findings of the Child Protection Review - Stage 1

- ❖ There was a clear and transparent line of responsibility for child protection services within the Northern Health and Social Care Trust which rests with the Director of Women's and Children's Services/Executive Director of Social Work. There was confirmation of appropriate reporting and governance arrangements relating to child protection.
- ❖ There was evidence of the Chief Executive's lead role within the Trust as the "Accountable Officer" for the discharge of the Trust's responsibilities in regards to children's services. Sound systems were in place to ensure flow of information from front line services to the Trust Board.
- ❖ There was evidence of robust reporting by the Trust in relation to its discharge of responsibility as a corporate parent. There was a clear awareness among Trust directors interviewed of their individual responsibility as a corporate parent.
- ❖ The Trust Board had not been informed of incidents where the Trust were deemed to be in breach of regulations.
- ❖ There was compulsory training in child protection for all front line staff.
- ❖ Child protection training is not part of a corporate induction programme as expected.
- ❖ Significant pressure was identified in the deliverance and maintenance of services in the climate of the comprehensive spending review.
- ❖ The Trust have implemented a comprehensive whistleblowing policy.
- ❖ There was a robust management process in place in relation to the corporate risk register and clear attendant governance arrangements.

3. Review Team findings

3.1 SSI Recommendation 5

Recommendation 5 of the SSI Overview Report states that Trusts must ensure:

"The Director of Children's Services is clearly identified as having lead responsibility for child protection services and effectively discharges the responsibilities associated with this post and with the post of Executive Director of Social Work;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'practising'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
			Trust Assessment	
			Team Assessment	

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview in relation to corporate parenting responsibility:

This responsibility is clearly identified in the job description for the Director of Women's and Children's Services/Executive Director of Social Work. In practice the Director discharges these responsibilities primarily through:

- ❖ Chairing of Trust's bi-monthly Child Protection Panel;
- ❖ Membership of the Northern Area Child Protection Panel;
- ❖ Chairing monthly Directorate Management Team meetings;
- ❖ Monthly supervision of each of the Assistant Directors in the Directorate;
- ❖ Chairing recently established three-monthly meetings of the Directorate Management Team Governance Group;
- ❖ Providing professional social work input to the Trust Senior Management Team and Trust Board, including in respect of Child Protection Services;
- ❖ Ensuring the production and analysis of six monthly Corporate Parenting Returns and annual Delegated Statutory Function report;
- ❖ Receiving complaints/representations from service users and co-ordinating Trust responses;
- ❖ Chairing the Trust's Professional Social Work Forum;
- ❖ Overseeing the training and support provided to Trust Social Work staff;
- ❖ Formal monthly meetings with the NHSSB Director of Social Work;

REVIEW TEAM'S ASSESSMENT

The review team assessed that the Director of Women’s and Children’s Services and Executive Director of Social Work was discharging the responsibilities of his role effectively. He presented as confident when articulating his lead responsibility for child protection services.

Throughout the interview, the director evidenced a variety of methods as to how he carried out these responsibilities, emphasising that the protection of the child remained a priority on his agenda. The director chairs the Child Protection Panel and evidenced effective liaison with voluntary organisations to ensure the voice of the child was being heard. He also described his interest in encouraging a holistic approach to his work. He described work with the education sector for children/young people leaving care leading to further education or employment. He also expressed an active interest in the provision of companions/befrienders for children in both foster care and residential units.

During interview the director spoke of his responsibilities in ensuring any issues of risk or concern are immediately escalated as appropriate. In relation to case management reviews and serious adverse incidents, he conveyed effective methods of ensuring he was personally kept informed of the processes and outcomes. He outlined the role of the Northern Health and Social Services Board and Area Child Protection Committee in initiating case management reviews and reviewing serious adverse events. He confirmed his responsibility as chair of the Trust Child Protection Committee and to keep Trust Board informed.

3.2 SSI Recommendation 6

Recommendation 6 of the SSI Overview Report states that Trusts must ensure:

"The lines of professional responsibility and accountability from the front line of practice to the Chief Executive and to the Trust board are clear and unambiguous thus enabling the Trust board to discharge its responsibilities in regard to children's services effectively;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'practising'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
			Trust Assessment	
			Team Assessment	

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview relating to lines of professional accountability:

- ❖ Executive Director of Social Work routinely appraises the Chief Executive of a range of issues (including child protection) through regular supervision sessions;
- ❖ The Director also regularly appraises the Trust Senior Management Team and Trust Board of such issues and is responsible for presenting six monthly Corporate Parenting Returns and annual Delegated Statutory Functions Reports to Trust Board, advising of any issues arising and appropriate actions taken or required to be taken in response;
- ❖ There is a direct line of accountability for all child care and child protection matters from the Executive Director of Social Work through to frontline staff, particularly through social work staff receiving regular supervision from a professionally qualified social worker of a higher grade. The arrangements within the Children's Disability service have received particular attention because those social work teams are managed within the paediatric sub division of the Women's and Children's Directorate. The professional Head of Social Work for Children's Disability service is directly line managed by the Assistant Director from a health care background but has a direct line of professional accountability to the Executive Director of Social Work through a professionally social work qualified Assistant Director;
- ❖ The Trust's formal Scheme of Delegation has been endorsed by the Board and approved by the Department;
- ❖ The Trust has appointed three Assistant Directors from a professional Social Work background to manage child care and child protection services in each of the three sectors within the Trust. In addition, the Trust has also appointed professionally qualified social work Heads of Social Work within each of these three localities and within the Children's Disability Service.

REVIEW TEAM'S ASSESSMENT

During interview, the review team found sufficient evidence to support the Trust's assessment of this recommendation. The Chief Executive clearly demonstrated a lead role in the management of information from front line staff to the Trust Board. This ensures that the Trust Board Directors are satisfied that all issues of a child protection nature are being addressed. She is ably supported in taking this forward by a competent team.

The review team concluded that there are well defined systems and processes in place in terms of supervision and training. It was reported by the Chief Executive that she has regular supervision sessions with the Director of Women's and Children's Services and Executive Director of Social Work. There is a requirement for mandatory supervision of frontline staff and supervision records are retained as part of the ongoing appraisal process. This links into the Knowledge Skills Framework (KSF). Supervision of nursing staff is provided on a regular basis with annual appraisal being reviewed every six months. The Named Doctor for Child Protection reported to the review team that the

relevant medical staff link into the Northern Ireland Child Protection Interest Group and have an annual appraisal.

The senior professional interviewed described a process of ongoing training needs analysis, examining particular training needs of specific groups of staff.

3.3 SSI Recommendation 7

Recommendation 7 of the SSI Overview Report states that Trusts must ensure:

"There is a Named Doctor and Named Nurse with clearly defined job plans and responsibilities to provide a lead role for child protection within these disciplines;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'practising'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
			Trust Assessment	
			Team Assessment	

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview:

Named Nurse:

The role of named nurse for child protection is fulfilled by an experienced nurse who has "Named Nurse for Safeguarding Children" as their job title. This role, as set out in section 3.21 "Co-operating to Safeguard Children" and referenced in the Regional ACPC policy and procedures, is explicitly referenced in their job description.

Main responsibilities and duties of post are to:

- ❖ influence and support organisational and professional requirements to protect and promote the welfare of children across Children's Nursing.
- ❖ lead on the development of Trust Safeguarding policies and standards within a risk management framework to support nursing staff across all disciplines.
- ❖ provision of clinical expertise, support and guidance on child protection and safeguarding children issues to key Nursing managers within and beyond the Women's and Children's Directorate.

Named Doctor:

Despite continuing efforts, the Trust has been unable to date to formally appoint to the role of Named Paediatrician though these duties are, in practice, shared between a number of Paediatricians within the Trust in respect of their particular areas of responsibility. However, the Trust is currently preparing a bid to the Northern Board which, if successful, will secure the additional resources required to allow for the appointment of both a Named Paediatrician and a Designated Doctor.

REVIEW TEAM'S ASSESSMENT

The review team agreed that the Named Nurse for Safeguarding Children presented as confident and clear regarding her role and responsibilities for child protection. She described an effective communication system both, in support of her nursing colleagues and via links to the DHSSPS. She also provided good examples of working across the disciplines and ongoing work with health visitors and with mental health staff where there is direct liaison with the lead Director. Various training opportunities are provided to staff. As an example, she described a recent series of lunch time seminars looking at the learning from the O'Neill Report. She also reported on the establishment of "champions" within mental health services staff who would have a child health and child care remit. The Named Nurse is also a prominent member of the Child Protection Panel.

The review team noted that there was confusion on a UK-wide basis concerning the roles of Named Doctor and Designated Doctor. However, they agreed that the Trust was 'practising' in line with this recommendation and the resources in place were adequate.

The Named Doctor demonstrated proficiency in the role, describing procedures for linking in with the Gateway Teams and the PSNI. She was also able to evidence training events with the new Public Protection Units of the PSNI and with primary care staff, across the Trust.

3.4 SSI Recommendation 8

Recommendation 8 of the SSI Overview Report states that Trusts must ensure:

"Difficulties or risks in regard to its ability to discharge statutory child care functions are included in C03/02 reports and brought to the attention of the Trust board. Trusts should also seek to agree, implement and review quality improvement plans, as appropriate;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'practising'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
			Trust Assessment	
			Team Assessment	

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview:

The NHSCT Trust Board receives copies of each six monthly Corporate Parenting Return (which address the requirements set out in Departmental Circular CC03/02), with the Director identifying any difficulties or risks arising in respect of the Trust's ability to discharge statutory child care functions. The data set out in the Returns is also used to:

- ❖ identify trends over time;
- ❖ identify any variances in practice or outcomes between the Trust's three Family and Child Care sectors and also, where appropriate, to identify the need to audit practice to examine these in more detail;
- ❖ help advise the Northern Board of emerging issues identified, quantified or confirmed through these returns;
- ❖ inform the development of service proposals to be tabled with the commissioner;
- ❖ inform the updating of the Directorate Risk Register and Trust Service Pressures list;
- ❖ help monitor progress against PfA targets and the effectiveness of service developments in delivering on anticipated outcomes;

REVIEW TEAM'S ASSESSMENT

The Trust reported a meticulous system for reviewing and managing risk whereby issues are escalated appropriately to the Chief Executive and Trust Board. The Trust also reported on the centrality of the six monthly Corporate Parenting Report. This report is presented to the Trust Board and commissioner. This was demonstrated effectively by the Non-Executive Director's knowledge, understanding and familiarity with current issues in relation to the Trust's ability to discharge its statutory child care functions.

The Trust also provided an example relating to the management of unallocated cases. The response to the review team highlighted robust arrangements in place whereby the risk was managed appropriately and an action plan implemented in line with corporate goals. It was reported that this issue was also raised at the Governance Management

Committee and brought to Trust Board as well as being shared with the commissioner, as appropriate. This has resulted in the trend of unallocated cases being reduced.

The Trust uses other methods, such as the Trust whistleblowing policy and the UTalk Scheme, which afford staff the opportunity to raise any issues of concern.

3.5 SSI Recommendation 9

Recommendation 9 of the SSI Overview Report states that Trusts must ensure:

"There workforce strategy enables them to meet their requirements as an employer as set out in the NISCC Code of Practice and complies with social care governance arrangements;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'practising'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
			Trust Assessment	
			Team Assessment	

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview.

The Women's and Children's Directorate has developed a workforce strategy (including in respect of social care), and highlighting the staffing implications of current or planned service developments.

Where appropriate, issues in relation to workforce planning are brought to the attention of the DHSSPS Workforce Planning Group. The Trust has representatives on regional workforce planning groups which the DHSSPS co-ordinate.

The roll out of NISCC Induction Standards for all new social work/social care staff has been achieved and these are now operational (ref point 1 & 3 of the NISCC Code of Conduct for Employers).

The Trust's Training Plan in respect of social work/social care staff will be in place by December 2008 (ref point 3 of Code of Conduct) and builds on already extensive local arrangements regarding recruitment, induction, training and staff development.

The Trust has developed a Recruitment and Retention Strategy and Action Plan which is being taken forward by HR and Directorate managers. The Trust's Workforce Planning and Modernisation Steering Group contribute information to the Trust's workforce planning process.

The Trust has met with the NISCC and agreed respective responsibilities regarding the monitoring of re-registration and registration issues more generally (ref point 5 of the Code of Conduct), resulting in all Trust social work staff re-registering with the Council earlier this year.

The Trust, in partnership with others, continues to actively develop appropriate regional post-qualifying opportunities in child care and secured funding from the OSS to support candidates in respect of this (ref point 3 of the Code of Conduct).

REVIEW TEAM'S ASSESSMENT

The Trust has developed a strategic overview document and a workforce strategy in particular for the Women's and Children's Directorate. The corporate workforce strategy helps to identify training issues throughout the Trust, as well as representing explicit needs of specific disciplines.

The Trust reported that there is also a recruitment and retention strategy which outlines the Trust's staffing requirements for the next three years. This has helped ensure that the right people are identified for the right positions. For example, in relation to recruitment for the gateway teams, the implementation of the Trust's strategy ensured vacancies have been filled by permanent experienced staff.

Those interviewed gave a good account of training across disciplines and locations in the Trust and the review team evidenced well developed training plans for each professional group.

RECOMMENDATION:

The Trust should enhance its training strategy by ensuring training programmes are coordinated in a comprehensive way and specific training in child protection should be included in the corporate induction process.

The Trust reported to the review team that there are adequate supervision arrangements in place with mandatory supervision of frontline staff. Supervision records are maintained as part of the ongoing appraisal process. These are monitored by a reviewing officer in three localities across the Trust. Work is being taken forward in relation to the Reform Implementation Team's (RIT) guidance on caseload management which will seek to afford individual staff, teams and the service, the opportunity to work to optimum effect in delivering best outcomes for children.

3.6 SSI Recommendation 10

Recommendation 10 of the SSI Overview Report states that:

"Executive and non-executive directors are clear about their individual and corporate responsibilities and receive mandatory training in understanding their role as a "corporate parent;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'practising'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
			Trust Assessment	
			Team Assessment	

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview.

A working group, comprising of a Trainer from each Board's area, developed training material, which was then piloted in the South Eastern Trust. A presentation format has now been produced for use with Board/Trust Executives and will be delivered as and when required.

Trust Non Executive Directors have been rostered to undertake induction visits to Trust facilities, including children's homes. The visits commenced in November 2007 and continue on a twice yearly basis. The visits include orientation sessions with frontline staff in a range of offices and facilities across the Trust.

Reports of these visits to children's homes are tabled at subsequent meetings of the Trust Board.

The Executive Director of Social Work has presented two six monthly Corporate Parenting Reports to date to meetings of the Trust Board. The Executive Director of Social Work has also made a presentation to Trust Board as to their role and responsibilities as corporate parents. This responsibility is continuously reinforced through a range of discussions in areas related to, for example, the Scheme of Delegation of Statutory Functions and through reporting of serious adverse incidents related to children and young people.

The Trust has sourced guidance on the role of GB local authority councillors in respect of Corporate Parenting and consideration is being given to developing this for use with the Trust Board.

REVIEW TEAM'S ASSESSMENT

The Executive and Non-Executive Director articulated a very clear, cohesive account of their individual and corporate responsibilities. It was reported that all directors have undergone training relating to their role as a corporate parent.

Both Executive Directors and the Non-Executive Director, provided clear accounts of visits to Trust facilities, including children's homes. Reports of these visits

are tabled for discussion at a subsequent Trust Board meeting. This arrangement afforded an excellent means of eliciting information from frontline staff and provided a valuable way of hearing the child's voice. The review team commended this as an area of good practice.

The Chief Executive was clear in her role and responsibility as the "accountable officer" in relation to protecting children. She outlined the priority given to the establishment of the Gateway Teams and the robust protocols in relation to these teams. She also reported on mechanisms for reviewing performance of the teams including the need to closely monitor all unallocated cases, whilst ensuring issues of risk and concern are actioned appropriately. By keeping apprised of child protection reports and developments actioned across the UK the executive ensures that their knowledge is current. The Chief Executive also reported the arrangements that she had in place to quality assure the provision of education and accommodation for looked after children in the Trust.

3.7 SSI Recommendation 11

Recommendation 11 of the SSI Overview Report states that Boards and Trusts must ensure:

"Information provided to the Boards to secure resources for children's services is appropriately collated, validated and analysed, and

- resources made available to children's services are directed to identified areas of need, and progress is regularly and appropriately reported on; and
- investment in children's services is continuously reviewed and the findings included in the annual reports to the Area Board on the discharge of statutory functions;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'practising'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
			Trust Assessment	
			Team Assessment	

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview:

The Trust has well established processes for validation/analysis of information in respect of a series of statistical returns:

- ❖ Six monthly Corporate Parenting Returns;
- ❖ Quarterly ACPC returns;
- ❖ Annual Delegated Statutory Functions Reports;
- ❖ Weekly Unallocated Cases Monitoring;
- ❖ Regular monitoring returns regarding:
 - ❖ Children's Services Investments;
 - ❖ Progress against PfA/PSA targets;
 - ❖ Contributions to Children's Services Planning data collection and analysis;
 - ❖ Quality assurance arrangements in respect of Incident Report and Serious Adverse Incident Reports;

Much of the above information is drawn from SOS CARE. Whilst the Trust has processes in place to maintain the accuracy of SOS CARE data, on-going efforts are required to try to ensure this data is kept up to date. The volume of information requests, together with the short timescales by which the information is typically sought (at the same time as the Trust continues to deliver complex social care services which themselves are under considerable pressure), represents a significant challenge.

The Trust is required to provide the Board with detailed, robust Financial Evaluation (FE) forms whenever submitting proposals aimed at securing resources for Children's Services. Much of the supporting evidence regarding identification of need is drawn from the various statistical returns referred to above. FE proposals also set out arrangements by which progress towards achieving desired outcomes will be monitored and reported on should the proposal be successful.

REVIEW TEAM'S ASSESSMENT

The Trust evidenced robust reporting processes whereby information is collated validated and analysed and is provided to the Board. The risk register is also used as a means of bidding for funding from the Board.

The Trust provided examples of modernisation initiatives and described how they are managing resources to meet the needs of their population.

By using innovative ways to examine how best to utilise resources, the Trust described an example of how the development of specialist fostering would provide a more efficient and flexible method of providing respite to children with a disability.

There was clarity from those interviewed around the reality of the modernisation programme and the comprehensive spending review. The Trust Panel spoke of the need to reduce management, clinical and administrative costs without reducing business, those interviewed expressed the need to want to do more. The Chief Executive gave the example that, in spite of restrictions in staff numbers, a corporate decision had been taken to ensure there was adequate administration support to keep child protection minutes up to date.

3.8 SSI Recommendation 12

Recommendation 12 of the SSI Overview Report states that Boards and Trusts must ensure:

"The DHSSPS is advised of difficulties in discharging statutory functions for child protection and children's residential services, the action plan and timescale proposed to address these, and any specific shortfall in resources;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'developing'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
		Trust Assessment		
		Team Assessment		

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview.

The Trust brings appropriate issues to the Department's attention through the following mechanisms:

- ❖ Unallocated child care case monthly reports;
- ❖ Case Management Reviews, completed under the auspices of ACPC though with significant Trust contribution;
- ❖ Trust unmet needs reports;
- ❖ Incident Reports and Serious Adverse Incident Reports;
- ❖ Progress report and Accountability meetings;
- ❖ Regular meetings between the 5 Trust Directors of Women's and Children's Services and the Chief Social Services Officer; and;
- ❖ Production of actions plans in response to Departmental reports and papers such as the Laming Report, Self Assessment Audit, SSI Child Protection Inspection Overview Report and O'Neill and McElhill/McGovern reports;

Whilst the Trust has well developed formal processes for bringing to the Department's attention particular issues arising from individual cases, this is less the case in respect of broader issues, including resourcing shortfalls. Boards and Trusts do periodically raise broader resourcing issues with the Department (the underfunding of the Children Order being a case in point), partly in the hope of shaping future Departmental PfA targets and related resourcing priorities. However, despite the Department's very welcome successes in securing additional resources, it remains the case that the per capita investment in Personal Social Services for children and families in Northern Ireland is significantly less than elsewhere in the UK which inevitably results in widespread shortfalls in resources.

REVIEW TEAM'S ASSESSMENT

The Trust described a variety of reports and meetings which were used to raise issues with the DHSSPS.

The Trust was able to demonstrate robust processes for the escalation of areas of non-compliance. The Trust Panel described how these incidents populate the Corporate Risk Register, with a clear description of the risk rating, the target risk rating and associated timescales, and a named person responsible for the action. However, when referencing the issue and actions surrounding a Failure to Comply Notice issued by RQIA, it was not apparent that this was escalated to Board level. The review team agreed that the Trust should consider reporting all requirements and Notices to the Board at the time they are received, clearly outlining the actions taken to ensure compliance.

RECOMMENDATION:

The Trust should consider reporting all requirements and Notices to the Board at the time they are received, with the actions taken to ensure compliance.

3.9 SSI Recommendation 13

Recommendation 13 of the SSI Overview Report states that Boards and Trusts must ensure:

"Staffing difficulties within the professional groups are brought to the attention of the DHSSPS Workforce Planning Group and Children Matter Taskforce and addressed;"

Based on the maturity matrix, the Trust assessed its implementation of this recommendation to be 'practising'. The review team agreed with this assessment.

1	2	3	4	5
Aware	Responding	Developing	Practising	Leading
			Trust Assessment	
			Team Assessment	

TRUST'S SELF ASSESSMENT

The following information is taken directly from the self assessment submitted by the Trust prior to interview.

Staffing issues (including recruitment within professional groups) are discussed at monthly Directorate Management Team meetings under the heading of "Human Resources". Issues regarding the recruitment of social work staff can also be discussed at the Trust's Professional Social Work Forum. Whilst the recruitment and retention of social work staff periodically proved a difficulty for legacy Trusts, the Northern Trust has

generally been successful in this regard, a recent advertisement for Family and Child Care Social Workers having attracted over 70 applicants. The monitoring arrangements in respect of overall staffing recruitment difficulties, whilst “light touch“ are appropriate to the level of issues faced and could readily be bolstered should this position change. Periodically particular temporary staffing difficulties are experienced within individual teams (for instance through sick leave or maternity leave) and these may be addressed through temporary or agency staff.

Other professional groups within the Directorate have experienced more difficulties in staff recruitment and retention and this can sometimes have potential implications for child protection services. For instance, there were significant problems in recruiting to vacant Health Visitor posts though with Health Visitor students completing their professional training over the summer most permanent Health Visitor vacancies are now filled.

Where appropriate, issues in relation to workforce planning are brought to the attention of the DHSSPS Workforce Planning Group. (Response to recommendation 9 also refers to this issue).

REVIEW TEAM'S ASSESSMENT

The Trust addresses staffing difficulties within its workforce strategy. During interview, the Trust Panel demonstrated evidence that these issues were also discussed at Trust Board level. The Non-Executive Director was aware of workload pressures relating to sickness and maternity leave. Re-assurance was provided to the director and the Board in terms of ensuring that child protection was not compromised because of any staff absences. It was reported that in establishing the gateway teams, every effort was made to fill posts on a permanent basis and to attract experienced staff.

In addition, it was reported that the Trust does not have significant staff turnover in comparison to local authorities in England.

It was confirmed that where appropriate, issues in relation to workforce planning are brought to the attention of the DHSSPS workforce planning group.

4.0 Key Recommendations

RECOMMENDATION: 1

The Trust should enhance its training strategy by ensuring training programmes are connected in a comprehensive way and specific training in child protection is included in the corporate induction process.

RECOMMENDATION: 2

The Trust should consider reporting all requirements and Notices to the Board at the time they are received, with the actions taken.

Appendix 1 Outline of the SSI Recommendations Relating to this Report

RECOMMENDATION 5

The Director of Children's Services is clearly identified as having lead responsibility for child protection services and effectively discharges the responsibilities associated with this post and with the post of Executive Director of Social Work;

RECOMMENDATION 6

The lines of professional responsibility and accountability from the front line of practice to the Chief Executive and to the Trust board are clear and unambiguous thus enabling the Trust board to discharge its responsibilities in regard to children's services effectively;

RECOMMENDATION 7

There is a Named Doctor and Named Nurse with clearly defined job plans and responsibilities to provide a lead role for child protection within these responsibilities;

RECOMMENDATION 8

Difficulties or risks in regard to its ability to discharge statutory child care functions are included in CC03/02 reports and brought to the attention of the Trust board. Trust should also seek to agree, implement, and review quality improvement plans, as appropriate;

RECOMMENDATION 9

There workforce strategy enables them to meet their requirements as an employer as set out in the NISSC Code of Practice and complies with social care governance arrangements;

RECOMMENDATION 10

Executive and Non-Executive Directors are clear about their individual and corporate responsibilities and receive mandatory training in understanding their role as a corporate parent";

RECOMMENDATION 11

Information provided to the Boards to secure resources for children's services is appropriately collated, validated and analysed, and

- resources made available to children's services are directed to identified areas of need, and progress is regularly and appropriately reported on; and
- investment in children's services is continuously reviewed and the findings included in the annual reports to the Area Board on the discharge of statutory functions.

RECOMMENDATION 12

The DHSSPS is advised of difficulties in discharging statutory functions for child protection and children's residential services, the action plan and timescale proposed to address these, and any specific shortfall in resources; and

RECOMMENDATION 13

Staffing difficulties within the professional groups are brought to the attention of the DHSSPS Workforce Planning Group and Children Matter Taskforce and addressed.

Glossary of Terms

ACPC	Area Child Protection Committee
AYE	Assessed Year in Employment
CAHMS	Child and Adolescent Mental Health Services
DHSSPS	Department of Health, Social Services and Public Safety
FIT	Family Intervention Teams (Field social work teams)
Gateway Teams	Initial referral social work teams
HWIP	Health and Well-Being Investment Plan
LAC	Looked After Children
NISCC	Northern Ireland Social Care Council
PA	Programmed Activities (Dedicated medical time)
RIT	Reform Implementation Team
RQIA	Regulation and Quality Improvement Authority
SOSCARE	Social Services Client Administration and Retrieval Environment
SSI	Social Services Inspectorate
SSI Overview Report	Our Children and Young People - Our Shared Responsibility. Inspection of Child protection Services in Northern Ireland Overview Report, December 2006

TCPP Trust Child protection Panel

UNOCINI Understanding the Needs of Children in Northern Ireland
(Assessment Framework)

VOYPIC Voice of Young People in Care