

**Draft National Quality Standards for Residential and Foster Care Services for
Children and Young People
Barnardos Submission to the
Health Information and Quality Authority**

March 2010

Introduction

Barnardos welcomes the opportunity to provide feedback into the draft National Quality Standards for Residential and Foster Care Services. Overall Barnardos is pleased with the current draft of quality standards as they aim to increase the quality, safety and care for all children living outside their family home in a range of settings. It is a welcome development that these standards will replace the current four sets of standards that operate depending on the type of service. This uniformity of standards will hopefully lead to a greater consistency of high quality of care, in the interests of achieving a better childhood and future for all children.

Need for consistent standard of care

It is evident from a wide number of independent reports and HIQA's own inspections that the current standards of care vary significantly, depending on the service delivered. These variations in care are in breach of legislation and often leave children feeling alone and uninvolved in matters affecting them and subsequently uncertain of their future.

- Only 189 of the 389 children in foster care had an allocated social worker in Dublin North West, while 109 foster carers in Dublin North Central had no access to a social worker¹.
- The Dublin North region significantly outperformed the other two Dublin regions – Dublin North West and Dublin North Central – with just five of 109 children not being allocated a social worker².
- An HSE internal audit report found more than two-thirds of relative foster carers in one region had not undergone a comprehensive assessment to determine their suitability for the job³.
- Some 19 complaints were made against foster carers in Dublin North West and Dublin North Central including allegations of sexual abuse⁴.

Guiding Principles

Barnardos welcomes that the 10 principles underpinning the standards are child centred and holistic - reflective of many key principles within the UN Convention on the Rights of the Child yet mindful of the need to address previous failings in relation to care for children e.g. recommendations in Report of the Commission to Inquire into Child Abuse (Ryan Report, 2009).

¹ Irish Times, 10th March 2010

² Irish Times, 10th March 2010

³ HIQA (2009) National Children in Care Inspection Report 2008

⁴ Irish Times, 13th March 2010

These are:

1. The needs and interests of children and young people should come first in deciding how services are provided
2. Children and young people have to have adults who are there for them
3. The rights of children and young people should be respected and promoted
4. Children and young people should have the chance to grow up in a family
5. Children and young people should only live apart from their family when there is no other way of making sure they are safe and well
6. Children and young people who live apart from their family should have a life that's just like that of any other child or young person
7. Children and young people should also be given support in their early adult years so that they can reach their full potential
8. Children and young people who live apart from their family should have happy and carefree lives
9. Children and young people who live apart from their family should be safe, and protected from any form of abuse
10. Services for children and young people should be managed and run in a way that fits with these principles.

Although implied in the draft Standards (Section 1: Quality of Life and Section 2: Children and Young People's Rights), Barnardos believes that the key principle of ensuring that the voice of the child is heard in all matters affecting their lives must be included. Only through constant dialogue with children and young people regarding their needs and wishes will a child centred high quality standard of care be achieved.

Standards

The standards are clearly grouped into 7 sections, namely:

- 1 Quality of care
- 2 Children and young people's rights,
- 3 Keeping children and young people safe and protected,
- 4 Professional staff and foster parents,
- 5 Education, health and social development,
- 6 The physical environment
- 7 Governance and management

Barnardos believes that each outcome and criteria identified by HIQA to measure implementation of the standards are very clear. Assessment against these criteria will lead to improved standardisation of care, monitoring and accountability. It will also hopefully lead to increased consistency in how inspections are carried out and how children and young people will be involved in those inspections.

Areas of concern

The development and adherence to these Standards will only be worthwhile if it is twinned with implementation of wider policy changes within the area of child protection, especially those outlined in the Ryan Implementation Plan. For instance:

- The appointment of 270 social workers to ensure all children in care have an allocated social worker.
- The development and review of care plans in consultation with the child.
- The availability and access to aftercare services and therapeutic services.

The absence of these supports and services will mean a high quality of care cannot be achieved.

Linked to this is the necessity for an increase in the number of HIQA inspectors to be recruited to enable frequent announced and unannounced inspections to be conducted on the services. Having too few inspectors can also prevent them from their monitoring role, i.e. following up on those inspected designated centres⁵ who have to implement the inspector's recommendations arising from their original inspection. Barnardos believes these inspectors should be recruited from a variety of sectors including the community and voluntary sector, thereby tapping into diverse qualifications, backgrounds and experience that can be beneficial to achieving the end goal of high quality comprehensive care for children and young people.

This monitoring role is essential to ensure compliance and hopefully the range of enforcement powers that the Chief Inspector of Social Services has at his disposal regarding registration of designated centres will strengthen adherence to standards. However, for those services which will be inspected but not registered i.e. foster care services and children detention services the monitoring of implementing recommendations appears to be weaker. It is unclear whether HIQA inspectors will monitor these services to ensure the recommendations for improvements have been implemented. Also HIQA can only recommend to the Minister for Children and Youth Affairs that a non-compliant service should close whereas provision within the Health Act 2007 provides for emergency procedures to close a designated centre if it is a significant risk to the safety and welfare of the children and young people.

The enactment of certain provisions within the Health Act 2007 is required to enable the registration and / or inspection of designated centres, however, when this will happen is unclear. Any delay in enacting these pieces of legislation will hinder the implementation and adherence to these standards.

Conclusion

Overall Barnardos believes that the development of common quality standards for children in living outside their own home is a welcome development. However, adherence to these standards will only be achieved with a combination of constant vigilance and availability of sufficient quality supports and services.

⁵ Children's residential centres, special care units and residential and residential respite centres for children with disabilities.