Report of an inspection of a Child Protection and Welfare Service

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<thead>
<tr>
<th>Name of service area:</th>
<th>Sligo Leitrim West Cavan</th>
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<td>Name of provider:</td>
<td>Tusla</td>
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<tr>
<td>Type of inspection:</td>
<td>Thematic Child Protection and Welfare</td>
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<tr>
<td>Date of inspection:</td>
<td>22-25 October 2019</td>
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<tr>
<td>Lead inspector:</td>
<td>Grace Lynam</td>
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<td>Support inspector(s):</td>
<td>Sabine Buschmann, Niamh Greevy, Lorraine O Reilly</td>
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About this inspection

The Authority is authorised by the Minister for Children and Youth Affairs under section 8(1)(c) of the Health Act 2007, to monitor the quality of service provided by the Child and Family Agency to protect children and to promote the welfare of children.

This inspection report, which is part of a thematic inspection programme, is primarily focused on defined points along a pathway in child protection and welfare services provided by Tusla: from the point of initial contact or reporting of a concern to Tusla, through to the completion of an initial assessment.

This programme arose out of a commitment made by HIQA in its 2018 *Report of the investigation into the management of allegations of child sexual abuse against adults of concern by the Child and Family Agency (Tusla) upon the direction of the Minister for Children and Youth Affairs*. This investigation was carried out at the request of the Minister for Children and Youth Affairs under Section 9(2) of the Health Act 2007 (as amended) and looked at the management by Tusla of child sexual abuse allegations, including allegations made by adults who allege they were abused when they were children (these are termed retrospective allegations).

Thematic inspection programmes aim to promote quality improvement in a specific area of a service and to improve the quality of life of people receiving services. They assess compliance against the relevant national standards, in this case the *National Standards for the Protection and Welfare of Children* (2012). This thematic programme focuses on those national standards related to key aspects of quality and safety in the management of referrals to Tusla’s child protection and welfare service, with the aim of supporting quality improvement in these and other areas of the service.

How we inspect
As part of this inspection, inspectors met with social work managers and staff. Inspectors observed practices and reviewed documentation such as children’s files, policies and procedures and administrative records.

The key activities of this inspection involved:

- the analysis of data
- interviews with the area manager, the principal social worker for duty/intake, the team leader for duty/intake and one team leader from the community team
- speaking with children and families
- the review of local policies and procedures, minutes of various meetings, staff supervision files, audits and service plans
- the review of 46 children’s case files
- observing duty staff in their day-to-day work
- observing team meetings and peer supervision.

The aim of the inspection was to assess compliance with national standards related to managing referrals to the point of completing an initial assessment, excluding children on the child protection notification system (CPNS).

Acknowledgements
The Authority wishes to thank children and families that spoke with inspectors during the course of this inspection in addition to staff and managers of the service for their cooperation.

Profile of the child protection and welfare service

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 and Youth Affairs. The Child and Family Agency Act 2013 (Number 40 of 2013) established the Child and Family Agency with effect from 1 January 2014.

The Child and Family Agency has responsibility for a range of services, including:

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

Child and family services are organised into 17 service areas and are managed by
area managers. The areas are grouped into four regions, each with a regional manager known as a service director. The service directors report to the chief operations officer, who is a member of the national management team.

Child protection and welfare services are inspected by HIQA in each of the 17 service areas.

**Service area** The Sligo/Leitrim/West Cavan Service area is situated in the North West of Ireland. The overall population for Sligo/Leitrim based on the 2016 census of population was 97,191 which include 26,145 children.

The Pobal HP Deprivation Index (Hasse & Pratschke, 2012) reports that, in 2011, Sligo was the 12th most affluent local authority area in Ireland and Leitrim was the 12th most disadvantaged local authority area (out of 34 areas). The unemployment rate for Sligo was just under the national average as was the number of one parent families. The unemployment rate for Leitrim was just over the national average and it had a lower number of one parent families than the state average.

The Child Protection & Welfare Service have three Social Work offices located in Sligo, Carrick-on-Shannon and Tubbercurry. The Duty/ Intake Team is based at the three separate offices with the Team Leader for this service based in Sligo. There are three Community Social Work Teams, one based in each office. All the Team Leaders report to the Principal Social Worker for Children & Families. The Principal Social Worker reports to the Area Manager.

The area had received 1,273 referrals in the 12 months before the themed HIQA inspection. Sligo/Leitrim/West Cavan had 18 children on the Child Protection Notification System at the time of the inspection.*

The Sligo Leitrim West Cavan child protection and welfare service was managed by a principal social worker responsible for the duty and intake and long term child protection teams. There was one team leader for duty and intake who managed the team responsible for duty, intake and initial assessments on new referrals. This team carried out the majority of the work in relation to screening, preliminary enquiries and initial assessments of new referrals. Three teams conducting long term child protection work were each managed by a team leader and they conducted a smaller proportion of the work related to the theme of this inspection.

In the six months prior to the inspection the intake service received 732 referrals of child protection and welfare.

*information provided by the service area*
HIQA judges the service to be compliant, substantially compliant, partially compliant or non-compliant with the standards. These are defined as follows:

<table>
<thead>
<tr>
<th>Compliant</th>
<th>Substantially compliant</th>
<th>Partially compliant</th>
<th>Non-compliant</th>
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<tbody>
<tr>
<td>The service is meeting or exceeding the standard and is delivering a high-quality service which is responsive to the needs of children.</td>
<td>The service is mostly compliant with the standard but some additional action is required to be fully compliant. However, the service is one that protects children.</td>
<td>Some of the requirements of the standard have been met while others have not. There is a low risk to children but this has the potential to increase if not addressed in a timely manner.</td>
<td>The service is not meeting the standard and this is placing children at significant risk of actual or potential harm.</td>
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In order to summarise inspection findings and to describe how well a service is doing, standards are grouped and reported under two dimensions:

1. **Capacity and capability of the service:**

   This dimension describes standards related to the leadership and management of the service and how effective they are in ensuring that a good quality and safe service is being provided to children and families. It considers how people who work in the service are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service.

2. **Quality and safety of the service:**

   The quality and safety dimension relates to standards that govern how services should interact with children and ensure their safety. The standards include consideration of communication, safeguarding and responsiveness, and look to ensure that children are safe and supported throughout their engagement with the service.

**This inspection was carried out during the following times:**

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<thead>
<tr>
<th>Date</th>
<th>Times of Inspector</th>
<th>Role</th>
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<tbody>
<tr>
<td>Date</td>
<td>Time</td>
<td>Name</td>
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<tr>
<td>22 October 2019</td>
<td>9.00 – 17.00</td>
<td>Grace Lynam, Sabine Buschmann, Niamh Greevy, Lorraine O Reilly</td>
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<tr>
<td>23 October 2019</td>
<td>9.00 – 17.00</td>
<td>Grace Lynam, Sabine Buschmann, Niamh Greevy, Lorraine O Reilly</td>
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<tr>
<td>24 October 2019</td>
<td>9.00 – 17.00</td>
<td>Grace Lynam, Sabine Buschmann, Niamh Greevy, Lorraine O Reilly</td>
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<tr>
<td>25 October 2019</td>
<td>9.00 – 16.00</td>
<td>Grace Lynam, Sabine Buschmann, Niamh Greevy, Lorraine O Reilly</td>
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Views of people who use the service

Inspectors met with nine children in the service area and spoke with six parents whose children were in receipt of a child protection and welfare service.

Children were positive about the service they had received and told inspectors they understood the role of the social worker and that the service helped them. Children said they got leaflets from the social worker about their rights and one child said they felt “listened to” and the social worker “helped me and my mum a lot”. Another child said the social worker “acted on everything I told her about”. Children said the service made a positive difference in their lives and it helped their family get along better together. They also told inspectors that the social worker helped them to understand things and that the social worker was “nice” and “kind” and “cared about us”. One child said they were asked to take part in plans for the family but they chose not to be involved. Another child said the social worker “answered our questions”.

Overall, parents were positive about the service they received. They said they were happy with the service and that it had helped them and their families. Parents told inspectors that social workers communicated well, talking through their concerns and working on solutions with them. One parent acknowledged the sensitivity of the social worker in dealing with them. Parents said services were put in place to help them and they were involved in the assessments that were conducted. Two parents felt it was difficult to access the service but one of these parents said “when you have it, it’s good”.

Capacity and capability
Prior to the announcement of the inspection a self-assessment was submitted to HIQA by the services area’s management team. The self-assessment is part of the methodology for this inspection and it required the management team to assess and score their compliance with the five standards relating to leadership, governance and management, and workforce. Overall, inspectors agreed with the area’s self-assessment and during fieldwork found evidence to support their self-assessment. Following on from the self-assessment, a quality improvement plan had been developed by the area’s management team which identified actions to improve the service. The implementation of these improvements would promote a better quality and more timely service for children and families.

At the time of the inspection, the child protection and welfare service in Sligo Leitrim West Cavan was child-centred and responsive to the needs of children from the point of receipt of a new referral through to the completion of an initial assessment. Children were kept safe and protected from harm and their welfare was promoted.

The leadership and management of the service had a strong focus on service improvement. The management team reviewed the processes in place for managing referrals with a view to improving efficiency. For example, in June 2019 managers identified that the duty and intake team referral rate had increased which resulted in children waiting for a service. This review resulted in a re-structuring of the team - the impact of which was an improvement in the efficiency of the team to respond to referrals in a timely manner and the elimination of the waiting list.

In addition to local initiatives the team were also involved in a regional service improvement initiative which focused on a regional approach to promote consistency of practice in the service. The management team were committed to building on and sustaining the progress made and an analysis of the work processes involved in the duty and intake service had been recently completed. This exercise identified the actions required to ensure consistent application of Tusla’s standard business process and management oversight of the process.

Service planning was good and reflected a child-centred approach. The underlying theme for the service area in 2019 was to improve children’s participation and to ensure the voice of the child was heard and recorded throughout the service. The vision for the child protection and welfare service was to ensure that all children were protected from harm in an environment that helped them to reach their full potential. Inspectors spoke with staff at every level of the organisation who demonstrated their commitment to providing a good quality, safe and timely service to children and their families.
The Sligo Leitrim West Cavan service area had clear arrangements in place to meet its legal obligations and the service was well-led. The governance structures in place supported the delivery of a good service to children and families. The service was managed by a committed and experienced management team, who provided strong leadership. Whilst there had been some changes to the management team in recent months, these transitions were seamless and well-managed. A new area manager had commenced in September 2019 and the team leader for the duty/intake service had recently returned to this post. The area manager line-managed the principal social worker who in turn managed the team leaders responsible for duty and intake and long term child protection work.

Inspectors found good management oversight of the child protection and welfare service. The management systems in place supported the delivery of a safe and effective service that was responsive to the needs of children and families. The management team convened regularly to oversee the various processes involved in ensuring the child protection and welfare service was safe and effective. The area manager was assured of the quality and safety of the service through these meetings, oversight of audits, review and monitoring of monthly metrics, trackers and resources and monthly and quarterly reports from the principal social worker.

The National Child Care Information System (NCCIS) was used to monitor service provision. Monthly and annual reports from the regional NCCIS support office provided information to the management team on the volume of work in the area and on their adherence or otherwise to the timeframes for completion of preliminary enquiries and initial assessments.

The Sligo Leitrim West Cavan management team had a system in place to identify learning from reviews of serious incidents. The management team had recently completed a comprehensive analysis of a particular case. Key learning points had been identified and recommendations made about how to inform current practice. Sharing the learning with the team was the next step and was included in the area’s quality improvement plan.

Communication systems were effective. Clear lines of communication were in place so that information was shared efficiently and in a timely manner. Senior managers communicated well with each other and with the teams on the ground. The newly appointed area manager had met with the teams. Staff told inspectors that they were aware of protected disclosure processes and said that there was open communication between staff and management. Inspectors saw evidence of this in minutes of meetings and through written correspondence between staff and managers. There was a process in place called a “Need To Know” used to escalate information both to the area manager and to the national office as appropriate.
Inspectors reviewed this and found the system was appropriately used. Team meetings were held regularly and were well attended. The teams discussed issues relating to practice and identified key tasks to improve consistency in practice going forward.

Quality assurance mechanisms required further development and the timely implementation of action plans to ensure the continuous improvement of the service, to build on and sustain the progress already made. The Sligo Leitrim West Cavan service area was implementing a national quality assurance framework which focused on the provision of a child-centred service. The area had identified actions to improve the child-centredness of the service. For example, a child-friendly form to be used in seeking children’s views of the service had been developed but had yet to be implemented in the duty and intake service. Staff had commenced self-auditing the records of the duty and intake service but this process did not focus on the quality of the service provided. Management were aware of this and had plans in place to further develop the audit process to include qualitative information. Following an audit of the supervision process in April 2018 a quality improvement plan for staff supervision had been developed. Inspectors found that some recommendations, such as improvement in the quality of recording, remained outstanding.

Risk management systems were in place to identify, manage and escalate risks in the service. The area maintained a service risk register which fed into a regional risk register. At the time of the inspection, risks identified in the child protection and welfare service had been proactively addressed and measures had been put in place to mitigate the risks. In June 2019 the risk associated with not meeting the Tusla timeframes for the completion of intake records and initial assessments had been added to the risk register. Steps were taken to address this. The work of the duty intake team was streamlined and resources were re-assigned to this team to address the risk. This resulted in improved responses to new referrals. Plans were in place to review the control measures put in place to effectively manage the risks.

Improvements were required to ensure safe recruitment practices were in place. The documentation on the staff recruitment files reviewed by inspectors was not consistent for all staff. Inspectors reviewed the recruitment files of 13 staff working in the child protection and welfare duty and intake service. All these staff had been recruited, or had changed roles within the organisation, in the last five years. Of the 13 staff files reviewed, eleven contained evidence of qualifications, twelve contained evidence of vetting by An Garda Síochána and up-to-date professional registration certificates. However, there were gaps in the information held on nine of the staff recruitment files. There was no record of Garda vetting on file for one staff member. Some did not contain references for the post currently held by the worker, and two files did not contain photographic evidence of identity.
The child protection and welfare service was adequately resourced at the time of the inspection. The child protection team was fully staffed albeit some positions were filled on a temporary or agency basis. All staff received good local induction into their roles and newly appointed staff attended national induction training. There was also a peer-support system in place for new staff. The duty and intake team comprised three senior social work practitioners, four social workers and a social care leader. The senior social work practitioners were more experienced members of staff who carried extra responsibilities and who supported the management team.

Staff had the required skills to manage and deliver effective services to children. Inspectors observed staff on the duty and intake teams in the course of their work and heard courteous and confident interactions with members of the public. Staff were well-informed and clear about the implementation of policies and procedures in relation to the management of referrals. A compliments log reviewed by inspectors reflected that both families and professionals thought social workers were professional, well-informed and supportive.

Training was provided to ensure that the staff team were competent and skillful in delivering a child protection and welfare service. A training needs analysis had been conducted in 2018 and the training needs of the team had been identified. Social workers had completed training in areas such as supervision, caseload management and youth participation but training in other areas had not yet been provided. Extensive training had also been provided in implementing the national approach to service delivery.

Overall, staff supervision was of good quality and staff felt supported. The frequency of supervision was good and staff were held to account. Informal supervision was also available to workers and new staff received additional support through increased supervision. During supervision managers used a caseload management tool to determine the caseloads of each staff member and the principal social worker reported this information on a monthly basis to the area manager. Where there were indications that some caseloads were unmanageable appropriate action was taken to address this. Good quality group supervision meetings were held monthly to discuss practice and share learning within the duty and intake team. There were some well-being initiatives in place to support staff but further development of this was required. Staff had attended as a recent team-building day and there was also an employee assistance service available to staff who required additional supports. An important support for staff was the existence of a practice support forum. This was a monthly meeting, chaired by managers, which practitioners could attend in order to discuss complex cases and to explore options for interventions to progress the case in the best interests of the child and their family.
However, records of supervision required improvement. Records of supervision focused on individual cases but showed limited attention to the workers wellbeing. Some of the supervision records - particularly those of managers - required improvement as discussions and decisions were not clearly recorded. Some, but not all, staff had personal development plans. No practitioners on the duty teams were involved in the “Empowering Practitioners and Practice Initiative” (EPPI) at the time of the inspection but some had previously been involved.

<table>
<thead>
<tr>
<th>Standard 3.1</th>
<th>Judgment</th>
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<tbody>
<tr>
<td>The service performs its functions in accordance with relevant legislation, regulations, national policies and standards to protect children and promote their welfare.</td>
<td>Compliant</td>
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At the time of the inspection, the child protection and welfare service in the Sligo Leitrim West Cavan service area was responsive to the needs of children from the point of receipt of a new referral through to the completion of an initial assessment. Children were kept safe and protected from harm and their welfare was promoted. The service was safe and delivered in a child-centred culture.

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<tr>
<th>Standard 3.3</th>
<th>Judgment</th>
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<tbody>
<tr>
<td>The service has a system to review and assess the effectiveness and safety of child protection and welfare service provision and delivery.</td>
<td>Substantially compliant</td>
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Quality assurance mechanisms required further development and the timely implementation of plans to ensure the continuous improvement of the service for children and families.

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<tr>
<th>Standard 5.1</th>
<th>Judgment</th>
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<tbody>
<tr>
<td>Safe recruitment practices are in place to recruit staff with the required competencies to protect children and promote their welfare.</td>
<td>Partially Compliant</td>
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Staff recruitment files were incomplete did not consistently contain the requirements of the standards. One staff file did not contain Garda vetting, some did not contain references that had been checked, evidence of qualification or photographic identity. Due to gaps in the documentation held on staff recruitment files this standard is judged to be partially compliant.
<table>
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<th>Standard 5.2</th>
<th>Judgment</th>
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<tr>
<td>Staff have the required skills and experience to manage and deliver effective services to children.</td>
<td>Compliant</td>
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The service had staff with the right mix of skills and experience to meet the needs of children. Managers in the service were experienced and competent to undertake their roles and responsibilities.

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<th>Standard 5.3</th>
<th>Judgment</th>
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<tbody>
<tr>
<td>All staff are supported and receive supervision in their work to protect children and promote their welfare.</td>
<td>Substantially Compliant</td>
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Staff were well supported. Supervision was of good quality. However there was room for improvement in the recording of managers supervision records and in addressing staff well-being in supervision sessions.

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<th>Quality and safety</th>
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Inspectors judged the service to be compliant with Standard 1.3. They agreed with the self-assessment completed by the management team, that the area rated highly in relation to this standard when compared with the description of a good service outlined in the guidance assessment judgment document. The areas of improvement identified in the quality improvement plan reflected the commitment of the management team to the continuous improvement of child-centred practice.

Children were communicated with effectively and were provided with information in an accessible format. Social workers and the social care leader met with children and observed them in their homes. They explained why they were involved with the family using child-friendly leaflets to explain the role of the social worker. Social workers utilised child-friendly materials such as artwork to assist children to express their worries about their families and their hopes for the future. Staff used simple, child-friendly language appropriate to the child’s age and stage of development. Direct work with children was well recorded in case records.

Communication with families was effective in engaging them with the service. Social
workers communicated in an open and transparent way with families and they understood the reasons for social work involvement with them. Translators were used with families whose first language was not English to ensure they fully understood and were involved in the interventions with their families. Children and parents were kept informed of the progress of the social work interventions with them. Families were involved in decision-making.

In relation to the theme of safe and effective services (Standard 2.1) inspectors agreed with the area’s self-assessment and found the area was substantially compliant with the standard. The quality improvement plan identified areas where improvement was required and the quality improvement plan identified the steps that would lead to service improvement.

Referrals were well managed in the Sligo Leitrim West Cavan service area. Child protection and welfare concerns were received by Tusla through a dedicated online portal, telephone calls, in writing or in person. These reports were screened by workers to identify if they were appropriate to the service and needed a social work response. Where they did not reach this threshold for a service, the worker provided advice and guidance both to members of the public and to other professionals. This information was recorded on a log which reflected the valuable service that was being provided in guiding and advising members of the public and professionals. Inspectors found this log contained 304 entries since 1 April 2019.

When referrals were accepted - following screening by the social worker - they entered the information into the NCCIS system. Inspectors reviewed 42 files for screening and found that 32(76%) contained evidence of screening. In 30 of the 42 cases (71%) there was evidence that the screening had been completed 24 hours within receipt of the referral. This was evidenced by the fact that the intake record (IR) was commenced on the same day as the referral and by the case records of the actions that were taken by the social worker in processing the referral - indicating that the referral had been accepted and work was commencing on the case. Referrals were routinely acknowledged. Where duty workers identified immediate risk to a child appropriate action was taken to ensure their safety.

Preliminary enquiries required improvements and the team were not consistently meeting Tusla’s own timeframe for completion of preliminary enquiries. The Tusla standard business process sets out a 5-day timeframe for screening and preliminary enquiries to be completed and recorded on an intake form (IR). In 23 (55%) of the 42 cases sampled the preliminary enquiries had been completed within the 5-day timeframe. On the majority of records the reasons for the delays in completing preliminaries enquiries within timeframes was recorded. These included higher volume of work, non-engagement of families and team leader not signing off
immediately.

Progress was required in the recording of network checks and parental consent for these checks. Network checks are conducted to find out if other agencies involved with the child and their family such as the child’s school or the family general practitioner or public health nurse have any concerns about the care of the child. Inspectors found that of 32 cases reviewed for network checks 22(69%) reflected that the network checks had been conducted. The consent of the child’s parents is normally required prior to these checks being completed. However, it was not always clear from records whether parents had consented to these checks. Social workers told inspectors that getting parental consent was an integral part of the process and they could recall having done so.

Inspectors found that referrals were categorised and prioritised correctly. All referrals require categorisation in accordance with Children First (2017) to reflect whether the referrals relates to their welfare or to suspected abuse. Of the 42 cases sampled 41(98%) had been correctly categorised. It is crucial that children with the highest priority of need are prioritised for allocation to a social worker to ensure they receive a timely child protection and welfare service. Of 40 cases reviewed for prioritisation all (100%) were found to have been correctly prioritised. Case records reflected the rationale for decisions made in line with good practice.

Children and families were supported throughout their involvement with the child protection and welfare service. When families needed additional supports referrals were made to support services in the community that were appropriate to their needs, for example, to family support services. These referrals were overseen and monitored by management to ensure that families were receiving the appropriate service for their need, to identify trends and to ensure services were being utilised fully. Cases were closed when families no longer required social work intervention. Inspectors reviewed a sample of 16 closed cases and found that the majority were closed appropriately. There had been delays in closing some cases due to demands on the duty service at the time.

The area took immediate action where required to ensure children were safe and protected from abuse. When children were deemed to be at immediate risk, timely and appropriate action was taken to ensure their safety. This included social work visits to the child’s home, safety planning with parents and other appropriate people in the child’s network, and making alternative arrangements for the child’s care where appropriate. Case records reflected good co-operation between professionals and other agencies such as An Garda Síochána when collaborative work was required.
Planning for a child’s safety was an integral part of the management of referrals from receipt of a new referral to completion of the initial assessment and this was evident at all stages of the process. Social workers asked questions about children’s safety throughout their work, and safety plans were put in place verbally and in writing as appropriate. Inspectors reviewed 18 cases where a safety plan was required and in all cases there was a safety plan in place. The majority of these, 15(83%), were formal, written safety plans that addressed all of the risks that had been identified. Where safety plans were initially verbal agreements these were followed up with further work to ensure the plan was formally written up and monitored to ensure all risks were addressed with appropriate actions. Children were - for the most part - involved in the development of safety plans where this was appropriate for them in regard to their age and stage of development and, whilst practice was good in this regard, the area had plans for the development of a child-friendly safety plan record. All safety plans were monitored, reviewed and amended to ensure they adequately safeguarded the child.

The area formally notified An Garda Síochána in writing when they suspected that a crime had been committed. Of 12 cases reviewed that required a Garda notification, 10 had been notified to the Garda in a timely manner. Inspectors queried the other two cases and reasons were provided for the non-notification/delay to An Garda Síochána. Strategy meetings were appropriately held. In addition, meetings were held between the social work management team and An Garda Síochána to discuss cases that both agencies were working with in order to agree actions to progress the case. This facilitated good working relationships and collaboration between An Garda Síochána and the social work service where this was required.

Initial assessments sampled by inspectors were of good quality but Tusla’s timeframe for completion of initial assessments was not being consistently adhered to. Children were consistently met with and observed within their home setting as an integral part of the process. Children’s views were considered, as appropriate, and information about parental interactions and children’s presentation was recorded. Parents were involved in initial assessments and information was sought from other agencies and professionals who knew the family. Inspectors reviewed 19 completed initial assessments and nine that were ongoing. Of the 19 completed initial assessments, 12(63%) had been completed within the 40-day timeframe. Workers were accountable for the delays in completing initial assessments and recorded the reasons for the delays. These delays ranged from two days to five months. There were also some delays in the commencement of initial assessments following completion of preliminary enquiries. This meant that some children did not have their circumstances fully assessed in a timely manner. However, the impact of this on the child was reduced by the provision of support and other services to families throughout the assessment phase of social work intervention. In addition, direct work was completed with children where required, and safety plans were in place. Initial assessments
included comprehensive analysis of the child’s needs, the family’s strengths and weaknesses and the impact of these on the child and worries about potential harm to the child were clearly outlined. The outcome of the initial assessment was clearly recorded and recommendations were made about next steps to be taken. The outcome of the initial assessment was shared with families. Appropriate action was taken where children were assessed as being at on-going risk of significant harm such as child protection conferences being scheduled. Some children’s involvement with Tusla ended after initial assessment as the children’s needs were appropriately met.

<table>
<thead>
<tr>
<th>Standard 1.3</th>
<th>Children are communicated with effectively and are provided with information in an accessible format.</th>
<th>Judgment</th>
<th>Compliant</th>
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The Sligo Leitrim West Cavan service area promoted a child-centred approach through the use of clear, open and honest communication to build relationships with children and families and to encourage them to engage with services. Parents and children said they were communicated with throughout their engagement with the service.

<table>
<thead>
<tr>
<th>Standard 2.1</th>
<th>Children are protected and their welfare is promoted through the consistent implementation of Children First.</th>
<th>Judgment</th>
<th>Substantially Compliant</th>
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Children’s safety and welfare was promoted throughout the management of referrals from the point of referral through to the completion of initial assessments. Thresholds were correctly and consistently applied. Good quality safety planning was in place and immediate action was taken where required to protect children from harm. Families that required additional support services were referred to appropriate services and cases were closed appropriately. Good quality, comprehensive initial assessments were completed.

The recording of network checks and the receipt of parental consent to conduct network checks required improvement. In addition, timelines for completion of screening and preliminary enquiries and initial assessments were not always met and for this reason this standard is being judged substantially compliant.