

Health Information and Quality Authority (HIQA) Regulation Directorate monitoring inspection report of Tusla social work role under the Child Care (placement of Children in Residential Care) Regulations, 1995 (22 – 25)

Name of provider:	The Child and Family Agency, Tusla
Tusla Region:	West
Tusla Service Area:	Galway/Roscommon
Type of inspection:	Announced
Date of inspection:	18 -20 May 2022
Fieldwork ID:	0036761

HIQA is authorised by the Minister for Children, Equality, Disability, Integration and Youth under Section 69 of the Child Care Act, 1991 as amended by Section 26 of the Child Care (Amendment) Act 2011 to inspect children's residential centres provided by the Child and Family Agency (Tusla)¹ and to report on its findings to the Minister for Children, Equality, Disability, Integration and Youth.

This inspection relates specifically to the statutory duties of Tusla social workers in the monitoring of placements for children in residential care, to which the Child Care (Placement of Children in Residential Care) Regulations 1995 (22, 23, 24 and 25), apply.

¹ Tusla was established 1 January 2014 under the *Child and Family Agency Act 2013.*

How we inspect

As part of this inspection, inspectors met with the relevant social work managers with responsibility for children in care and evaluated the respective regulations as listed above.

The key activities of this inspection involved:

- the analysis of data submitted by the area
- interviews with:
 - o the area manager
 - the relevant principal social workers
 - o the independent chair for child-in-care reviews
- focus groups conducted remotely with:
 - social work team leaders
 - social workers
- the review of:
 - local policies and procedures, minutes of various meetings and case management records
 - o a sample of 5 children's case records.

1 child and two parents spoke with inspectors.

Acknowledgements

The Authority wishes to thank the staff and managers of the service for their cooperation with this inspection.

The Child and Family Agency

Child and Family services in Ireland are delivered by a single dedicated State agency called the Child and Family Agency (Tusla), which is overseen by the Department of Children, Equality, Disability, Integration and Youth. The Child and Family Agency Act 2013 (Number 40 of 2013) established the Child and Family Agency with effect from January 2014.

Tusla has responsibility for a range of services, including:

- child welfare and protection services, including family support services
- existing Family Support Agency responsibilities
- existing National Education and Welfare Board responsibilities
- pre-school inspection services
- domestic, sexual and gender-based violence services.

Tusla has the legal responsibility to promote the welfare of children and protect those who are deemed to be at risk of harm.

Tusla services are organised into 17 service areas which are managed by area managers. These areas are grouped into six regions, each with a regional manager known as a chief officer.

Service Area

The Tusla Galway Roscommon service area is one of the 17 areas within Tusla. The geographical county of Galway is divided into two distinct administrative areas: Galway city and County Galway. Measuring 6,149 square kilometers, County Galway is the second largest county in Ireland. At 2,648 square kilometers, County Galway city has been Ireland's most rapidly developing urban area and is the only city in Ireland to have experienced above average population growth during 1996-2016. County Galway incorporates the single largest and most populous Gaeltacht area in the country; the area is home to 9,445 people who speak Irish daily (CSO 2017) when combined with predominantly Irish speaking offshore islands. Roscommon is the 11th largest county by area and is predominantly rural in character. Athlone town, which is partly located within the county, acts as a service centre for the south of the county. The northern part of the county is influenced by proximity to Sligo and Leitrim.

The Galway/Roscommon area is one of the four Tusla areas within the West. The Region is under the direction of a chief officer. The area management structure of the children in care and child care review services is, an area manager and two principal social workers managing teams comprising of social work team leaders, social workers, social care leaders and a children in care reviewing officer.

There are four children in care teams across the two counties – three teams in Galway city and county and one team in Roscommon The children in care teams are based across both counties in co-located office accommodation in Galway City, Oughterard, Tuam, Loughrea and Ballinasloe in Co. Galway and in Boyle, Castlerea and Roscommon town in Co. Roscommon. At the time of the inspection, there were a total of 363 children in care, 8 of whom were in residential placements with non-statutory providers.

Compliance classifications

Inspectors will judge whether the service has been found to be **compliant**, **substantially compliant** or **not compliant** with the standards and regulations associated with them.

The compliance descriptors are defined as follows:

- **Compliant**: A judgment of compliant means the service is in full compliance with the relevant regulation and is delivering a high-quality service which is responsive to the needs of children.
- Substantially compliant: A judgment of substantially compliant means the service is mostly compliant with the regulation but some additional action is required to be fully compliant. However, the service is one that protects children.
- Not compliant: a judgment of not compliant means the service has not complied with a regulation and that considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of children using the service will be risk-rated red (high risk) and the inspector will identify the date by which the provider must comply. Where the non-compliance does not pose a significant risk to the safety, health and welfare of children using the service, it is risk-rated orange (moderate risk) and the provider must take action within a reasonable time frame to come into compliance.

Once a judgment on compliance is made, inspectors will review the risk to children of the non-compliance.

In order to summarise inspection findings and to describe how well a service is doing, the regulations are grouped and reported under the dimension of quality and safety of the service.

Quality and safety of the service:

The quality and safety dimension relates to regulations that govern how services should interact with children and ensure their needs are planned for and met. The regulations include consideration of planning, review, visiting children and recording. They look to ensure that children are safe and supported throughout their engagement with the service.

This inspection was carried out during the following times:

Date	Times of inspection	Inspector	Role
18 May 2022	09:30hrs – 17:00hrs (onsite)	Sabine Buschmann	Inspector
	10:00hrs – 17:00hrs (onsite)	Hazel Hanrahan	Inspector
19 May 2022	14:00hrs – 17:00hrs (remote)	Hazel Hanrahan	Inspector
20 May 2022	08:30hrs - 17:00hrs (onsite)	Sabine Buschmann	Inspector

Views of people who use the service

As part of the inspection, inspectors spoke with one child in residential care and two parents of children in residential care and their experiences varied. One parent described the positive impact of the service on their child as:

"seen great improvement"
"(social Worker) doing brilliant job"
"all come together to assist (child) and helped (the child)".

This parent told inspectors that they were given every opportunities to share their views and that their child was given 'every opportunity to speak'.

The second parent and their child, who spoke with inspectors, were less positive about their experience with the social work department. The child was positive about the social worker's visits to them at their placement and said they were kept safe. However, both the child and their parent told inspectors that they 'don't feel listened to' by the social worker. They said they felt they 'were not made aware of updates' and said they 'can't get hold of social worker' when they needed to speak to them. The principal social worker was aware of this family's concerns.

Quality and safety

Data submitted by the area showed that there were 8 children placed in residential care at the time of the inspection. This accounted for 2.2% of the total number of children in care in the area. Inspectors reviewed five children's case records for care planning, reviews, supervision and visiting children and the quality of case records, to inspect the service areas compliances with the Child Care (Placement of Children in Residential Care) Regulations, 1995.

A care plan is a written document which outlines the plan for the child's care based on an assessment of the child's needs. The regulations require that each child placed in residential care has a written and up-to-date care plan, which clearly outlines the aims and objectives of their placement and the supports to be provided by Tusla to the child, their parents (where appropriate) and the residential centre. This plan should include contact arrangements between the child and their family and the arrangements in place to review the plan at different intervals throughout the child's time in care.

Data provided to HIQA by the area showed that all children who were placed in residential care in the Galway/Roscommon service area had an up-to-date written care plan. This was consistent with the findings of this inspection, which found that all five cases sampled had an up-to-date written care plan for children. Where possible, care plans were drawn up as soon as the need for a residential care placement was identified. When this was not achievable, for example, in circumstances of an emergency admission to care, care plans were completed as soon possible or prior to the child's first care review (within two months of placement), in line with the service's procedures.

All care plans reviewed were of good quality and contained details about the child's assessed needs including the child's identity, culture, religion, education, health, family and social relationships. Care plans also included details when the next review would take place and of arrangements for contact between the child in care and their families. Inspectors found there were good levels of consultation and participation in the development of children's care plans and the standard template in place for social workers ensured that the views of children, their parents and other relevant professionals were clearly recorded.

Inspectors found good practice in relation to multi-agency working and professional collaboration and this supported the planning and delivery of care. Care plans reviewed by inspectors recorded the therapeutic, educational and health supports provided for children, as well as inter-agency working for children with complex needs, which included mental health, disability and other specialist services. Through a review of files inspectors found there was regular consultation and partnership working between social workers and residential care managers and other health professionals which helped ensure that children experienced good quality care and that they were safe and supported.

The regulations require that once a care plan is developed, its content should be shared with the manager of the residential centre the child is placed in, and where possible, the child and their parents and or legal guardians. Inspectors reviewed case records to confirm these plans were consistently shared and found that while some clearly recorded that the care plan was sent out to the relevant persons, this was not always recorded.

Each child placed in residential care should have their case reviewed in line with the regulations. The main process in place in Tusla to do this is called a child in care review. Through this process, the child's allocated social worker assesses progress for the child and identifies whether or not their needs are being met in their current placement. The social worker ensures that the child's care plan is being adhered to and any changes required to this plan are made during this review. The regulations place a statutory duty on the social worker to ensure these reviews take place within specific timeframes and that all relevant people are invited, prepared and participate in the review process. It is particularly important for the child to participate and be consulted so their views and experiences can be considered when updating their care plan.

Inspectors sampled five children's case records for the purpose of examining timeliness and quality of the child in care reviews. Inspectors found that all children had a review meeting which was completed within the regulatory timeframes.

Case records demonstrated that children were encouraged and facilitated by the service area to participate and contribute to their care plan review. Inspectors found that, where age appropriate, children attended their review, or if they chose not to attend, they completed a review form which detailed their views and opinions, this was then shared at the review meeting.

Care plan review records showed that managers and staff from the residential centres attended child in care reviews as did parents, guardian's ad litem (court appointed advocates for the child) and other professionals involved in the child's care. The views of those in attendance were well recorded. Clear decisions were noted with persons responsible and timeframes for actions to be completed.

In exceptional circumstances where children aged 12 and under are placed in residential care centres, national policy states that statutory children in care reviews should be held monthly, to ensure residential care remains the most appropriate placement for them. Inspectors reviewed one child who was aged under 12 and found that their child in care review was not held on a monthly basis, as required. While a reason for not holding monthly reviews, that the area was trying to source an appropriate and stable placement for the child, was documented on the child's case record by the principal social worker, this was not resolved when a placement was found. When a suitable placement was sourced, child in care reviews were held more frequent (three reviews in five months) but they were still not in line with policy.

The management and oversight of care planning and reviews for children in residential care was effective. Inspectors reviewed case supervision records on children's files and social work team leader oversight of case work undertaken by social workers with children in residential care. There were self-audits and checklist tools completed that supported social workers to quality assure their own practice and to monitor compliance with the regulations. Overall, inspectors found that children in residential care received a coordinated service response.

When a child has been placed in a residential centre, a Child and Family Agency (Tusla) social worker is responsible for the care of the child. Their primary aim is to ensure the child is safe and supported in their placement. The regulations state that the supervising social worker should visit the child at different intervals, according to the length of time they are in their placement, and ensure that their care plan is being followed through and reviewed as necessary, and that the child's needs are being met. Each of the children in residential care had an allocated social worker. Inspectors found that all five children whose cases were reviewed, were visited within the time frames set out in the regulations.

Visits to children were generally recorded on a standard visit template or as a case note on the National Child Care Information System (NCCIS). Records showed that additional visits to children in their placements also took place outside of the requirements as needed. Examples of these included visiting in response to the child's request to see their social worker, direct work being completed with the child by their social worker or a social work visit in response to a concern or incident. All records of statutory visits to children reviewed by inspectors were of good quality and provided clear detail of the purpose of the visits, the discussions with children about their placement, school, family and any other issues that the child wanted to talk about.

The regulations require records of statutory visits by social workers to children to be entered into the case record and these should include particulars of any action taken as a result of the visit. Records reflected the work conducted by social workers with the children placed in residential care. This work included having discussions with children about significant events in their lives, helping children to prepare for attendance at child in care review meetings and explaining to them about decisions made at care plan meetings. Notwithstanding that one child told inspectors that they did not feel listened to by their social worker, inspectors found through review of records, that there was evidence that social workers had good working relationships with the children they were allocated to.

Case records document the child's time in care, support effective planning for the child and record how the views of the child are sought and considered, when decisions about their care are being made. The regulations require that each child placed in residential care has an individual case record which is compiled by Tusla and is kept up-to-date. These records should be private, permanent and secure, hold all relevant and available information about the child and be held in perpetuity. Inspectors found that information about children was held on Tusla's electronic system, the national integrated information system (NCCIS). Children case records were accessible, retrievable and available for monitoring by inspectors.

Inspectors reviewed five files for the purpose of examining compliance with regulation 22, case records, and found that all records required, such as significant events, care plans, birth certificates, court orders, medical and school reports amongst others, were retained and accessible in individual children's files. However, inspectors found that relevant documents were saved in different locations on the system and this made the process of navigating the system and finding documents difficult at times.

Case records are required by regulation to be up-to-date, and inspectors found that this was not always the case. Inspectors found that case records, statutory visit templates and case supervision records were not always up-loaded in a timely manner onto children's files on NCCIS. In addition, there was inconsistent practice in relation to the naming and saving of documents. Managers who met with inspectors acknowledged that there were inconsistencies in relation to recording and/or naming and saving documents on NCCIS. They told inspectors that all issues identified with the system were brought to the attention of the NCCIS liaison support person who provided ongoing training and support to the teams to address these.

Regulation 22 Case records	Judgment
	Substantially compliant

The area had a case records for each child placed in residential care. Records were up-to-date and accessible and kept in line with the requirements of the regulations. However, Inspectors found that case records, statutory visit templates and case supervision records were not always up-loaded in a timely manner onto NCCIS. In addition, there was inconsistent practice in relation to the naming and saving of documents on children's records.

Regulation 23 Care plan	Judgment
	Compliant

Care plans were up to date and set out all the required information in relation to the child, in line with the regulations.

Regulation 24 Supervision and visiting of children Judgment	
	Compliant
All children in residential care had an allocated social worker	and all children whose
cases were reviewed were visited within the time frames set	out in the regulations.
Regulation 25 Review of cases	Judgment
	Compliant
Children whose case records were reviewed in the area had a	a child in care review
which was completed within the regulatory timeframes.	

Compliance plan

This action plan has been completed by the Provider and HIQA has not made any amendments to the returned Compliance Plan.

Provider's response to	MON-0036761
Inspection Report No:	
Name of Child and Family	West
Agency (Tusla) region:	
Name of Child and Family	Galway/Roscommon
Agency (Tusla) service area:	
Date of inspection:	18 -20 May 2022
Date of response:	27 th July 2022

These requirements set out the actions that should be taken to meet the identified childcare regulations.

Regulation 22: Case Record

Judgment: Substantially Compliant

The provider is failing to meet the regulations in the following respect:

Case records, statutory visit templates and case supervision records were not always up to date. In addition, there was inconsistent practice in relation to the naming and saving of documents on children's records.

Action required:

Under **Regulation 22** the service area is required to ensure that:

A case record of every child placed in residential care by it is compiled and the said record shall be kept up to date.

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

Actions Taken/Planned	Person	Completion
Actions Taken/Planned	Responsible	Date
Statutory Visit Documentation Although a statutory visit template	PSW- Children	30/09/2022
has been developed locally, the Area acknowledges that this has been used inconsistently across Galway and Roscommon.	in Care Galway.	
It is the understanding of the local Area that a national statutory visit template is being developed and integrated into the NCCIS 2 platform.		
In the interim, the management team will ensure all social work teams will utilise the local template when completing statutory visits to children in residential care.		
The Galway\Roscommon NCCIS User Liaison Team will provide guidance to staff on how this template is to be recorded accurately on NCCIS.	NCCIS User Liaison -Social Work Team Leader	

2. <u>Supervision Records</u>	
The local management team conduct an audit on all super records of children in resident over the previous 12 months. This audit will focus on identification and seek ensure that supervision record document the full set of circumstances for the children residential care.	in Care Galway in Care Galway PSW- Children in Care Roscommon fying to ds will
For quality assurance purpose learnings and recommendation this audit will be disseminated social work teams. Audit finding also be reviewed at the Alterr Care Governance Group. Case Records (Naming and Saving of Ke	ons from d to the ngs will native
It is expected that NCCIS 2 w operational by November 202 the understanding of the loca that this system will be more streamlined by design.	22. It is Work Team
Until this new system is in pla local NCCIS Support Team wi conduct an audit on agreed n conventions for compliance p	II aming
Findings and recommendation this audit will be shared will someone a standar approach to recording, namin location of key children in car records is in place on NCCIS. Records to be kept up to commendation.	rtaff rdised ig, and re

PSW- Children

in Care Galway

30/09/2022

Principal social workers and business support managers will work with all relevant staff to ensure records are uploaded to NCCIS and kept up to date on an on-going basis.

A new business support resource has been allocated to the children in care team in Galway. It is also anticipated that additional administrative support will be available to the children in care teams before the end of the year.

Three monthly review meetings will take place between the children in care PSWs and business support managers in both Galway and Roscommon. This will ensure better oversight in terms of the management and inputting of case records to the NCCIS system.

This record management process will be reviewed at the Alternative Care Governance Group every quarter. Business Manager-Galway

PSW-Children in Care Roscommon

Business Support Manager-Roscommon