



**THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY**

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**CHILD PROTECTION REVIEW REPORT**

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

**South Eastern 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*'<sup>1</sup> (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

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<sup>1</sup> 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 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 organisation 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 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 South Eastern Health and Social Care Trust, as part of the process to validate and clarify the Trust's self assessment return:

- ❖ Mr John Compton , Chief Executive
- ❖ Mr Peter Davidson Non Executive Director
- ❖ Ms Kate Thompson, Director of Children's Services and Executive Director of Social Work
- ❖ Mr Eamon Molloy, Director of Human Resources and Corporate Affaires
- ❖ Ms Joanne McLaughlin, Named Nurse with lead responsibility for child protection
- ❖ Dr Cathy MacPherson, Named Doctor with lead responsibility for child protection

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 from the review team following the interview process. It is presented in four discrete sections. Section 1 provides a context to the review. Section 2 outlines a summary of the findings presented in the maturity matrix, and also includes an overview of the highlight 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 four key recommendations for the Trust.

## 2. FINDINGS

### 2.1 Summary of Findings

In October 2008, the South Eastern Health and Social Care Trust submitted a self assessed score of its progress against nine selected recommendations in Chapter 2 of the SSI Overview 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	South Eastern Health and Social Care Trust	Review Team
Recommendation	Trust Assessment	Team Assessment
5 - Lead roles – Director	Developing	Developing
6 - Lines of responsibility & accountability	Practising	Practising
7 - Lead roles - doctor & nurse	Developing	Practising
8 - Corporate parenting reports	Practising	Developing
9 - Workforce strategy	Developing	Developing
10 - Lead roles & corporate parent	Practising	Practising
11 - Funding for children's services	Responding	Responding
12 - Escalation of difficulties in discharging statutory functions	Developing	Developing
13 - Escalation of staffing difficulties	Developing	Developing

**Table (b)**

Table (b) indicates that there was a broad consensus regarding the Trust's self assessment and the review team's findings following the interview process. In relation to recommendation 7, the review team assessed the Trust as 'practising', in recognition of the clearly defined roles of the named professionals and their integration into Trust structures. The review team assessed the Trust performance against recommendation 8, as 'developing', due to delays in implementing learning across the organisation from case management reviews. 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**

- ❖ The Director of Children's Services within the South Eastern Health and Social Care Trust has the clear lead for child protection services within the Trust.
- ❖ There are inconsistencies in approach within the legacy Trusts which require attention.
- ❖ The review team assessed there to be clear lines of management accountability through the organisation from front line staff through to the Chief Executive and the Trust Board.
- ❖ The review team commended the initiative of placing Safeguarding Advisors in all directorates across the Trust.
- ❖ The roles of the Named Doctor and Named Nurse were well integrated into Trust structures.
- ❖ There were gaps in relation to the provision of robust governance arrangements within children services.
- ❖ The role of the Trust as corporate parent is well defined. Individual Trust directors and non executive directors were aware of their specific responsibilities in this area.
- ❖ There is a significant issue relating to the recruitment and retention of social work staff within children's services and the related issue of the number of assessed year in employment (AYE) staff in front line posts.
- ❖ Attention needs to be given to ensure that professional supervision is taking place across all disciplines and that systems are in place to monitor the process.
- ❖ There was good evidence of innovative modernisation initiatives presented.

### 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 '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:

From the 1 April 2007, the Executive Director of Social Work and Director of Children's Services, Mrs Kate Thompson, has been in post. The Director holds lead responsibility for Child Protection Services and reports directly to the Chief Executive and Trust Board on child protection issues and related statutory functions. Trust Board minutes reflect regular and significant reporting and consideration of child protection issues. As part of the Integrated Governance arrangements in South Eastern Trust a Safeguarding Children Sub Committee is chaired by the Director of Social Work. A bi-monthly Children's Governance Committee reviews and monitors the delivery of safe and effective care. Trust arrangements relating to the role of the Executive Director of Social Work are outlined in the Governance arrangements in Social Care and Social Work.

#### REVIEW TEAM'S ASSESSMENT

It was clear from the Trust's self assessment and through the interview process that the Director of Children's Services has clear responsibility for child protection within the Trust and that she reports directly to the Chief Executive. The Trust described a range of mechanisms which highlighted this lead responsibility. Examples provided included, the Chair of a Safeguarding Children sub group included in the Trust's integrated governance structure, the Chair of the Children's Outcome Board, reporting of child protection performance standards and targets through the Corporate Parenting Report and ensuring that child protection issues, including Trust involvement in Case Management Reviews are consistently brought before the Trust Board.

The Trust through their submissions did outline issues regarding the merging of the two legacy Trusts into one consistent structure. It was reported that different methods of collating information and categorising cases between the two legacy trust were still evident. The review team were concerned by the slow pace of change and it was evident that this process of integration needs to be supported.

#### **RECOMMENDATION:**

**The Trust needs to address the inconsistency of systems and methods across the two legacy Trusts and ensure consistency of approach across the Trust .**

### **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 new organisational structure for Children's Services in South Eastern Trust provides a clear, unambiguous and single reporting and accountability line from the front line Social Worker to the Chief Executive (see Organisational Chart).

### **REVIEW TEAM'S ASSESSMENT**

The review team were satisfied that there was clear management accountability throughout the organisation. Lines of professional responsibility and accountability for social work and nursing staff were unambiguous and well described. The Named Doctor presented as know legible and highly committed to his role within the Trust. There was however less clarity surrounding the lines of professional accountability within the medical profession.

The review team commended the initiative of placing "Safeguarding Advisors" within each directorate, which should provide a focus for child protection in all areas of Trust

business. There was sound evidence of training initiatives in child protection provided to staff across all levels of the Trust.

In addition, the Chief Executive was able to outline the learning gained from recent case management reviews.

### 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 'developing'. The review team assessed the Trust to be 'practising' against this recommendation.

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 Named Doctor for Child Protection is Dr C McPherson, Consultant Paediatrician and the Named Nurse is Ms Joanne McLaughlin, Child Protection Nurse Advisor. Currently there are 2.8 WTE Safeguarding Children Nurse Specialists to support Community Children's Nurses, one based in each sector. In addition there is a 0.5 WTE Nurse Specialist to support Acute and Minor Injuries staff.

## REVIEW TEAM'S ASSESSMENT

There are two doctors sharing four Programmed Activities to provide support to the Named Doctor role throughout the Trust. In addition, the Trust has appointed a psychiatrist within adult mental health services who has a lead role for child protection. A Named Nurse was in place who had a clear role plan and a clear place within the management structure of the Trust. Both the roles of Named Nurse and Named Doctor were well integrated into Trust structures. The Trust presented evidence of good practice in both medicine and nursing disciplines including collaboration in relation to training, joint working and strong links to social work.

### 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 self assessment and through the interview process, the review team assessed the Trust as 'developing' against this recommendation.

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 Corporate Parenting Report is presented to the Trust Board on a bi-annual basis by the Director of Social Work/Children's Services. The report details service developments, areas where there are difficulties identified in respect of Child Protection Services and activity trends. Each report will identify areas for improvement and provide comment on how these plans have been taken forward. Difficulties and risks associated with the Trust's ability to discharge statutory functions are recorded in the report and through the corporate risk recording process. These risks and issues are considered, reviewed and actioned at the Children's Governance Committee and the Corporate Risk Committee. Likewise quality improvement plans are implemented and subject to ongoing review through the Children's Governance Committee.

#### REVIEW TEAM'S ASSESSMENT

The Trust provided evidence of how they were attempting to manage risk throughout the organisation. It was clear that the Trust robustly reports these risks through its Corporate Parenting Report. Evidence provided to the review team indicated that the Trust was attempting to initiate learning from a number of case management reviews. The Trust acknowledged this was not completed but clear progress was being made. Based on information provided, the review team's assessed that there was insufficient evidence of timely improvement in areas identified. For instance, the Trust identified a need for an auditing process, however this was not fully implemented.

**RECOMMENDATION:**

**The Trust should develop a robust governance programme, including action plans and an audit programme, with clear timescales.**

### 3.5 SSI Recommendation 9

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

**"Their 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'. 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 is now in the process of delivering a Workforce Strategy for Children's Services. A Children's Services Workforce Strategy Group chaired by the Assistant Director, Social Work Regulation, Improvement and Audit with clear terms of reference has been initiated and the group are at an early stage of developing a strategy to address workforce issues. A Social Work Strategy 'Pride and Practice' was launched in July 2008 - the Action Plan and monitoring arrangements co-ordinated by the Executive Director of Social Work will ensure the Trust complies with the NISCC Codes of Practice. Given the significant number of AYE Social Workers employed in Children's Services, the Trust has initiated support and monitoring arrangements. A Quality Assurance Board chaired by the Assistant Director of Social Work, Regulation, Improvement and Audit with clear terms of reference monitors Trust arrangements and Social Work experiences.

### REVIEW TEAM'S ASSESSMENT

The Trust reported that a comprehensive Human Resources Strategy was being developed for the entire organisation. This would be complimented by a staff learning and development strategy, which would include the development of key performance indicators on staff supervision, support and appraisal. It was also reported that there

would be specific concentration within children's services on lone working, recruitment and retention and difficulties and delay in the recruitment of front line social work staff.

The Trust also reported difficulties in compliance with departmental guidelines in relation to social work staff who were in their assessed year in employment (AYE). These difficulties centred on the high number of AYE staff within teams. The Trust were keen to highlight the robust management and supervisory arrangements that were in place for all AYE staff.

The review team acknowledged the difficulties regarding the recruitment and retention of social work staff within child protection. In view of the difficulties described by the Trust in recruiting experienced social workers within children services, the Trust will need to give the social work stream within children services priority over the coming months.

**RECOMMENDATION:**

**The Trust Human Resources Department should prioritise the need for the urgent recruitment and retention of social workers within children's services.**

The review team identified gaps in professional supervision and a need for clarity in relation to supervision policies for all professional groups.

Within nursing there were well developed systems for the recording and monitoring of supervision. The review team would suggest that other disciplines could learn from nursing in this respect.

**RECOMMENDATION:**

**The Trust should ensure supervision policies are in place for all professional groups.**

### 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 Agenda for Trust Board is very child focused with frequent reference to the Corporate Parenting role including detailed consideration of individual cases in a confidential section. Directors and Non-Executive Directors have received training in relation to their Corporate Parenting responsibilities. A Workshop held in March 2008 provided an overview of developments and issues in Children's Services. In June 2008 the Trust Board received a further presentation on developments in relation to the Safeguarding of Children linked to the Corporate Parenting report. In October 2008 the Trust Board received Level 2 Safeguarding Training. Five Directors are permanent members of the Safeguarding Children's Governance Sub Committee which has clear Terms of Reference and Project Initiation document. Currently these Directors are involved in the delivery of a Safeguarding Seminar for all middle managers and clinical leads. This Seminar is particularly targeted at ensuring that all staff are aware of the Corporate Safeguarding Policy, Safeguarding Children's process within the organisation including the role of Safeguarding Advisors within the Trust and the Safeguarding training matrix and requirements.

## REVIEW TEAM'S ASSESSMENT

There was clear evidence that both executive and non executive directors had received training regarding their role as a corporate parent. Evidence provided during the interview indicated that all directors present had an understanding of their own individual responsibility in this regard. The Director of Human Resources talked about giving children and young people looked after by the Trust, a head start by the introduction of apprenticeships within the Trust for looked after children.

In addition, each non executive director had been assigned to a children's home. The non executive director demonstrated a commitment and in depth knowledge about the children's home he visits.

### 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 'responding'. 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 is actively developing a new information and reporting system to collate validate and analyse resources. This work is currently managed through the Children's Services Management Team chaired by the Director which monitors and reviews investments and service developments. Resources were available via HWIP are directed to identified agreed areas of need or development. The development of the Gateway Service and additional resources linked to this were monitored and deployed through a Gateway Project Board. Regular monitoring returns are made to the EHSSB in addition to feedback in relation to specific allocations.

## REVIEW TEAM'S ASSESSMENT

The Trust reported that the current comprehensive spending review has lead to a revaluation of services and a consideration of value for money. They reported that there were departmental targets in relation to savings, for instance a 10% reduction in administration expenditure. The Chief Executive reported that this is a difficult environment, but in terms of child protection the Trust will continue to do what is required. This was put in the context of a rising population within the Trust and an increasing birth rate. The Chief Executive reported that senior managers from within the Trust would meet with the commissioner on a regular basis to fully discuss resource issues. The Chief Executive clearly demonstrated a risk based approach to resource allocation.

The Trust provided examples of modernisation initiatives and described how they attempted to move resources around to meet need. In particular, examples were given where an intensive fostering scheme has been introduced which should reduce the number of residential beds the Trust requires.

### 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 panel 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.

Through the processes of quarterly monitoring meetings, the formal statutory functions report and regular meetings between Senior Managers Trust and Board difficulties in relation to the discharge of statutory functions are audited and addressed. The South Eastern Trust has registered concerns in relation to the CAMHS provision for Looked After Children and we have now agreed funding with the EHSSB to provide for the implementation of 'set connects' a service designed to address the mental health needs and emotional well being of Looked After Children. In relation to unallocated cases and the reporting and measurement of this work the Chief Executive has met with the Director of Social Work, EHSSB, who in turn has communicated these issues and proposals to the DHSS&PS.

#### REVIEW TEAM'S ASSESSMENT

The Trust described clear processes by which information relating to the discharge of its statutory functions is collated internally and presented to the department through the commissioner. Two examples were provided: one related to the centrality of the Trust's statutory functions and Corporate Parenting Report; and the other related to the governance process in place, in regard to quality improvement plans from inspections of the regulated sector.

Recent issues which the Trust has brought to the attention of the department included the number of unallocated child care cases within the Trust and an outline of how these are being managed. The lack of CAHMS resources within the Trust area was also raised and a subsequent bid has been made for resources in this area.

### 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 '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.

Staffing difficulties are identified through normal reporting arrangements within Children's Services and notified and considered in the context of risk management. Specific staffing difficulties are identified on the Directorate Risk Register and currently two areas of difficulties are recorded on the register with mitigating actions. The process of restructuring of Children's Services and introduction of Gateway Services was reported on a regular basis to the EHSSB and to the RIT, where specific staffing issues have arisen e.g. AYE staff working in Gateway teams the Trust has reported these difficulties directly to the DHSS&PS. The Trust is currently involved in examining capacity pressures in Gateway and FIT teams and this information is provided directly to the DHSS&PS.

#### REVIEW TEAM'S ASSESSMENT

As discussed previously, the Trust reported issues relating to the recruitment and retention of social work staff within children's services. A related issue was the high number of AYE social workers employed in front line services. The Trust reported how these work force issues are reported and managed within the organisation and of the reporting processes to keep the commissioner and department informed.

## 4.0

## Key Recommendations

### **RECOMMENDATION:**

**The Trust needs to address the inconsistency of systems and methods across the two legacy trusts and ensure consistency of approach across the Trust .**

### **RECOMMENDATION:**

**The Trust should develop a robust governance programme, including action plans and an audit programme, with clear timescales.**

### **RECOMMENDATION:**

**The Trust Human Resources Department should prioritise the need for the urgent recruitment and retention of social workers within children's services.**

### **RECOMMENDATION:**

**The Trust should ensure supervision policies are in place for all professional groups.**

## **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 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**

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

<b>TCPP</b>	Trust Child protection Panel
<b>UNOCINI</b>	Understanding the Needs of Children in Northern Ireland (Assessment Framework)
<b>VOYPIC</b>	Voice of Young People in Care

