



THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

9th Floor Riverside Tower 5 Lanyon Place Belfast BT1 3BT

Tel: (028) 9051 7500 Fax: (028) 9051 7501

CHILD PROTECTION REVIEW REPORT

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

Southern Health and Social Care Trust Report

29 January 2009

CONTENTS

		Page(s)
1.	Background Information	2-4
1.1	The Role and Responsibility of the Regulation and Quality Improvement Authority (RQIA)	2
1.2	Scope of Review	2
1.3	Review Team	2
1.4	Approach for Stage 1	3
1.5	Report Outline	4
2.	Main Findings	5-6
2.1	Summary of Findings	5
2.2	High Level Findings	6
3.	Review Team's Findings	
3.1	SSI Recommendation 5	7-8
3.2	SSI Recommendation 6	8-9
3.3	SSI Recommendation 7	9-10
3.4	SSI Recommendation 8	10-11
3.5	SSI Recommendation 9	11-13
3.6	SSI Recommendation 10	13-14
3.7	SSI Recommendation 11	14-15
3.8	SSI Recommendation 12	15-17
3.9	SSI Recommendation 13	17-18
4.	Key Recommendations	18
5.	Appendix 1 - Outline of the SSI Recommendations Relating to this Report	19
6.	Glossary	20-21

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).

Each stage used different methodologies and produced separate reports.

- ❖ 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
- ❖ Mr William McKitterick, Independent Children's Social Services Advisor and Lead in the Children's Workforce Development Council

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>

- ❖ Mrs Juliet Norman, Nurse Consultant Child Protection and Vulnerable Children, NHS, Lanarkshire

1.4 Approach for Stage 1

Stage 1 focused 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.

Stage 1 began in July 2008, with a submission to the RQIA of the action plans each Trust had completed in response to the SSI Overview report. Action plans were analysed 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 Southern Health and Social Care Trust, as part of the process to validate and clarify the Trust's self assessment return:

- ❖ Mr Colm Donaghy, Chief Executive
- ❖ Mr Edwin Graham, Non-Executive Director
- ❖ Mr Brian Dornan, Executive Director of Social Work
- ❖ Mr Kieran Donaghy, Director of Human Resources
- ❖ Dr James Hughes, Named Doctor
- ❖ Ms Mary Rafferty, Named Nurse

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 of 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 Southern 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	Southern 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	Developing	Developing
10 - Lead roles & corporate parent	Practising	Practising
11 - Funding for children's services	Practising	Practising
12 - Escalation of difficulties in discharging statutory functions	Practising	Practising
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

- ❖ Clear lead responsibility for Child Protection Services in the Southern Health and Social Care Trust rests with the Director of Children's and Young Peoples Services.
- ❖ A sound structural organisation which ensures child protection input is evident across the Trust.
- ❖ Good governance processes and procedures are in place across the Trust, including risk management, through the directorate and corporate risk register.
- ❖ There are clear lines of accountability between front line staff through the organisation to the Chief Executive and Trust Board.
- ❖ The Trust's role and responsibility as corporate parent is well established with appropriate training for the executive team to fulfil this role.
- ❖ There is limited medical child protection input into all areas of the Trust's business.
- ❖ Good Named Nurse provision exists across the Trust.
- ❖ There are capacity issues in relation to support services within children and young people's services which requires resolution.
- ❖ There was good evidence of reporting mechanisms both internally and externally.

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:

The Director of Children & Young People has established a multi-disciplinary Directorate made up of three Divisions which includes Safeguarding & Family Support, Corporate Parenting and Specialist Child Health and Disability.

The Safeguarding & Family Support Division takes a lead in the delivery of Child Protection Services with the Assistant Director reporting directly to the Director.

Given that child protection straddles all three Divisions the Director keeps child protection on the agenda of the Directorate Senior Management Team which includes the Assistant Director for Social Care Governance. The Director also reports to the Trust Board regarding child protection.

The Executive Director of Social Work role and responsibilities are held by the Director of Children and Young People.

The Director has established a Governance Framework as outlined in the Trust's Governance Strategy.

The Director presents to the Senior Management Team and Trust Board the following reports:

Statutory Functions; Corporate Parenting; SACPC; and Trust Child Protection Panel. These are also shared with the SHSSB and DHSS&PS.

The Trust Reform Implementation Project Board is accountable to the director and takes the lead in the implementation of regional Reform Implementation Team (R.I.T.) products.

The director is a member of the Regional Social Work Directors' Forum and has established a Trust Social Work and Social Care Governance Forum where child protection and discharge of Statutory Functions are part of the agenda.

REVIEW TEAM'S ASSESSMENT

The review team were satisfied that the Director of Children and Young People has lead responsibility for child protection services across the Southern Trust. He effectively carries out the responsibilities of the post of Executive Director of Social Work.

The Director of Children and Young People has established a multi-disciplinary directorate which includes three divisions, safeguarding and family support, corporate parenting, and specialist child health and disability. It was reported that child protection services are provided within each of these divisions, with the safeguarding and family support division taking the lead in the delivery of child protection services. The assistant director for this service reports directly to the director.

The Director of Children and Young People spoke of his open access policy for assistant directors of the three divisions within his directorate. The senior management team also meet for a half day each week, and monthly one to one sessions are held with assistant directors. These meetings provide an opportunity for major events to be raised at an early stage which allows for immediate notification made to the chief executive. The child protection issues that are raised relate, in the main, to unallocated cases and the childcare workforce.

The Director of Children and Young People has, within the role of Executive Director of Social Work, established a Trust social work and social care governance forum where child protection and discharge of statutory functions are part of the agenda.

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:

The Trust has established reporting mechanisms at all levels:

Supervision (all Grades to Assistant Director)

Team Meetings (Team Managers / Practitioners)

Practice Management Group (Team Managers / Heads of Service)

Information Sessions (all Grades)

Senior Management Group (Heads of Service)

Senior Management Team (Assistant Directors)

Directors Senior Management Team

Trust Board (Executive and Non Executive Members)

There is dissemination of minutes throughout and across Directorates and a staff e-mail brief.

The Trust is compliant with Circular CO3/02 reporting arrangements.

The Trust is establishing a Single Child Protection Panel (target date : December, 2008)

A Composite Child Protection Panel Report 07/08 with contributions from the three legacy Panels has been completed.

There is a procedure in place to manage and report serious adverse incidents.

There is a strategy in place to manage risk at Team, Directorate and Corporate levels.

There is a Governance Strategy in place.

The Regional Supervision Policy will be implemented on 24th November, 2008

The Trust completed a response to the Nursing and Midwifery Safeguarding Guidance and Principles, DHSS&PS

The Children & Young People's Directorate incorporates Health Visiting, School Nursing, Specialist Child Health and Disability and CAMHS.

An Inter-agency Project Board and Team was established to oversee the Reform of Child Protection Services and lead in the implementation of Reform Implementation Team (RIT) products.

REVIEW TEAM'S ASSESSMENT

The review team assessed that there was clear management accountability throughout the organisation. Lines of professional responsibility and accountability were unambiguous and well described. The review team assessed there to be robust governance structures throughout the Trust at both corporate and operational / directorate level which facilitate and drive this process.

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 assessed the Trust to be 'practising' in this area, however in relation to nursing services, the team assessed that the Trust is 'leading'.

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 Southern Trust has two Named Doctors (Dr Hughes and Dr McBreen). The designated doctor is Dr C. Shepherd.

There are three Named Nurses for the Southern Trust area. Each is a member of the locality based Child Protection panels. This is currently under review as we move towards new Safeguarding arrangements.

Geraldine Maguire is the Designated Nurse for the Southern Trust.

REVIEW TEAM'S ASSESSMENT

The Trust representatives provided an excellent description of the role and responsibilities of the Named Nurses. It was reported that there are three Named Nurses based in three localities across the Trust. Each nurse is a member of the locality child protection panel.

The review team accepted that the dedicated medical resource of 5 Programmed Activities is good. However, the Trust need to consider how this resource is coordinated and can be developed to provide child protection services throughout all areas of health care, with a particular focus on adult and child psychiatric health services. The response provided by the Trust in relation to this recommendation reflected processes and systems from legacy Trusts. In its response, the Trust outlined plans for further development which will take cognisance of new safeguarding arrangements.

RECOMMENDATION:

The Trust should consider how the dedicated child protection medical resource (currently 5 PA's) can be developed to provide child protection services throughout all aspects of health care, particularly in respect of adult and child psychiatric services.

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'. On the basis of the evidence provided in the Trusts own self assessment and through the interview process, 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 Children & Young People's Director ensures the completion of the Corporate Parenting Report which is submitted to the Trust Board, SHSSB and DHSS&PS.

The director presents the following reports to the Trust Board:

Child Protection Panel Report
 LAC Trends and Issues Report
 Permanency / Adoption Report
 Residential Monitoring Report.

Serious Adverse Incidents, Root Cause Analysis, Case Reviews and Case Management Reviews are reported to the Trust Board as required.

The Trust has developed a Statutory Functions Action Plan.

REVIEW TEAM'S ASSESSMENT

The Trust gave a comprehensive description of their ability to discharge statutory child care functions and to carry out the corporate parenting role. The Trust reported how information relating to the discharge of these roles is collated and subsequently forms the basis of a range of reports presented to the Trust Board and the Department through the commissioner.

The Trust also described regular visiting to Trust children's homes by Trust non executive directors. The Trust described a system in place which facilitates incident reporting and investigation using root cause analysis. This is embedded in practice across health and social care. This is a component of the Trust's method of dealing with serious adverse incidents which also is the subject of monthly action, planning and reporting.

The review team assessed that the Trust has a robust system for utilising the risk register which is consistent throughout health and social care across the Trust.

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 'developing'. Using the maturity matrix and considering the interview process, 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.

There is a dedicated Assistant Director for Social Work and Social Care Training and Workforce Development who reports to the Director of Children and Young People.

The Trust is currently developing a Workforce Plan which is being facilitated by Deloitte.

A Social Work and Social Care Governance Forum has been established.

The Regional Supervision Policy, Standards and Criteria will be implemented on 24th November, 2008

The Trust is currently implementing the Knowledge Skills Framework which compliments NISCC Professional Development and Training Plans.

The Trust has a Corporate Induction Programme for all staff.

There is a formal Children and Young People's Services induction programme for all qualified child care social workers.

The Trust's annual training needs analysis informs the Social Care Training Programme and Multi-disciplinary Child Protection Training Programme

The Trust contributes to the R.I.T. Workforce Strategy Workstream.

REVIEW TEAM'S ASSESSMENT

The Trust is working with an external agency to develop an overarching workforce strategy, and one section will deal specifically with family and children's services. The Trust reported that they were operating within DHSSPS guidelines in respect of the ratio of assessed year in employment (AYE) staff within the gateway teams. Difficulties in capacity, using relatively inexperienced staff and the need to invest more in administrative, clerical and support staff were outlined by the Trust representatives.

It was confirmed that these issues are on the directorate and corporate risk registers and are picked up through the governance structures. The Trust is aware of the need to review working practices. It is recommended that when making efficiency savings, consideration should be given to how the workload for administration can be reduced rather than reducing the number of support staff posts.

RECOMMENDATION:

The Trust should consider ways to reduce the administrative workload.

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.

The Director of Children & Young People's Services meets weekly with the Trust SMT (C.E.O. and other Directors) and on a monthly basis with Trust Board (Executive / Non-Executive Directors) when corporate parenting responsibilities and the discharge of Statutory Functions are discussed as appropriate.

The Director of Children and Young People meets approximately monthly with the Trust C.E.O. to discuss issues including Corporate Parenting and discharge of Statutory Functions.

An induction session has been delivered to all Board members regarding their corporate parenting role and responsibilities.

The Corporate Parenting six monthly report is presented to the full Trust Board.

*An induction programme and pack for Trust Board members will be developed and supported by regular training (Maturity Level Developing)

REVIEW TEAM'S ASSESSMENT

The Trust representatives gave a very clear and cohesive account of their individual and corporate responsibilities as a corporate parent. All Trust Board staff are facilitated in their role as a corporate parent through relevant training and development.

Trust Board members have undertaken awareness and training programmes in child protection and corporate parenting, in addition to attending workshops, committee and governance meetings. Each Board member spends a half day with each directorate to discuss issues which include child protection.

Examples were provided by the non-executive director of the benefits of regular visits to children's homes. This level of familiarity with a home is advantageous when issues relating to residential care are brought to the Trust Board.

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;
- 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 and Board raise issues relating to the adequacy of funding for Children's Social Services with the DHSS&PS.

The Director of Social Services, SHSSB and Trust Director of Children and Young People in collaboration with Finance, Planning and Information staff collate evidence of need, including unmet need and use this to inform commissioning priorities.

The Assistant Director and Heads of Service (Safeguarding and Family Support) meet with Finance staff to quality assure / amend budget reports.

A financial reporting system has been established to inform the Director, Assistant Directors and Heads of Service.

HWIP Report completed and submitted to DHSS&PS.

The Trust monitors and reports on services via the:

Corporate Parenting Report

Trust Delivery Plan

PFA Targets

Children and Young People's Funding Package

The Governance Team works closely with operational staff to monitor the effectiveness of Children's Services.

Monthly monitoring review of Children and Young Peoples Directorate Work Plan is completed.

Comprehensive Spending Review proposals / priorities have been submitted to the Minister, DHSS&PS.

REVIEW TEAM'S ASSESSMENT

The Trust had developed comprehensive policy and procedural documentation and mechanisms for reporting and sharing information with the commissioner. There are systems in place for the collation of evidence of need, including unmet need and this is used to inform commissioning priorities. Within this process, the Trust place great importance on how information is collected and validated. The Trust described to the review team how auditing through an assistant director as part of the governance structure is a key element in this process. The Trust reported that IT systems such as SOS-CARE could be better structured to improve the review and evaluation of information.

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 'practising'. The review team agreed with this assessment.

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

TRUST'S SELF ASSESSMENT

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

A strategy of integrated governance has been embedded throughout the Children and Young People's Directorate and a dedicated experienced senior manager (Patient / Client Liaison, Safety and Risk Manager) has been assigned to the Directorate to progress this programme. The elements of the programme include incident management, risk management, management of user views including complaints, enquiries and commendations, a patient safety programme, and management of litigation.

Child Protection Panel and SACPC receive quarterly and annual reports regarding trends and issues specific to child protection.

Child Protection Panel provide an Annual Report to SACPC which is compliant with Co-operating to Safeguard Children, DHSS&PS, May, 2003. This is also presented to the Trust Board.

Statutory Functions Report shared with Trust Board, SHSSB and DHSS&PS.

Monthly and annual residential monitoring reports are submitted to RQIA.

A policy and procedure is in place for reporting serious adverse incidents to the Trust, Board, DHSS&PS and RQIA.

Policy and procedures in place to manage risk at Team, Directorate and Corporate levels.

The Trust conducts Case Management Reviews as appropriate and in compliance with Co-operating to Safeguard Children, DHSS&PS, May, 2003.

Trust fully involved in Children's Services Planning.

Weekly unallocated children's cases are submitted to SHSSB.

Monthly unallocated children's cases are submitted to SHSSB and DHSS&PS

Statutory Functions Monitoring Meeting with SHSSB.

Director Meeting with Chief SSO.

REVIEW TEAM'S ASSESSMENT

The integrated governance programme is used to identify issues that are reported to commissioners and the DHSSPS. The review team were satisfied that the appropriate

reporting mechanisms are in place. This system was used to describe the Trust's management and reporting of un-allocated cases.

Regarding children's residential services, the Trust reported that quality improvement plans form an element of the Trust Corporate Parenting Report, which is shared with the Trust Board. If requirements from an RQIA inspection were not or could not be implemented, this situation would be placed on the risk register.

The review team assessed that the Trust has an effective system in place for the management of reporting which includes audits, good working relationships with commissioners and visiting frontline teams.

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.

There is a dedicated Human Resources Assistant Director within the Children and Young People's Directorate.

One of the Directorate SMT's monthly meeting focus on Workforce issues.

Staffing issues are a standing item on the agenda of:
 Senior Management Group (Heads of Service)
 Senior Management Team (Assistant Directors).

Information is provided to the Service Delivery Unit, DHSS&PS

Corporate caseloads for Health Visiting have been piloted and evaluated in Armagh & Dungannon locality and will be rolled out across the Trust.

Information collated and analysed via:

LAC Roles and Responsibilities returns
Unallocated Cases returns
Risk Management Reports.

The Trust Reform Implementation Project Board considers staff issues emerging from the rollout of the R.I.T. products.

The Directorate SMT meets monthly with Staff Side when issues can be identified and consultation take place.

REVIEW TEAM'S ASSESSMENT

The review team noted that the Trust has effective monitoring and management arrangements in relation to staffing difficulties, as noted at 3.5 in this report. A key element in the Trust response to this recommendation and the subsequent review team findings is the placement of a dedicated human resources assistant director within the children and young people's directorate. The Trust reported that staffing issues are a standing item at all meetings of the senior management team and the senior management group. In addition, the review team assessed that the Trust has also effective arrangements in place to deal with staff welfare difficulties, which include whistle-blowing in all policies and procedures, robust working relationships with staff and a programme of visits by the chief executive to engage with staff.

4.0 Key Recommendations

RECOMMENDATION:

The Trust should consider how the dedicated child protection medical resource (currently 5 PA's) can be developed to provide child protection services throughout all aspects of health care, particularly in respect of adult and child psychiatric services.

RECOMMENDATION:

The Trust should consider ways to reduce the administrative workload.

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