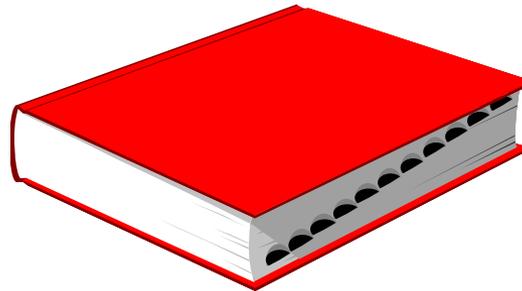


RESPONDING TO CHILD PROTECTION CONCERNS

HSE ROLE IN CHILD PROTECTION SYSTEMS, PRACTICES AND PROCEDURES



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CHILD PROTECTION IS EVERYONE'S BUSINESS

HSE have statutory role but they are only one aspect in keeping Children Safe

'I am convinced that the answer lies in **everyone** doing relatively straightforward things well.

Lord Laming (Victoria Climbié Report 2003)

CHILD PROTECTION ON THE AGENDA

- The many inquiries, publicity and criticism that has ensued over the last number of years have led to child protection and welfare receiving a high profile.

STATUTORY RESPONSIBILITY

The HSE must.....



“take such steps as it considers requisite in relation to children who are not receiving adequate care and protection and to co-ordinate information from all relevant sources relating to children in its area”

Child Care Act 1991

CHILD CARE ACT 1991

Places statutory duty on Health Service Executive to:-

- **Promote the welfare of children** not receiving adequate care and protection up to the age of 18 years through:-
 - child protection social work, child care & family support services
 - providing voluntary care ie. foster placements. (*NB. 70% of children in the state are there as a result of request or with consent of parents*)
- **Protection of children in emergencies** - 'immediate and serious risk to the health or welfare of a child'
 - Section 12 – place of safety (3 days)
 - Section 13 – Emergency Care Order (8 days)

CHILD CARE ACT 1991

- **Care Proceedings** – ‘where a child requires care & protection, which he/she is unlikely to receive unless such an application is made’
 - Section 17 - Interim Care Order
 - Section 18 – Care Order
 - Section 19 – Supervision Order

WHAT HAPPENS WHEN YOU RING UP THE SOCIAL WORK DEPARTMENT?

Do you want to informally talk about
a child/family who you think might
need help ie. without identifying
child/family??

Are you really worried and think you
need to make a formal referral

If you are not sure?????

ASK!!!!!!!

DUTY/INTAKE SOCIAL WORKER ROLE

- Social workers are available for consultation for members of public, voluntary agencies and other professionals in contact with children/families
- Provides initial screening of information received. Assesses any immediate risk to a child's protection and welfare needs and a parent/carers ability to respond to these needs through an initial assessment
- Gathers information from referrer and other HSE personnel. Makes a decision in consultation with Team Leader about level of intervention necessary.

SCREENING PROCESS

- Social workers require as much detail as possible about the concern and circumstances of the child and family
- Systems around the child and family are contacted, ie, school, "G.P. groups involved with child. All available information is gathered (parental permission sought first unless high risk)

INITIAL ASSESSMENT

Social worker documents-

Child Development Needs

-Health, education, family and social relations

Parental Capacity

-Basic care, ensuring safety, emotional warmth, stability

Family and Environmental factors

Housing, income, wider family network

CHILD PROTECTION SCENARIO

- 5 year old examined by school nurse who sees bruises and marks;
- Nurse informs school Principal and contacts Duty Social worker.
- Parent not informed.
- Child taken to hospital by Social Worker- query non-accidental injury.
- Child's mother is called to the hospital and is interviewed, initially says nothing but eventually admits hurting the child.
- Emergency Care Order is taken so mother can't remove child from the hospital.
- Initial assessment reveals that grandparents having to do a lot of the caring,
- School had concerns re appearance, lateness etc.
- Mother is lone parent, Alcohol and drug dependency issues.
- Child Protection Conference held, decision made that child would stay with grand parents.
- Mother went for inpatient drug and alcohol treatment.
- Gradual building up contact between child and mother.
- Child went home after year.
- Continued to be monitored by social work
- Eventually closed.

FAMILY SUPPORT SCENARIO

- Sports club in rural area appoint a newly arrived volunteer coach (not from the area) to be children's officer/designated person. He is sent for COE training and attends HSE training.
- 11 year old boy in club gives him cause for concern. Very little gear, dishevelled at times, dirty and father very late in collecting.
- He is told this family well known in the area. Everyone in club knows that parent's aren't 'the best' and insist that the club wouldn't report because the school would be aware of the problems and that the school should report.
- CO/DP continues to be very concerned and decides to ring the Duty social worker to discuss. Club Committee very unhappy with this as they don't want the community to know that the report came from them. CO/DP and Duty Social worker discuss course of action and agree that CO will discuss his concerns when the dad. He explains his role with the dad and tells him that he is concerned about the boy and asks if the family could do with some help with him and offers him the number of the social work department. After a week as agreed with SW CO/DP checks if the father has made contact. As he hasn't he makes formal report to Social work department.

- Social Worker carried out preliminary screening.
- No previous contact with Social work.
- Initial assessment carried out. Children living in very poor conditions,
- Parental capacity reduced due to mental health problems with mother and alcohol problems with father.
- Agreed with Team Leader to focus on family support
- Passed on to long term social worker to co-ordinate family support input.
- Mother supported to have a mental health assessment;
- family support worker helps with cleaning and cooking routine for mother. Father referred for addiction counselling (did not take up). Two of the children referred to psychology.
- Mother's condition improves dramatically
- CO/DP reported that after four weeks condition of child had changed dramatically.
- Family continued to send child to club and have good relationship with club.

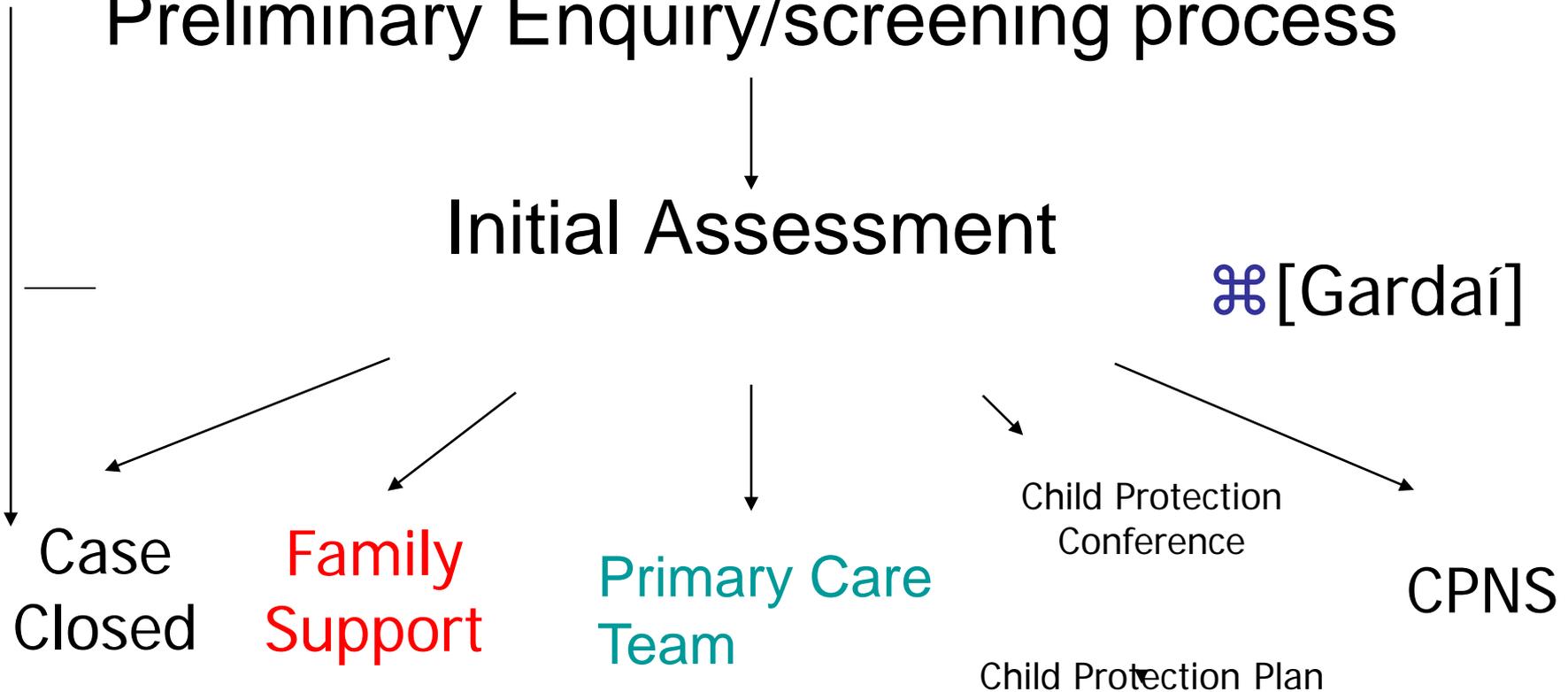
CHILD PROTECTION PROCESS

Report received – allocated to Social Worker

Preliminary Enquiry/screening process

Initial Assessment

⌘ [Gardaí]



SYSTEMS FOR MANAGING CHILDREN AT RISK IN IRELAND

- **CPNS- CHILD PROTECTION NOTIFICATION SYSTEM**
- The Child Protection Notification System (CPNS) is a HSE record of every child about whom there is an ongoing child protection concern. A child's name is placed on the CPNS by the HSE Child Care Manager following notification after initial assessment and consultation.

CHILDREN FIRST

National Guidelines

**Ethos of Children First and
Principles for Best Practice**

BUILDING ON STRENGTHS -IDENTIFYING NEGATIVES

Focus in social work practice is very much on identifying and building on strengths in families.

eg. linking vulnerable families into family support services. (resources can be an issue)

OPEN AND HONEST APPROACH WITH FAMILIES

- Parents /Carers have a right to respect and should be consulted and involved in matters which concern their family.
- **Children should only be separated from parents/carers when all alternative means of protecting them have been exhausted. Re-union should always be considered.**

WORKING WITH THE CHILD

- Children have a right to be heard, listened to and to be taken seriously. Taking account of their age and understanding, they should be consulted and involved in all matters and decisions which may affect their lives.
- Intervention should not deal with the child in isolation; the child must be seen in the family setting

WORKING WITH PARENTS

- Partnership is a key theme of the Child Care Act 1991 and Children First
(If action was being considered that affected our child we would want to be involved).
- The law and our procedures recognise the importance of working together
- The best outcome for a child is where all the adults in a child's life work together



**OTHER ROLES OF HSE PERSONNEL
INVOLVED
WITH CHILD PROTECTION AND
WELFARE**

SOCIAL WORKER – LONG TERM

- Works with families who may have been assessed as needing ongoing intervention
- Provides a service to enhance parent's capacity to meet the child's needs and to promote the welfare of children and families
- Acts as an advocate for families ie. services
- Maybe involved in a number of procedures including legal, child protection conferences, family welfare conferences

FOSTERING SOCIAL WORKER

- Seeks alternative placements for children who may need to be placed in the care of the HSE.
- Provides support to foster carers and also to children admitted in to the care of the HSE
- Organises recruitment, assessment and training of potential foster carers or relative placements

SOCIAL CARE WORKER/COMMUNITY CHILD CARE WORKER

- Works with children through play, story telling and use of art, clay and imaginative play.
- Works with a child on a one to one basis or in group work. This work looks at issues which may be causing difficulties for the child.
- Works as part of a multi-disciplinary team in the assessment and treatment of children and families

FAMILY SUPPORT WORKER

- Supports and works with vulnerable families and children in their own homes at times of acute and chronic stress to enable them to remain at home
- Facilitates access for children in care with their parents
- Undertakes direct support work for a family, when appropriate

SOCIAL WORK TEAM LEADER

- Allocates case work to members of their team and provides supervision for each team member
- Informs Principal Social Worker on all matters pertaining to their work
- Liaises with Garda Sergeants in reviewing cases which are common to both agencies

PRINCIPAL SOCIAL WORKER

- Line manages team leaders and supervises their work
- Ensures that professional work is carried out in accordance to good practice and is of a high quality

CHILD CARE MANAGER

- Receives all child protection notifications (Child Protection Notification System) and initiates appropriate action. (Child Protection Notification Management Team)
- Forwards on relevant notifications to Garda. (Joint protocol)
- Decides when and in what circumstances to hold a Child Protection Conference. Generally they will chair this meeting.

POINTS TO REMEMBER

Anonymity

- Anonymous calls in some areas may not get prioritised
- Social Workers can not guarantee confidentiality around the identity of a referrer ie. FOI, court proceedings
- Best practice dictates that parents should know in advance of a report being made. (unless puts child at further risk)

Build Relationships/Links

- Child protection is a two-way thing- social workers might need to ring you for information.

Consultations

- Social Workers welcome both informal/formal enquires in relation to child protection issues.

Dispelling Myths re children being taken into care.

- It is actually very difficult to remove children from their parents, ie. constitution. Social Workers can only take children into care as a last resort.

Every Social Work Department

- Has a different time frame for responding given existing priorities

For Child Protection Concerns

- It is reported to Social Work Department where the child lives.

Getting a Service

- Thresholds vary greatly
- May not reach the Threshold for immediate response
- Keep reporting fresh concerns.

WHAT CAN NGB'S AND CLUBS DO IN RELATION TO CHILD PROTECTION AND WELFARE?

From NGB to Club level promote a culture that sports groups have a role in children's welfare (child protection too!)

**That Club committees oversee implementation of the Code of Ethics-
(*important that committee members have training*)**

- appoint and support CO/DP's in their role**
- include DP's on the committee so that children's interests are integrated into club**
- ensure that leaders sign up to Club COE policies**
- ensure parents are aware and sign up to Club COE policies**
- ensure that young people sign up to the Club COE policies**
- create opportunities for CO/DPs coaches/leaders to attend COE/ CO training**
- Review policies on a regular basis**

What can Childrens Officers/Designated Person do?

- Have the drive and confidence to promote childrens welfare and positive participation**
- Be confident in relation to seeking advice from Social work if necessary, (you don't have to make decisions alone).**
- Keep good records. (Important for Social work, if there are concerns).**

Sports clubs are so important in children and young people's lives.

All children deserve and have a right to have good experiences in Childhood.

WE ALL HAVE A ROLE

Thank you