

Action Plan

This Action Plan has been completed by the Provider and the Authority has not made any amendments to the returned Action Plan.

Provider's response to Inspection Report No:	753
Name of Service Area:	Sligo/Leitrim/West Cavan
Date of inspection:	23-25 February & 1-3 March 2016
Date of response:	30 June 2016 (accepted response)

These requirements set out the actions that should be taken to meet the National Standards for the Protection and Welfare of Children (2012).

Theme 1: Child Centred Services

Standard 1.1

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Written information on rights, including the right to make a complaint, was not consistently provided to children and families.
- The right to access personal information was not consistently promoted.

Action required:

Under **Standard 1.1** you are required to ensure that:
Children's rights and diversity are respected and promoted.

Please state the actions you have taken or are planning to take:

Action 1.1.1

A local working group will be established consisting of PSW (C&F), PSW (CPNS), Team Leader, Social Care Leader and Social Care Worker to oversee completion of Actions 1.1.1 to 1.1.6

Proposed Timescale: Q3 2016

Person Responsible: Area Manager, PSW (CPNS)

Action 1.1.2

The service will identify and/or create appropriate documents outlining rights and how to make a complaint for children and their parents.

Proposed Timescale: Q4 2016

Person Responsible: PSW C&F, PSW and Local Working Group

Action 1.1.3

The service will audit all open cases to identify the children and families that have not received the appropriate information leaflets in relation to rights and how to make a complaint.

Proposed Timescale: Q4 2016

Person Responsible: Team Leaders and Social Workers

Action 1.1.4

Information in relation to rights and how to make a complaint will be provided as appropriate to all children and families currently open to the service and identified as not having received such information as part of the audit under 1.1.3.

Proposed Timescale: Q4 2016

Person Responsible: PSW (C&F), Team Leaders and Social Workers

Action 1.1.5

Information will be given to all children and families at the initial point of social work intervention and compliance will be checked at monthly supervision meetings between PSW and Team Leaders

and supervision meetings between Team Leaders and Social Workers.

Proposed Timescale: Q4 2016

Person Responsible: Team Leaders and Social Workers

Action 1.1.6

The Area will develop a local leaflet for children and families to advise of the mechanisms by which they can access personal information to include advice on formal and informal mechanisms.

Proposed Timescale: Q4 2016

Person Responsible: PSW (CPNS) and local working group

Action 1.1.7.

Leaflet under 1.1.5 to be distributed to all children and families currently open to the service. From 1st September 2016 all new cases will receive this leaflet at the first point of social work intervention.

Proposed Timescale: Q4 2016

Person Responsible: Team Leaders and Social Workers, Local Working Group

Action 1.1.8

Joint working group between the area and Donegal to be established to create a local Records Management policy.

Proposed Timescale: Completed (5th April 2016 & 28th July 2016

Person Responsible: Area Manager Donegal, Area Manager Sligo/Leitrim/West Cavan

Action 1.1.9

The Records Management Policy will incorporate guidance and procedures for sharing information with service users throughout the period of Social Work intervention in addition to access to personal records for service users based on principles of ease of access and transparency.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, PSW (CPNS) and Local Working Group

Action 1.1.10

The joint working group will develop information leaflets for service users to accompany the Records Management Policy to be given to all service users.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, PSW (CPNS) and Local Working Group

Action 1.1.11

The joint working group will meet to develop an implementation plan for the Records Management Policy to include a meeting every 3 months to review and check compliance.

Proposed Timescale: Q4 2016 (followed by 3 monthly reviews)

Person Responsible: Area Manager, PSW (CPNS) and Local Working Group

Action 1.1.12

Implementation and compliance with the Records Management Policy will be monitored and reinforced via the local Practice Support Forum through case review, audit and case discussion.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, PSWs, Team Leaders, Social Workers, Practice Support Forum

Action 1.1.13

Management of non-compliance will be planned and addressed by the relevant line manager for the case in consultation with their own senior manager.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, PSWs, Team Leaders, Social Workers.

Standard 1.2

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The complaints register did not reflect if the complaint was resolved to the satisfaction of the complainant and was not always fully completed.

Action required:

Under **Standard 1.2** you are required to ensure that:
Children are listened to and their concerns and complaints are responded to openly and effectively.

Please state the actions you have taken or are planning to take:

Action 1.2.1

The structure of the current Complaints Register template will be updated to allow recording of the complainant's view of the outcome/resolution of the complaint.

Proposed Timescale: Completed 31st May 2016

Person Responsible: PSW C&F

Action 1.2.2.

The current complaints register will be updated to reflect the current status of open complaints and those recently completed.

Proposed Timescale: Completed 31st May 2016

Person Responsible: PSW C&F

Action 1.2.3

The status of ongoing complaints will be inserted as a standing item on Supervision agenda between the Area Manager and PSW and between PSW and Team Leaders.

Proposed Timescale: Completed 31st May 2016

Person Responsible: Area Manager, PSW (C&F)

Standard 1.3

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- No formal awareness initiatives had been undertaken to inform the public about the service and how to access it.
- There were no communications systems available within the service in order to assist children with sensory disabilities.

Action required:

Under **Standard 1.3** you are required to ensure that:
Children are communicated with effectively and are provided with information in an accessible format.

Please state the actions you have taken or are planning to take:

Action 1.3.1

The area will complete the current process of creating Child and Family Support Network Areas.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, Senior Manager- Partnership, Prevention & Family Support (PPFS), PSW Children & Families (C&F), CFSN Coordinators.

Action 1.3.2

Family Support providers and Social Work service within each Network Area will host an information evening for members of the public covering information on the role and function of Tusla Social Work and Family Support Services, new local Service Structure, details of services available, how to access services and how to report concerns about children.

Proposed Timescale: Q1 2017

Person Responsible: Senior Manager- Partnership, Prevention & Family Support (PPFS) and PSW Children & Families (C&F)

Action 1.3.3

Create a service directory for Sligo/Leitrim/West Cavan

Proposed Timescale: Completed 31st May 2016

Person Responsible: Senior Manager- Partnership, Prevention & Family Support (PPFS) and PSW Children & Families (C&F)

Action 1.3.4

Undertake a promotional campaign for the Directory of services with partner agencies to raise public awareness of the Services provided by Tusla including how to access them.

Proposed Timescale: Q4 2016

Person Responsible: Senior Manager (PPFS), CFSN Coordinators

Action 1.3.5

A working group will be established to investigate, develop and implement a communication system for children and families with sensory /physical disabilities within the service.

Proposed Timescale: Q1 2017

Person Responsible: Senior Manager PPFS

Action 1.3.6

In the interim advice to be sought from colleagues in the Sensory and Physical Disability Service as required on open cases children and/or parents with sensory and physical disabilities .

Proposed Timescale: Q3 2016

Person Responsible: PSW C&F, Team Leaders and Social Workers

Theme 2: Safe and Effective Services

Standard 2.1

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Children First (2011) was not consistently implemented.

Action required:

Under Standard 2.1 you are required to ensure that:

Children are protected and their welfare is promoted through the consistent implementation of Children First (2011).

Please state the actions you have taken or are planning to take:

Action 2.1.1

Workforce Learning & Development (WLD) department of Tusla West will conduct an audit of staff training records on the learning events module of the SAP system to identify the staff members who have not completed standardised Children First Training.

Proposed timescale: Q3 - 2016

Person responsible: Training & Development Officer WLD, Clerical Officer WLD.

Action 2.1.2

Following completion of the audit under 2.1.1 WLD will work with management and staff to ensure that all staff in Sligo, Leitrim, West Cavan have attended Children First Training.

Proposed timescale: Q4 - 2016

Person responsible: Training & Development Officer WLD, Clerical Officer WLD.

Action 2.1.3

Refresher training on Children First is to be provided to the four social work teams.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Training Officer WLD

Action 2.1.4

Implementation of Children First to be monitored through staff supervision and case audit.

Proposed Timescale: Immediate 31st May 2016

Person Responsible: Team Leaders and PSW C&F

Action 2.1.5

A local quality assurance framework will be agreed include timeframes for case audit and details of roles and responsibilities for workers at each level of the organisation.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Area Manager, Regional Manager – Quality, Risk and Service Improvement.

Action 2.1.6

Required remedial action and learning from audits will be implemented and monitored via the local Practice Support Forum, staff supervision and Management Team Meetings

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Area Manager, Regional Manager – Quality, Risk and Service Improvement, Area Manager, Team Leaders, Social Workers, Social Care staff.

Action 2.1.7

Recording mechanism and supporting systems to be created to ensure that all identified long term cases of neglect or cases where re referrals have been a feature will contain a chronology.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, PSW C&F, Regional Manager - Quality, Risk and Service Improvement, Team Leaders and Social Workers

Action 2.1.8

A mechanism for checking implementation of 2.1.7 will be included in the local quality assurance framework under 2.1.5.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, PSW C&F, Regional Manager – Quality, Risk and Service Improvement, Team Leaders and Social Workers

Action 2.1.9

Training regarding long term neglect will be provided to all social work staff.

Proposed Timescale: Q1 - 2017

Person Responsible: Work Force Learning and Development and PSW C&F

Action 2.1.10

In the meantime the Practice Support Forum will develop and issue practice guidance for social work intervention in neglect cases.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, Practice Support Forum

Action 2.1.11

The area will monitor the implementation of the practice guidance via the practice forum and staff supervision.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, Practice Support Forum

Action 2.1.12

The local Practice Support forum comprising of Area Manager, PSWs, Team Leaders and Intake workers will meet monthly from July 2016 to develop and ensure a unified approach to Social Work intervention across the region.

Proposed Timescale: Q3- 2016

Person Responsible: Area Manager, Practice Support Forum

Action 2.1.13

To contribute to the development of a unified approach the Practice Support Forum will develop a system for implementation and monitoring of National and local Policies and Procedures within the area.

Proposed Timescale: Q4- 2016

Person Responsible: Area Manager, Practice Support Forum

Standard 2.2

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Screening was not always in line with the Agency's own timeframes.
- There were delays in preliminary enquiries being undertaken.
- Not all cases were correctly categorized.

Action required:

Under **Standard 2.2** you are required to ensure that:

All concerns in relation to children are screened and directed to the appropriate service.

Please state the actions you have taken or are planning to take:

Action 2.2.1

Propose new structure regarding management of intake in order to ensure consistency in respect of timescales.

Proposed Timescale: Completed May 2016

Person Responsible: Area Manager

Action 2.2.2

Review of local implementation of procedures for screening and preliminary enquiries to identify reason for delay in the system.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW CPNS

Action 2.2.3

Develop plan to implement recommendations of the review under 2.2.2.

Proposed Timescale: Q4- 2016

Person Responsible: PSW C&F and Team Leaders

Action 2.2.4

Training in the application of the Threshold Document to be provided to social work staff team and partner agencies on 20th September 2016

Proposed Timescale: Q3 - 2016

Person Responsible: Senior Manager (PPFS) and PSW (C&F), Work Force Learning and Development Officer

Action 2.2.5

The impact of training re Threshold Criteria on service delivery will be monitored and reinforced via the Practice Support forum using case review and case discussion.

Proposed Timescale: Q4- 2016

Person Responsible: Area Manager, Practice Support Form.

Action 2.2.6

The service will ensure eligibility for services as per Threshold Criteria is recorded on Intake forms to ensure rationale for decision-making in this regard is explicit and can be tracked.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, Practice Support Form, Team Leaders, Social Workers.

Action 2.2.7

A current national recruitment campaign for Social Work graduates to be completed to assist with ensuring that vacancies in the local service are filled thereby ensuring the service has the capacity to complete all tasks within the timescales set out in the National Business Processes.

Proposed Timescale: Q3 2016

Person Responsible: National Recruitment Service, Human Resources Manager Tusla.

Action 2.2.8

Actions within existing Action Plan from file audit 2015 to be completed.

Proposed Timescale: Q4 2016

Person Responsible: PSW (C&F), Senior Manager (PPFS), Area Manager, Team Leaders, Social Workers

Standard 2.3

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Some children were placed on wait lists for services and therefore did not receive a timely and effective service.

Action required:

Under **Standard 2.3** you are required to ensure that:
Timely and effective actions are taken to protect children.

Please state the actions you have taken or are planning to take:

Action 2.3.1

Implement a new service structure with a dedicated intake/duty team resourced sufficiently to ensure children and families receive a service at the point of referral as duty social workers are tasked with assessing children when the threshold is met at the point of entering the service.

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, PSW (C&F), Senior Manager (PPFS), Team Leaders,

Action 2.3.2

When finalised, implement the national agreement of the framework between Local Area Pathway and Tusla social work services; this will alleviate waiting lists and response times for intervention by ensuring that referrals are directed to the appropriate service provider at the earliest opportunity.

Proposed Timescale: Q2 2017

Person Responsible: Area Manager, PSW (C&F), Senior Manager (PPFS)

Action 2.3.3

In the meantime the service to engage a competent and qualified private resource to complete all outstanding Initial Assessments.

Proposed Timescale: Completed 31st May 2016

Person Responsible: Area Manager, PSW (C&F),

Action 2.3.4

The area will ensure that all outstanding Initial Assessments are complete with the support of the private resource.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW (C&F),

Action 2.3.5

The area will engage the services of funded agencies to ensure that children on waiting lists for a family service are prioritised through monthly Resource Allocation Meetings in each existing patch area.

Proposed Timescale: Q3 2016 (30th September 2016 and each month thereafter)

Person Responsible: Area Manager, PSW (C&F), Senior Manager (PPFS)

Action 2.3.6

In the meantime the cases awaiting allocation to be reviewed on a fortnightly basis by TLs and discussed at supervision with PSW with a view to ensuring that high priority cases are allocated as a matter of priority and that family support cases considered as not requiring an Initial Assessment are being re directed to Meitheal or to the PPFS.

Proposed Timescale: Immediate 30th June 2016 and fortnightly thereafter

Person Responsible: Team Leaders, PSW C&F

Action 2.3.7

A sample of the waiting list of unallocated cases will be audited monthly pending formulation and implementation of a local quality assurance framework (2.1.5, 2.3.10) to ensure that appropriate interventions are recommended and that the correct priority has been applied to the case.

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: PSW C&F, PSW CPNS, Senior Manager (PPFS) and Area Manager

Action 2.3.8

Senior Manager for Partnership, Prevention and Family Support to take up position allowing current postholder to focus on the development of Child and Family Support Network Areas.

Proposed Timescale: Completed (30th June 2016)

Person Responsible: Area Manager

Action 2.3.9

Existing application for recruitment of an additional Child and Family Support Network Coordinator to be completed with a view to position being filled at the earliest opportunity – this will expedite the creation of Child and Family Support Network Areas to ensure all referrals receive a timely response from providers within each network area be it Social Work or Family Support.

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, Senior Manager (PPFS), HR Manager Tusla West, National Recruitment Service

Action 2.3.10

A formal policy incorporating procedures for the management of waiting lists to be developed, implemented and monitored.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, Senior Manager (PPFS), PSW C&F via Practice Support Forum.

Action 2.3.11

In the interim Waiting lists to be monitored as per 2.3.6 and 2.3.7

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, Senior Manager (PPFS), PSW C&F

Action 2.3.12

Actions within existing Action Plan from file audit 2015 to be completed.

Proposed Timescale: Q4 2016

Person Responsible: PSWs, Area Manager, Senior Manager (PPFS), Team Leaders, Social Workers

Standard 2.4

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Not all referrals were correctly prioritised.
- Meitheal was under utilised as a support service to families.
- Community support services were not available to all families.
- Referral rates to the family welfare conference service were low.
- Written family support plans were not in place for all families requiring them.
- Families were waiting for family support services.

Action required:

Under **Standard 2.4** you are required to ensure that:
Children and families have timely access to child protection and welfare services that support the family and protect the child.

Please state the actions you have taken or are planning to take:

Action 2.4.1

In addition to 2.3.1 training will be provided to the Intake team within the new service structure on the prioritisation of cases.

Proposed Timescale: Q4 - 2016

Person Responsible: Workforce Learning and Development and PSW C&F and CPNS

Action 2.4.2

Prioritisation of cases to be checked in supervision between PSW and TLs and Team Leaders and Social Workers through discussion and review of open cases.

Proposed Timescale: Q3 - 2016

Person Responsible: PSW (C&F), Team Leaders, Social Workers

Action 2.4.3

Rationale for changes in case priority agreed in supervision to be inserted on the client record within 1 week following the supervision session.

Proposed Timescale: Q3 - 2016

Person Responsible: PSW (C&F), Team Leaders, Social Workers

Action 2.4.4

Local Quality Assurance Framework under 2.1.5 to include a formal mechanism for monitoring and review of case prioritisation.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Area Manager, Regional Manager – Quality, Risk and Service Improvement.

Action 2.4.5

Review of local implementation of Meitheal with particular emphasis on interface with social work services to take place in order to develop a plan for more effective use of the process going forward

Proposed Timescale: Q4 2016

Person Responsible: Senior Manager (PPFS)

Action 2.4.6

Complete the establishment of the three Child and Family Support Network Areas.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, Senior Manager (PPFS), Network Co-ordinators

Action 2.4.7

Complete a needs assessment in each network area with a view to identifying gaps in service.

Proposed Timescale: Q1 2017

Person Responsible: Area Manager, Senior Manager (PPFS), Network Co-ordinators

Action 2.4.8

On identification of needs in each service area ensure appropriate services are put in place through retargeting of current resources or a process of commissioning new services.

Proposed Timescale: Q2 2017

Person Responsible: Area Manager, Senior Manager PPFS and Network Coordinators

Action 2.4.9

Complete existing process of commissioning family support services in CFSN area 2

Proposed Timescale: Q4 2016

Person Responsible: Area Manager and Senior Manager PPFS, CFSN Co-ordinator

Action 2.4.10

Complete existing process of the development of a market position statement to inform the development of a commissioning strategy for the region taking into account the needs of local communities.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, Senior Manager PPFS, PSW C&F, CFSN Co-ordinator, Regional Implementation Manager (PPFS).

Action 2.4.11

Establish a formal forum between the Family Welfare Conference Coordinator and Manager and Team Leaders to identify any issues that may be contributing to low referral rates with a view to ensuring that the FWC service is used appropriately going forward.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F

Action 2.4.12

Review referral rates and throughput of FWCs twice yearly.

Proposed Timescale: Q1 - 2017

Person Responsible: PSW C&F and FWC Coordinator

Action 2.4.13

Review of local Meitheal implementation to include the interface with Family Welfare Conferencing to help ensure clarity where both processes are positioned within the family support service.

Proposed Timescale: Q4 - 2016

Person Responsible: Senior Manager PPFS and Family Welfare Conference Coordinator

Action 2.4.14

An audit to be undertaken of all open family support cases to identify those without a Family Support Plan

Proposed Timescale: Q3 - 2016

Person Responsible: PSW C&F, Team Leaders

Action 2.4.15

Written Family Support Plans to be developed as per the National Business Processes on all open family support cases.

Proposed Timescale: Q4 - 2016

Person Responsible: Team Leaders and Social Workers

Action 2.4.16

The local Area has volunteered as a pilot site using new outcome, guidance and documentation to assist with the development and monitoring of Family Support Plans in addition to other plans of intervention. This will be launched at the Practice Support Forum on the 08.08.2016.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW C&F and Team Leaders, Regional Manager – Quality, Risk and Service Improvement.

Action 2.4.17

Implement the national agreement of the framework between Local Area Pathway and Tusla social work services; this should alleviate waiting lists and response times for intervention.

Proposed Timescale: Q2 - 2017

Person Responsible: Area Manager, Senior Manager (PPFS), PSW C&F and CFSN Coordinators

Action 2.4.18

Actions within existing Action Plan from file audit 2015 to be completed.

Proposed Timescale: Q4 - 2016

Person Responsible: PSWs, Area Manager, Senior Manager (PPFS), Team Leaders, Social Workers

Standard 2.5

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Not all initial assessments were completed in a timely manner and some had moved into the remit of a further assessment.
- There were delays in further assessments being carried out.

Action required:

Under **Standard 2.5** you are required to ensure that:

All reports of child protection concerns are assessed in line with Children First (2011) and best available evidence.

Please state the actions you have taken or are planning to take:

Action 2.5.1

Each month a report to be provided to TL's highlighting those assessments that are open beyond 21 days, allowing TL's to ensure that delays in completion are addressed with individual workers

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: Area Manager, PSW C&F and Team Leaders

Action 2.5.2

Delays in completion of initial assessments to be addressed in monthly supervision

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: Area Manager, PSW C&F, Team Leaders and Social Workers

Action 2.5.3

Implement new Initial, Comprehensive and Further Assessment templates from the Tusla Assessment Guidance Framework Document (2014)

Proposed Timescale: Q1 - 2017

Person Responsible: Area Manager, PSW C&F, Workforce Learning and Development

Action 2.5.4

Dedicated Intake team to be developed and training provided in the completion of Initial Assessments

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, PSW C&F, Workforce Learning and Development

Action 2.5.5

Implement the new service structure within which responsibility for completion of Further Assessments will rest with three community social work teams.

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, PSW C&F, Team Leaders

Action 2.5.6

Audit of open cases to be carried out to identify cases requiring Further Assessment so that any delays can be addressed.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Team Leaders and Social Workers

Action 2.5.7

Create a monthly reporting mechanism for TL's so that they can identify cases requiring Further Assessment and the length of time Further Assessments have been open.

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, PSW C&F, Raise Systems Administrator

Action 2.5.8

Delays in completion of Further Assessments to be addressed in monthly supervision between Team Leaders and Social Workers

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: Area Manager, PSW C&F, Team Leaders and Social Workers

Action 2.5.9

Template of cases indicating delays in completion of IA's and Further Assessments to be created and completed on a monthly basis indicating reasons for delay and outlining actions being taken to address the reasons for the delay.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Area Manager, Team Leaders

Action 2.5.10

Guidance to be issued to ensure reasons for delays in completion of assessments are made explicit on assessment documentation prior to sign-off by Team Leader.

Proposed Timescale: Q3 2016

Person Responsible: Area Manager, PSW C&F,

Action 2.5.11

Development and implementation of local Quality Assurance Framework (2.1.5) to include a mechanism for tracking assessment quality including checking whether Initial Assessments have been signed off in a timely manner and if there has been undue delay in decisions access to services.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Area Manager, Regional Manager – Quality, Risk and Service Improvement

Action 2.5.12

In the interim the Practice Support Forum will agree and implement practice guidance regarding sign-off on Initial assessment through discussion and review of a sample Initial Assessments from across the teams.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW C&F, Team Leaders and Intake Social Workers

Standard 2.8

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Few families who required them had family support plans in place.
- Access to community support services was not consistent throughout the service area.
- There were some delays in unallocated children and families receiving services.
- The rationale for decisions was not always clear.
- There was no system to easily identify the children for whom being at ongoing risk of significant harm was becoming a pattern.

Action required:

Under **Standard 2.8** you are required to ensure that:
Child protection and welfare interventions achieve the best outcomes for the child.

Please state the actions you have taken or are planning to take:

Action 2.8.1

An audit to be undertaken of all open family support cases to identify those without a written Family Support Plan.

Proposed Timescale: Q3 - 2016

Person Responsible: PSW C&F, Team Leaders, Social Workers

Action 2.8.2

Written Family Support Plans to be developed as per the National Business Processes on all open family support cases.

Proposed Timescale: Q4 - 2016

Person Responsible: Team Leaders and Social Workers

Action 2.8.3

Implement a pilot using new outcome, guidance and documentation to assist with the development and monitoring of Family Support and Child Protection Plans. This will allow for actions to be recorded against identified need, making rationale for intervention explicit

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW C&F and Team Leaders, Regional Manager - Quality, Risk and Service Improvement.

Action 2.8.4

A system to be put in place which identifies all children referred to the service and/or listed on CPNS more than two times.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW CPNS, PSW C&F, Team Leaders

Action 2.8.5

Cases referred to the service or listed on the CPNS more than 2 times to be formally reviewed within 2 weeks following identification under 2.8.4 to ensure patterns of abuse and neglect are identified and appropriate intervention is put in place.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW CPNS, PSW C&F, Team Leaders

Action 2.8.6

PSW to meet with TL's in addition to supervision to plan, monitor and review interventions in cases where patterns of abuse have been identified.

Proposed Timescale: Q3 - 2016

Person Responsible: PSW C&F and Team Leaders

Action 2.8.7

PSW C&F to attend Child Protection Review Conferences where children have been reviewed on more than two occasions in order to ensure that plans are adequately safeguarding the child and that appropriate action is taken in a timely manner.

Proposed Timescale: Q3 - 2016

Person Responsible: PSW CPNS and PSW C&F

Action 2.8.8

All current cases open to the service which have been listed on CPNS or referred to the service more than twice to be reviewed in order to identify any patterns of abuse.

Proposed Timescale: Q3 - 2016

Person Responsible: PSW CPNS and PSW C&F

Action 2.8.9

Required interventions emanating from review in 2.8.7. to be implemented.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW CPNS and PSW C&F

Standard 2.10

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Closure of cases was not consistently prioritised.
- Not all high priority cases were allocated.
- The identification and management of long term neglect cases was inconsistent.

Action required:

Under **Standard 2.10** you are required to ensure that:

Child protection and welfare case planning is managed and monitored to improve practice and outcomes for children.

Please state the actions you have taken or are planning to take:

Action 2.10.1

Establish and implement a written protocol including procedures for the closure of cases.

Proposed Timescale: Q1 - 2017

Person Responsible: Area Manager, PSW C&F, PSW CPNS, Practice Support Forum

Action 2.10.2

Pending implementation of protocol all current cases ready for closure to be identified and required actions taken to allow such cases to be closed in a timely manner.

Proposed Timescale: Q3 - 2016

Person Responsible: Team Leaders and Social Workers

Action 2.10.3

Timescales for cases ready for closure to be established and monitored by TL's in consultation with individual Social Workers in supervision.

Proposed Timescale: Q3 2016

Person Responsible: PSW C&F and Team Leaders

Action 2.10.4

High priority cases to be prioritised for allocation during the duty /intake process.

Proposed Timescale: Completed (30th April 2016)

Person Responsible: PSW C&F and Team Leaders

Action 2.10.5

The waiting list of unallocated cases to continue to be reviewed on a fortnightly basis to ensure that cases with high risk are allocated.

Proposed Timescale: Immediate (30th April 2016 and fortnightly thereafter)

Person Responsible: Team Leaders

Action 2.10.6

Social work Team Leaders to continue to review the case loads with the Social Worker during the supervision process as per Caseload Management Tool to ensure caseloads are at an appropriate and manageable level.

Proposed Timescale: Immediate (30th April 2016)

Person Responsible: Team Leaders

Action 2.10.7

The high priority cases awaiting allocation to continue to be reviewed on a fortnightly basis with a view to ensuring that such cases are allocated as a matter of priority.

Proposed Timescale: Immediate (30th April 2016)

Person Responsible: PSW C&F, Team Leaders

Action 2.10.8

Template for case chronology will be developed and implemented to help identify cases of long term neglect.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, Practice Support Forum.

Action 2.10.9

All open long term cases involving neglect will contain a chronology which will be analysed in supervision.

Proposed Timescale: Q4 - 2016

Person Responsible: Practice Support Forum, Team Leaders and Social Workers

Action 2.10.10

Training regarding long term neglect will be devised and provided to all social work staff.

Proposed Timescale: Q4 - 2016

Person Responsible: Work Force Learning and Development and PSW C&F

Action 2.10.11

Implementation and monitoring of outcomes document and associated guidance to allow clearer identification and management of long term neglect cases.

Proposed Timescale: Q4 -2016

Person Responsible: Practice Support Forum including Area Manager, Team Leaders and Social Workers.

Action 2.10.12

Local Quality Assurance framework to include a mechanism for ensuring chronologies are in place as appropriate.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Area Manager, Regional Manager – Quality, Risk and Service Improvement.

Standard 2.11

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Learning from serious incidents and National Review Panel reviews did not always lead to improvements in service provision.

Action required:

Under **Standard 2.11** you are required to ensure that:

Serious incidents are notified and reviewed in a timely manner and all recommendations and actions are implemented to ensure that outcomes effectively inform practice at all levels.

Please state the actions you have taken or are planning to take:

Action 2.11.1

A Practice Support Forum has been developed and its terms of reference will be revised to include identification and dissemination of learning from serious incidents and case reviews.

Proposed Timescale: Q3 - 2016

Person Responsible: Practice Support Forum, Regional Manager QRSI

Action 2.11.2

Workforce Learning & Development (WLD) will work with management and staff in Sligo, Leitrim, West Cavan to set up and agree terms of reference for a CPD Learning & Development Forum, to promote informal / self-directed learning activities such as those outlined in CORU – *Framework for Continuing Professional Development Standard and Requirement (2013)*. This vehicle will provide opportunity and space for reflection on practice initiatives and review of learning from serious incidents.

Proposed timescale:

Agree Terms of Reference and have first meeting by end of Q4 – 2016

Person responsible:

Training & Development Officer WLD, Clerical Officer WLD

Action 2.11.3

Supervision to address learning from serious incident reviews or reviews of complex cases to ensure learning is embedded in practice

Proposed Timescale: Q1 - 2017

Person Responsible: Area Manager, PSW C&F and Team Leaders

Action 2.11.4

Local interagency group of senior managers to be convened to address complex cases where levels of need cross several agency boundaries as per recommendation of National Review Panel

Proposed Timescale: Complete (May 2016)

Person Responsible: Area Manager and General Manager HSE

Action 2.11.5

Local workflows to be reviewed and modified in light of learning from serious incidents and case reviews.

Proposed Timescale: Q1 - 2017

Person Responsible: Area Manager, PSW CPNS, Senior Manager (PPFS),

Action 2.11.6

Implement National Incident Management System in the region including training for staff on incident reporting.

Proposed Timescale: Q4 - 2016

Person Responsible: National Quality Assurance Manager, Regional Manager - Quality, Risk and Service Improvement (QRSI), Area Manager, PSWs and Team Leaders.

Standard 2.12

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- There was a waiting list for assessment of adults of concern in the community.
- There was no system in place to identify institutional abuse.

Action required:

Under **Standard 2.12** you are required to ensure that:

The specific circumstances and needs of children subjected to organisational and/or institutional abuse and children who are deemed to be especially vulnerable are identified and responded to.

Please state the actions you have taken or are planning to take:

Action 2.12.1

A dedicated Social Work Team Leader is assigned to review the waiting list for adults that may pose a risk and prioritise the high risk cases for urgent assessment.

Proposed Timescale: Completed 18th April 2016

Person Responsible: Area Manager, PSW C&F and Team Leader

Action 2.12.2

Dedicated Team Leader to support community teams in undertaking stage 1 and stage 2 of adult assessments as per new national guidance to help ensure that those cases presenting highest risk are dealt with in a timely manner

Proposed Timescale: Immediate (31st May 2016)

Person Responsible: Dedicated Team Leader

Action 2.12.3

All assessments of adults who may pose a risk on the waiting list to be completed as per 2.12.1 and 2.12.2

Proposed Timescale: Assessments to begin immediately. Completion Q1 - 2017

Person Responsible: Dedicated Team Leader, Team Leaders and Social Workers

Action 2.12.4

Develop and implement existing local guidance to identify and manage institutional and organised abuse.

Proposed Timescale: Q4 - 2016

Person Responsible: Dedicated Team Leader and Practice Support Forum

Action 2.12.5

Develop and implement local protocol with Gardaí regarding the identification and management of institutional and organised abuse

Proposed Timescale: Q1 2017

Person Responsible: Dedicated Team Leader and Practice Support Forum, Gardaí Children First Liaison Officers

Action 2.12.6

Agree a system with Gardaí for monitoring and reviewing local implementation and guidance of protocol under 2.12.5 outlining roles, responsibilities and timeframes.

Proposed Timescale: Q1 - 2017

Person Responsible: PSW C&F, dedicated Team Leader and Practice Support Forum

Action 2.12.7

Continued participation in the local SORAM every 2 months (sex offenders risk assessment and management forum) to contribute to robust safety management for convicted offenders who may pose a risk to children.

Proposed Timescale: Completed (since 2015 all SORAM meetings attended by PSW C&F)

Person Responsible: PSW C&F

Theme 3: Leadership, Governance and Management

Standard 3.1

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- There was no system in place to ensure consistent implementation of all policies.

Action required:

Under **Standard 3.1** you are required to ensure that:

The service performs its functions in accordance with relevant legislation, regulations, national policies and standards to protect children and promote their welfare.

Please state the actions you have taken or are planning to take:

Action 3.1.1

A system for implementation and dissemination of policies will be developed in the Practice Support Forum to ensure that all Social Work staff are aware of the policies and procedures that inform their work in safeguarding and protecting children

Proposed Timescale: Q4 – 2016.

Person Responsible: Area Manager, Practice Support Forum

Action 3.1.2

Workforce Learning and Development to be enlisted to facilitate training and briefing sessions with PSW C&F, Team Leaders and Social Workers, Social Care Staff and admin ensuring that relevant policies and procedures are being revisited on an ongoing basis

Proposed Timescale: Q4 - 2016

Person Responsible: Workforce, Learning and Development, PSW C&F, Area Manager

Action 3.1.3

PSW C&F and Team Leaders to take one policy or procedure each month to discuss and review in their Team Meeting.

Proposed Timescale: Q3 2017 (September 2016 and monthly thereafter)

Person Responsible: PSW C&F, Team Leaders and Social Workers

Action 3.1.4

Local Quality Assurance Framework 2.1.5 to outline a mechanism for review of implementation of Policies and Procedures

Proposed Timescale: Q4 - 2017

Person Responsible: PSWs, Team Leaders, Area Manager, Regional Manager QRSL.

Action 3.1.5

Implement existing Practice Guidance Workflows derived from National Policies and Guidance on CPNS.

Proposed Timescale: Completed (Introduced and presented to SW teams December 2015; implement 30th June 2016)

Person Responsible: PSWs, Area Manager, Team Leaders, Social Workers.

Action 3.1.6

Develop Practice Guidance Workflows which reflect National Policies focussing on Intake, Initial Assessment and Further Assessment.

Proposed Timescale: Started and to be completed Q2 - 2017

Person Responsible: PSWs, Team Leaders, Area Manager.

Action 3.1.7

Monitor compliance with implementation of Practice Guidance workflows in monthly Supervision, Child Protection Conferences and Case Audit.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW (C&F), PSW (CPNS), Team Leaders, Regional Manager for QRSI.

Standard 3.2

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The service did not have a local statement of purpose and function.
- The service did not have a 2016 service plan.
- Risk identification and management systems were not robust.
- Not all communication systems were effective.
- The system in place to oversee the management of wait lists for assessments was not robust.
- The quality of leadership, supervision and the extent to which individuals were held to account was inconsistent.
- There was no clear strategy on how the recommendations from all the audits would be implemented.

Action required:

Under **Standard 3.2** you are required to ensure that:

Children receive a child protection and welfare service, which has effective leadership, governance, and management arrangements with clear lines of accountability.

Please state the actions you have taken or are planning to take:

Action 3.2.1

Develop a local statement of purpose and function which includes the basis in legislation for the service and its statutory functions; a description of the service and its objectives to include the alignment of resources and the model of service delivery

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, PSW C&F, PSW CPNS, Senior Manager (PPFS)

Action 3.2.2

Develop a 2016 Local Service Plan which is based on the Child and Family Agency Corporate Plan 2015-2017 and Business Plan 2016.

Proposed Timescale: Q3 2016

Person Responsible: Area Manager, PSW C&F, PSW CPNS, Senior Manager (PPFS)

Action 3.2.3

Local review of current risk register to ensure risk management plans are effective.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, Regional Manager QRSI

Action 3.2.4

Social Work staff to be briefed at the next Staff Meeting, with regard to the identification, reporting mechanism and management of risks as per National Policy

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW C&F, Team Leaders, Social Work staff, Regional Manager - Quality, Risk and Service Improvement.

Action 3.2.5

Monthly Management Team Meetings and regular Staff Meetings to be scheduled to include the provision of details to all Staff of any new service developments, Policies & Procedures, timescales for implementation and briefing sessions re same with the assistance of Workforce Learning and Development

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW C&F, Workforce, Learning and Development

Action 3.2.6

Develop and implement a local policy for the management of Waiting Lists including cases awaiting assessment.

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, PSW C&F, PSW CPNS

Action 3.2.7

The waiting list of unallocated cases to continue to be reviewed on a fortnightly basis to ensure that cases with high risk are allocated.

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: PSW C&F, Team Leaders

Action 3.2.8

The service to commission a competent and qualified private resource in the current absence of an internal resource to ensure completion of all outstanding Initial Assessments.

Proposed Timescale: Completed (31st May 2016)

Person Responsible: Area Manager.

Action 3.2.9

All outstanding Initial Assessments to be completed using private resource identified in 3.2.8

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, PSW C&F, private Resource

Action 3.2.10

The high priority cases awaiting allocation to continue to be reviewed on a fortnightly basis with a view to ensuring that such cases are allocated for assessment as a matter of priority.

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: PSW C&F, Team Leaders

Action 3.2.11

A sample of the waiting list of unallocated cases will be audited monthly to ensure that appropriate interventions are recommended and that the correct priority has been applied to the case pending formulation and implementation of a waiting list management policy.

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: PSW C&F and Area Manager

Action 3.2.12

A formal mechanism for quality assuring Priority Status will be included in the Quality Assurance Framework proposed in 2.1.5

Proposed Timescale: Q4- 2016

Person Responsible: Area Manager, PSW C&F, PSW CPNS, Regional Manager QRSI, Team Leaders,

Action 3.2.13

Under the Child and Family Support Network Areas Service Allocation Meetings will be scheduled as needed to ensure a timely intervention for children and families and prevent children from being placed on a waiting list for services.

Proposed Timescale: Q1- 2017

Person Responsible: Team Leaders, Duty Social Workers, Child and Family Support Network Co-ordinator

Action 3.2.14

An independent and thorough review of waiting lists to be completed every 4 months similar to that carried out by PSW CPNS in December 2015 to ensure consistency in waiting list management and to ensure consistent application of new policy across teams.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW CPNS,

Action 3.2.15

All Cases waiting over three months to be reviewed every 2 months by Senior Managers to help ensure waiting lists are being managed appropriately by frontline staff and that no child is left in a situation of risk – pending formulation and implementation of Waiting List management policy

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: Area Manager, PSW C&F,

Action 3.2.16

External review of implementation of Supervision Policy to be undertaken.

Proposed Timescale: Q4 - 2016

Person Responsible: Regional Manager, Quality, Risk and Service Improvement

Action 3.2.17

Formal Leadership and Management Training to be provided for those staff who have not yet had the opportunity to avail of such training.

Proposed Timescale: Q2 - 2017

Person Responsible: Area Manager, PSW C&F, Workforce Learning and Development

Action 3.2.18

Annual performance appraisal mechanism to be implemented to contribute to Performance Development Plans for each individual worker.

Proposed Timescale: Q1 - 2017

Person Responsible: Regional Director, Area Manager, Workforce learning and Development.

Action 3.2.19

Completion of existing service Action Plan in response to 2015 audit to be monitored in Senior Management Team Meetings and Local Management Team meetings with a view to ensuring a clear implementation plan towards compliance with timeframes.

Proposed Timescale: Q3 - 2016

Person Responsible: PSW C&F, Team Leaders, Senior Manager (PPFS), Social Work staff

Action 3.2.20

New tracking template to be used to allow agreed actions from audits to be tracked in terms of completion allowing local management to identify actions which are due or out of date and take necessary remedial action.

Proposed Timescale: Q 3 2016

Person Responsible: PSW C&F, Senior Manager (PPFS), Team Leaders, Area Manager

Action 3.2.21

Briefing to be provided to all staff re use of new tracking mechanism.

Proposed Timescale: Q4 2016

Person Responsible: PSW C&F, Team Leaders,

Standard 3.3

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The recommendations from audits and reviews were not consistently implemented or monitored.

Action required:

Under **Standard 3.3** you are required to ensure that:

The service has a system to review and assess the effectiveness and safety of child protection and welfare service provision and delivery.

Please state the actions you have taken or are planning to take:

Action 3.3.1

Implement a pilot using new outcome, guidance and documentation to assist with the development and monitoring of Family Support and Child Protection Plans. This will allow for actions to be recorded against identified need, making rationale for intervention explicit.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW C&F, Senior Manager (PPFS) and Team Leaders

Action 3.3.2

A system to be put in place which identifies all children referred to the service and/or listed on CPNS more than two times; such cases to be subject of formal review by the PSW to ensure patterns of abuse and neglect are identified and appropriate intervention is put in place.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager, PSW CPNS and PSW C&F

Action 3.3.3

PSW to meet with TLs in supervision to plan, monitor and review interventions in cases where patterns of abuse have been identified

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: PSW C&F and Team Leaders

Action 3.3.4

Implementation of learning from reviews to be led and monitored via Practice Support Forum.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Team Leaders, Senior Manager (PPFS)

Theme 4: Use of Resources

Standard 4.1

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Staff resources were not always efficiently deployed when on duty.
- Some of the accommodation was unsuitable to support the delivery of a quality service.
- The Meitheal service was under-utilised.

Action required:

Under **Standard 4.1** you are required to ensure that:

Resources are effectively planned, deployed and managed to protect children and promote their welfare.

Please state the actions you have taken or are planning to take:

Action 4.1.1

Re structure the social work department to one dedicated duty/intake team and three community teams to ensure that the 'front door' is managed effectively from 9:00-17:00 Monday – Friday by a duty social worker whose main task is to screen, carry out preliminary checks and complete initial assessments which will alleviate the issue of social workers 'on duty' working on their own cases during their scheduled duty time.

Proposed Timescale: Q4 - 2016

Person Responsible: Area Manager, PSW C&F, Duty Team Leader, Duty Social Workers

Action 4.1.2

Pending service restructure social workers rostered to carry out duty/intake will use the time to work cases that are on the waiting list which may result in completion of initial assessments, and /or closure or redirection of the case to other agencies

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: PSW C&F, Team Leaders, Duty Social Workers

Action 4.1.3

Complete current process to move Carrick on Shannon team to identified alternative accommodation.

Proposed Timescale: Q1 - 2017

Person Responsible: Tusla Estates, Regional Director, Area Manager, Regional Business Manager.

Action 4.1.4

Review of local implementation of Meitheal with particular emphasis on interface with social work services to take place in order to develop a plan for more effective use of the process going forward

Proposed Timescale: Q4 - 2016

Person Responsible: Senior Manager (PPFS)

Theme 5: Workforce

Standard 5.1

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Personnel files did not contain all the required documentation.
- Not all staff files included evidence of up-to-date professional registration as appropriate.

Action required:

Under **Standard 5.1** you are required to ensure that:
Safe recruitment practices are in place to recruit staff with the required competencies to protect children and promote their welfare

Please state the actions you have taken or are planning to take:

Action 5.1.1

An audit will be carried out to ascertain what documentation regarding probationary reports and professional development is not on file and to ensure the required documentation is placed on each personnel file.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager PA.

Action 5.1.2

Audit personnel files held in Sligo to check if they contain up-to-date Coru registration.

Proposed Timescale: Completed and all up to date 31st May 2016

Person Responsible: Area Manager PA

Action 5.1.3

Audit remaining personnel files held in office in Merchants Quay to ensure files without up to date Coru registration are identified followed by steps to ensure all are up to date.

Proposed Timescale: Q3 - 2016

Person Responsible: Area Manager PA.

Standard 5.2

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The area was significantly under-staffed.
- Contingency plans for staff shortfalls were ineffective.

Action required:

Under **Standard 5.2** you are required to ensure that:
Staff have the required skills and experience to manage and deliver effective services to children.

Please state the actions you have taken or are planning to take:

Action 5.2.1

Approval for filling of all vacant social work posts is in place and positions will continue to be offered via NRS to the National panel.

Proposed Timescale: Completed (weekly meetings held by Tusla Employment Monitoring Group to approve like for like SW posts since January 2016)

Person Responsible: Area Manager, PSW C&F, NRS, Regional HR Manager

Action 5.2.2

In order to free up social workers to undertake assessments and statutory duties a number of social care workers will continue to be employed to carry out supervision of access, parenting assessments, direct work with children and accompany social workers to home visits where a second staff member is needed.

Proposed Timescale: Completed 30th April 2016

Person Responsible: PSW C&F

Action 5.2.3

Suitable Students interested in working in Sligo Leitrim West Cavan about to Graduate in Social Work as identified through Tusla visits to career open days in Queens University, Magee Derry and Trinity College Dublin will be offered project work pending their Coru registration to ensure all current vacant Social Work positions are filled.

Proposed Timescale: Q3 - 2016

Person Responsible: Tusla HR Management

Action 5.2.4

Establish a running recruitment campaign for PQSWs on Tusla recruit website

Proposed Timescale: Completed 30th April 2016

Person Responsible: Tusla recruitment

Action 5.2.5

All risks regarding staff deficits and recruitment strategies to be managed through monthly review by local Senior Management Team and quarterly review at Performance Review Meetings.

Proposed Timescale: Completed 31st May 2016

Person Responsible: Area Manager, Q&A Manager, PSWs, Regional Director, Regional HR Manager, Quarterly Performance Management Forum.

Standard 5.3

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The quality of supervision varied.
- The recording of supervision required standardisation.
- Not all staff had personal development plans in place.

Action required:

Under **Standard 5.3** you are required to ensure that:

All staff are supported and receive supervision in their work to protect children and promote their welfare.

Please state the actions you have taken or are planning to take:

Action 5.3.1

Tusla Supervision Policy to be revisited with Team Leaders and PSW C&F regarding its implementation across the four community teams in the social work department, using the sample templates for recording and addressing the four functions of Supervision, ensuring clarity regarding the role and responsibility of managers

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F, Team Leaders

Action 5.3.2

Audit of Supervision files to be undertaken to ensure consistency and clarity of recording on standard pro forma, presence of supervision contract and schedule.

Proposed Timescale: Q4 2016

Person Responsible: PSW C&F, Regional Manager - Quality, Risk and Service Improvement

Action 5.3.3

Audit of supervision files to be carried out to ascertain evidence of PDP.

Proposed Timescale: Q4 - 2016

Person Responsible: PSW C&F

Action 5.3.4

Workforce Learning & Development will assist and support management and staff in providing information i.e. National briefing on the Tusla National Strategy for Continuing Professional Development, which includes guidance on policy requirements in respect of conducting Personal Development Planning with all staff six monthly.

Proposed timescale: Q4 2016

Person Responsible: Training and Development Officers WLD.

Standard 5.4

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Attendance at training was not always prioritised.
- Not all staff were trained in Children First (2011).

Action required:

Under **Standard 5.4** you are required to ensure that:
Child protection and welfare training is provided to staff working in the service to improve outcomes for children.

Please state the actions you have taken or are planning to take:

Action 5.4.1

Importance of prioritising training to be outlined at Staff Meeting 13th September 2016, in the context of professional development and CORU registration

Proposed Timescale: 13th September 2016

Person Responsible: PSW C&F

Action 5.4.2

PSW C&F will meet with the Regional Workforce Development Manager to agree the training requirements for 2016. These requirements will be based on the existing Training Needs Analysis as well as new training needs

Proposed Timescale: Q4 2016

Person Responsible: PSW C&F, Regional Manager WLD

Action 5.4.3

Refresher training on Children First is to be provided to the four social work teams.

Proposed Timescale: Q4 - 2016

Person Responsible: Work Force Learning and Development

Action 5.4.4

Implementation of Children First to be monitored through staff supervision and case audit

Proposed Timescale: Immediate (30th June 2016)

Person Responsible: Team Leaders and PSW C&F

Action 5.4.5

Data provided for the inspection indicated that 91% of staff had received multi-disciplinary training in Children First 2011. Workforce Learning & Development (WLD) will conduct an audit of staff training records on the learning events module of the SAP system to identify the staff members that have not completed standardised Children First Training, following completion of this audit, WLD will work with management and staff to ensure that all staff in Sligo, Leitrim, West Cavan attend Children First Training.

Proposed timescale: Q4 2016

Person Responsible: Training and Development Officers WLD.

Theme 6: Use of Information

Standard 6.1

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The level to which the available information was used in planning differed at different levels of the service.
- There was no consistent approach to clients accessing their information and staff were not clear about the policies and procedures regarding accessing personal information.

Action required:

Under **Standard 6.1** you are required to ensure that:

All relevant information is used to plan and deliver effective child protection and welfare services.

Please state the actions you have taken or are planning to take:

Action 6.1.1

The area will collect and collate performance and activity data, including that required under the measuring the pressure system. This information will be reviewed at regional performance meetings and area management meetings on a quarterly basis. This will inform decision making and planning of services.

Proposed Timescale: Completed (Data collated since 2012, Tusla West Regional Planning day held 18th February 2016; Quarterly performance meetings being held, last one May 2016)

Person Responsible: Area Manager, PSW C&F

Action 6.1.2

The Area will circulate performance and activity data to front line management for review and analysis at local team level. This will be reviewed and discussed at monthly management team meetings and Practice Support Forum to inform the service planning and needs analysis for the department

Proposed Timescale: Q3 2016

Person Responsible: Area Manager, PSW C&F, Team Leaders

Action 6.1.3

The Area will ensure that all childcare performance and activity data is co-ordinated and validated by the childcare information officer prior to dissemination.

Proposed Timescale: Q4 2016

Person Responsible: Area Manager, Information Officer.

Action 6.1.4

Freedom of Information training will be sourced from the Consumer Affairs Manager and cascaded to all frontline staff. This will guide all Child Protection and Welfare staff in supporting service user requests to view their information. This will enhance the service user's rights to access that information through the mechanisms of the Freedom of Information Act or through an informal process.

Proposed Timescale: Q4 2016

Person Responsible: PSW C&F

Action 6.1.4

Development of local Policy and Practice Guidance Workflow re record management and accessing/sharing file information with service users.

Proposed Timescale: Q4 2016

Person Responsible: PSW C&F, PSW CPNS, Area Manager

Action 6.1.5

Information leaflets to be developed advising children and families how to access their file, including their right to access information without having to make a formal request under the Freedom of Information legislation.

Proposed Timescale: Q4 2016

Person Responsible: Social (Care) Workers/Leaders, Team Leaders, Senior manager PPFS

Standard 6.2

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The information system was not robust.

Action required:

Under **Standard 6.2** you are required to ensure that:

The service has a robust and secure information system to record and manage child protection and welfare concerns.

Please state the actions you have taken or are planning to take:

Action 6.2.1

The impending National Child Care Information System information system is being prepared via a National project and will replace the current client information system in the area.

Planning meetings are attended to ensure NCCIS will be able to generate statistics to assist in gathering relevant information needed to improve service provision

Proposed Timescale: Q2 2017

Person Responsible: Area Manager, NCCIS working group

Action 6.2.2

A continuous system of file audit will be developed as part of the local Quality Assurance Framework described under 2.1.5 to help ensure file records are comprehensive and up-to-date.

Proposed Timescale: Q4 2016

Person Responsible: PSW C&F, Team Leaders, Social Workers

Standard 6.3

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Files were not all up to date.
- Chronologies were not routinely kept on files.

Action required:

Under **Standard 6.3** you are required to ensure that:
Secure record-keeping and file management systems are in place to manage child protection and welfare concerns

Please state the actions you have taken or are planning to take:

Action 6.3.1

Children's file records will be reviewed to ensure that they are well maintained and contain relevant documents, including family support plans, child protection plans, up to date case notes and chronologies.

Proposed Timescale: Q4 2016

Person Responsible: PSW C&F, PSW CPNS

Action 6.3.2

All identified long term cases of neglect or cases where re referrals have been a feature will contain a chronology which will be analysed in supervision

Proposed Timescale: Q4 2016

Person Responsible: Team Leaders and Social Workers

Action 6.3.3

A continuous system of file audit will be developed as part of the local Quality Assurance Framework proposed in 2.1.5 to help ensure file records are comprehensive and up-to-date.

Proposed Timescale: Q 4 2016

Person Responsible: PSW C&F, Team Leaders, Social Workers