

Health Information and Standards

Draft National Standards for Children's Social Services

For public consultation March 2021

Health Information and Quality Authority

About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is an independent statutory authority established to promote safety and quality in the provision of health and social care services for the benefit of the health and welfare of the public.

HIQA's mandate to date extends across a wide range of public, private and voluntary sector services. Reporting to the Minister for Health and the Minister for Children, Equality, Disability, Integration and Youth, HIQA has responsibility for the following:

- Setting standards for health and social services Developing person-centred standards, based on evidence and best international best practice, for health and social care services in Ireland.
- Regulating social care services The Chief Inspector within HIQA
 is responsible for registering and inspecting residential services for older
 people and people with a disability, and children's special care units.
- Regulating health services Regulating medical exposure to ionising radiation.
- Monitoring services Monitoring the safety and quality of health services and children's social services, and investigating as necessary serious concerns about the health and welfare of people who use these services.
- Health Technology Assessment Evaluating the clinical and costeffectiveness of health programmes, policies, medicines, medical equipment, diagnostic and surgical techniques, health promotion and protection activities, and providing advice to enable the best use of resources and the best outcomes for people who use our health service.
- Health Information Advising on the efficient and secure collection and sharing of health information, setting standards, evaluating information resources and publishing information on the delivery and performance of Ireland's health and social care services.
- National Care Experience Programme Carrying out national service user experience surveys across a range of health services, in conjunction with the Department of Health and HSE.

Table of Contents

About the He	ealth Information and Quality Authority	2
Introduction		5
1. Backgro	und	5
2. Purpose	of the National Standards	5
3. Scope o	f the Draft National Standards for Children's Social Services	6
4. Structur	e of the Draft National Standards	8
5. Key terr	ns used in the Draft National Standards	11
6. How the	e Draft National Standards were developed	12
7. Public co	onsultation process	13
8. Next ste	ps	14
Summary of	the Draft National Standards for Children's Social Services	15
Principle 1:	A Human Rights-Based Approach	20
Principle 2:	Safety and Wellbeing	25
Principle 3:	Responsiveness	35
Principle 4:	Accountability	41
• •	 Membership of the Advisory Group to inform the developments ional Standards for Children's Social Services and the HIQA P 	roject
Appendix 2 –	Organisations that made submissions to the Scoping Consul	tation 50
Dafarancas		51

Definition of Standards

National standards are a set of high-level outcomes that describe how services can achieve safe, quality, person-centred care and support. They are evidence-based and informed by engaging with those who use and provide our health and social care services.

Purpose of National Standards

National Standards, approved by the Minister for Health, aim to promote progressive quality improvements in the care and support provided in health and social care services. The standards give a shared voice to the expectations of the public, people using services, service providers and staff working in health and social care services.

The National Standards:

- offer a common language to describe what high-quality, safe and reliable health and social care services look like
- are underpinned by a set of key principles which are used consistently across all national standards (a human rights-based approach, safety and wellbeing, responsiveness, and accountability) all working together to achieve personcentred care and support)
- enable a person-centred approach, by focusing on outcomes for people using services and placing them at the centre of all that the service does
- can be used by people using services to understand what high-quality safe health and social care services should be and what they should expect from a well-run service
- create a basis for services to measure the quality and safety of a service's performance against the standards, by identifying strengths and highlighting areas for improvement
- promote day-to-day practice that is up to date, effective, and consistent, and based on the best available evidence
- provide a framework for service providers to be accountable to those using their services, the public and funding agencies, by setting out how they should organise, deliver and improve the care and support they provide.

Introduction

1. Background

The Health Information and Quality Authority (HIQA) is the statutory body established under the Health Act 2007 to drive high-quality and safe care for people using our health and social care services in Ireland. One of HIQA's many functions is to set standards for health and social care services, including services provided to children. HIQA recognises the importance of increasing the quality and safety of care for all children, especially children who are at risk in the community or who are living away from their families in the care of the State.*

In 2019, HIQA commenced the development of Draft National Standards for Children's Social Services. The Draft National Standards apply to all children's social services, from the point of a child's referral to a service, until they transfer to another service or are discharged.

Children who are at risk or who are in the care of the State have a right to responsive and accountable services that support them to be involved in decisions about their care and support, and that promote their safety and wellbeing at all times. This is done through proportionate, well considered interventions that are tailored to meet children's individual and changing needs. These services work to strengthen a child's family and community so that they can live with their family safely and be part of their community. Where a child cannot live with their family, these services work to ensure children receive the most appropriate interventions needed to keep them safe, that promote their short, medium and long-term wellbeing, and that support them to reach their full potential.

2. Purpose of the National Standards

The Draft National Standards for Children's Social Services when approved by the Minister for Health, in consultation with the Minister for Children, Equality, Disability, Integration and Youth, aim to promote progressive quality improvements in the care and support provided to children who are at risk or who are in the care of the State, and to recognise their individual and unique needs. These standards give a shared voice to the expectations of the public, children, and families using services, service providers, and staff working in health and social care services. This approach puts the interests of children first, and supports health and social care staff working in individual services to understand how their work fits into the overall achievement of

^{*} In this standards document, the terms 'child' and 'children' refer to individuals (children and young people) under the age of 18 years who have not been married (as defined in the Child Care Act 1991).

positive outcomes for children living in a diverse range of settings who are in need of care and support.

The standards are underpinned by a draft set of key principles.[†] These principles, once finalised, will be used as HIQA's standards development framework, instead of the eight-theme framework which HIQA has used to develop standards since 2012. These four principles are; a human rights-based approach, safety and wellbeing, responsiveness, and accountability, all working together to achieve child-centred care and support.

The Draft National Standards:

- offer a common language for children and services to describe what highquality, safe and reliable children's social services look like
- enable a child-centred approach by focusing on outcomes for children and their families who are using services, and placing them at the centre of all that the service does
- can be used by children and families using services to understand what highquality safe services should be and what they should expect from a well-run service
- create a basis for services to measure the quality and safety of a service's performance against the standards, by identifying strengths and highlighting areas for improvement
- promote day-to-day practice that is up to date, effective, consistent, and based on the best available evidence
- provide a framework for service providers to be accountable to people using their services, the public and funding agencies, by setting out how they should organise, deliver and improve the care and support they provide.

3. Scope of the Draft National Standards for Children's Social Services

Under the Health Act 2007, Section 8, HIQA has a legal mandate to set standards for the safety and quality of specific children's social services and to monitor compliance with them. Section 7 of the Act also outlines HIQA's role in promoting safety and quality in the provision of all social care services for the benefit of the health and welfare of the public.⁽¹⁾ Section 8 (1) (c) of the act, also sets out that HIQA has overall responsibility for monitoring the following services:

[†] In May 2020, HIQA commenced a project to identify a set of principles that could be used consistently across all national standards developed by HIQA, irrespective of the setting or service type.

- child protection and welfare services
- foster care services
- children's residential centres.

Special care units are prescribed as designated centres in the Health Act 2007 (as amended) and they come under the remit of the Office of the Chief Inspector. The functions of the Chief Inspector's powers are set out in parts 7, 8 and 9 of the Health Act 2007 (as amended). Section 41 of the Act outlines that the function of the Chief Inspector includes:

- inspecting the performance by the Child and Family Agency of the Child and Family Agency's functions under Sections 39 to 42 and Section 53 of the Child Care Act 1991
- establishing and maintaining one or more registers of designated centres
- registering and inspecting designated centres to assess whether the registered provider is in compliance with the regulations, and standards set by HIQA under section 8(1)(b).

The Draft National Standards for Children's Social Services will be aligned to and sit underneath the Overarching National Standards for the Care and Support of Children using Health and Social Care Services, which are currently in development.

The Draft National Standards for Children's Social Services, once approved, will replace four sets of existing National Standards.[‡] These are:

- National Standards for Foster Care, 2003⁽³⁾
- National Standards for the Protection and Welfare of Children, 2012⁽⁴⁾
- National Standards for Special Care Units, 2014⁽⁵⁾
- National Standards for Children's Residential Centres, 2018⁽⁶⁾.

By developing one set of standards, underpinned by core principles and linked to relevant legislation, regulations and national policy, children's social services provided or commissioned by the Child and Family Agency (Tusla) are supported to work together in an integrated and child-centred way, with a clear focus on good outcomes for children who are at risk or in the care of the State and their families. In commissioning services, Tusla should have arrangements in place to assure itself that any external service providers also adhere to these standards.

[‡] The Standards and Criteria for Children Detention Schools (2008, Department of Justice, Equality and Law Reform) will not be replaced by the Draft National Standards for Children's Social Services. (2) HIQA has engaged with the Irish Youth Justice Services in the development of the Draft National Standards, and it is envisaged that the Detention School will apply the principles set out in the Draft National Standards and will align any new rules, policies and practices with these principles.

Children at risk or in the care of the State may need care and support from a wide range of services and should expect the same level of care, support and commitment to meeting their needs and improving their lives from all of the services that they use. HIQA's aim in developing these standards is to improve the experience of all children at risk or in the care of the State, when they are in need of care and support and to ensure that their lives improve as a result.

As such, in developing these standards, HIQA took a broad focus by actively engaging with stakeholders with a wide range of experience of children's social services at all stages of the process. These stakeholders included children and families with experience of children's social services, foster carers, advocates, a wide range of disciplines working in health and social care services, An Garda Síochána, and policy makers. This has resulted in a set of standards that can be used by all services working with children at risk or in the care of the State, not only services provided or commissioned by Tusla. While it is recognised that the arrangements each service puts in place will vary depending on the needs of the child, the type of work that the service is undertaking, as well as the size and complexity of the service, the principles and the standard statements, will apply regardless.

These standards will be submitted for approval by the Minister for Health, in consultation with the Minister for Children, Equality, Disability, Integration and Youth. HIQA and the Department of Children, Equality, Disability, Integration and Youth will agree a lead-in period to facilitate services to prepare for the implementation of the National Standards for Children's Social Services. HIQA will work with services to develop tools to assist in the implementation of the Draft National Standards for Children's Social Services, where there is an identified need to do so.

4. Structure of the Draft National Standards

The Draft National Standards for Children's Social Services are set out under the principles of:

- a human rights-based approach
- safety and wellbeing
- responsiveness
- accountability.

Figure 1. Principles underpinning Draft National Standards for Children's Social Services



The Draft National Standards consist of three sections:

- Principles
- Standards
- Features

The principles, the standards and features are intended to work together, and collectively they describe how children's social services provide safe, consistent and high-quality care that is tailored to meet the needs of any child receiving care and support from these services.

Principles

A human rights-based approach – I have the right to be treated with dignity and to be recognised as an individual who is able to participate in and exercise a level of control over my life. I have a right to participate§ in decisions about my care and support, and my family and the people caring for me are included in this process. Services work to support my participation. This ensures that I, and the important people in my life, can express our

[§] Children's participation in decision-making is defined as "the process by which children and young people have active involvement and real influence in decision-making on matters affecting their lives, both directly and indirectly."⁽⁷⁾

views, feelings and wishes in order to effect change in the care and support that I get.

- Safety and wellbeing I have a right to be safe and to live a full, healthy and happy life, free from harm or abuse. Services work to ensure that I am protected from harm and I am provided with real opportunities to grow and develop. Services recognise that it is important for me to live with my family, close to my friends and community, if it is safe for me to do so. Services work to strengthen and support my family and community to prevent issues arising and to respond quickly if they do, so that I can live in a safe nurturing environment that helps me to reach my full potential.
- Responsiveness I have a right to receive care and support from skilled, experienced and trained staff that put my needs first. These staff take the time to get to know me and see my strengths, needs, interests and goals in a wider context, and do not focus on only meeting my most urgent needs.
- Accountability I receive safe, consistent and high-quality care and support. The services I use are well-managed, everyone knows and understands their roles and responsibilities and works in a way that promotes my human rights.

Standards

The Draft National Standards for Children's Social Services describe how service providers can achieve safe, quality, child-centred care and support for children accessing children's social services. Each standard's statement is comprised of two elements:

- A statement written from the perspective of the child stating the outcomes they should expect
- A statement setting out the arrangements that a service provider must have in place to achieve these outcomes.

Features

The features, taken together, demonstrate how a child should experience a service that is meeting the standards. The features detailed under each standard statement are not exhaustive and the service provider may meet the requirements of the standards in other ways.

5. Key terms used in the Draft National Standards

Care plan: a written document prepared by the allocated social worker that contains important information about a child, such as their family's details, who they live with, where they go to school, arrangements for family contact and how their health, wellbeing and education are to be promoted. This plan is agreed with everybody involved in the care of the child and is generated by the allocated social worker from an assessment of the child, setting out their goals and needs. It contains matters concerning the care of the child, as detailed in the relevant regulations.

Case file: a case file is a record of documents and information relating to a child's care and support when they are engaged in children's social services.

Case management: case management is the coordination of services for children and families by allocating a social worker to be responsible for the assessment of need and implementation of the care plan. The underlying tasks of case management include: initial and ongoing assessment, planning, implementation and regular review.

Child: in this standards document, the terms 'child' and 'children' refer to individuals (children and young people) under the age of 18 years who have not been married (as defined in the Child Care Act, 1991).

Family: throughout this document, the term 'family' refers to the child's birth family and guardians.

People who care for me: throughout this document this refers to relative foster carers and foster carers.

Services: any prevention, early intervention, welfare, protection, or alternative care services provided to children who are at risk or who are in the care of the State.

Service provider: this term refers to any services provided or commissioned by Tusla, or that are publicly funded.

Social worker: this is the social worker assigned by Tusla to carry out its statutory responsibilities for the safety and welfare of a child.

Staff: the people who work in, for, or with the service provider. This includes individuals that are employed, self-employed, temporary, volunteers, contracted, or anyone who is responsible or accountable to the organisation when providing a service to children and families.

Supervision: a process in which one worker is given responsibility to work with another worker(s) in order to meet certain organisational, professional and personal objectives. These objectives are competent, accountable performance, continuing professional development and personal support.

6. How the Draft National Standards were developed

The standard statements and features are informed by a review of the literature, a scoping consultation, and targeted focus groups with key stakeholders in the area of children's social services. The information gathered was collated and analysed by the HIQA Project Team who used this evidence to develop the Draft National Standards for Children's Social Services.

As a first step, a review of national and international literature in relation to children's social services was undertaken and used to inform the development of the Draft National Standards. This review took account of published research, investigations, and reviews of children's social services in Ireland, alongside legislation, standards, policy, guidelines and best practice in other countries. All documents and publications were reviewed and assessed for inclusion in the evidence-base that informed the development of the Draft National Standards for Children's Social Services. The 'Evidence review to inform the development of the Draft National Standards for Children's Social Services' is available on www.higa.ie. (8)

HIQA also established an Advisory Group, made up of a diverse range of interested and informed parties, including young people with experience of children's social services, advocacy groups, regulatory bodies, professional representative organisations, Tusla, An Garda Síochána, the Department of Children, Equality, Disability, Integration and Youth, and the Health Service Executive (HSE). Feedback from the Advisory Group informed this first draft of the standards. Full details of the Advisory Group can be found in Appendix 1.

To promote engagement and participation by informed and interested parties in the development of the Draft National Standards for Children's Social Services, HIQA held a scoping consultation asking people with experience of children's social services (including children and young people with an experience of care, staff, advocates, family members and carers) and the public for their views on the key areas that the standards should address. The consultation also asked for opinions on the key sources of information and evidence the Project Team should review, and the key organisations or individuals the team should engage with, in the development of the standards. In total, there were 53 responses. All submissions to the consultation were considered and informed the areas to be addressed by the standards, the evidence review, and the stakeholder engagement plan for the standards development.

To inform the development of the standards, the Project Team conducted 22 focus groups in a range of locations across the country, meeting with a total of 285 participants. These focus groups saw representation from people with experience of a wide range of services and included children, young people and families, foster

carers, staff from Tusla and Tusla-funded services, An Garda Síochána, CAMHS, HSE Primary Care services, National Educational Psychology Service and principal teachers.

7. Public consultation process

The Draft National Standards are available for public consultation for a six-week period. During this time, children, young people, families, advocates, staff, service providers and the public will have the opportunity to provide feedback and become involved in the standards development process. We invite all interested parties to submit their views on the Draft National Standards.

The closing date for receipt of feedback is 5pm on Wednesday, 21 April 2021

How to make a submission

A number of consultation questions have been prepared for your consideration when reviewing the standards. These questions are not intended in any way to limit your feedback, and any other comments relating to the Draft National Standards are welcome.

There are several ways to tell us what you think:

- 1. You can complete and submit the online consultation feedback form available on www.higa.ie
- 2. Your comments can be submitted by downloading and completing the consultation feedback form and emailing it to standards@higa.ie
- 3. You can print off a copy of your completed consultation feedback form, available on our website, or print it off and complete it by hand, then post it to us at:

Health Information and Quality Authority Draft National Standards for Children's Social Services Consultation Dublin Regional Office

George's Court George's Lane Smithfield Dublin 7 D07 F98Y

For further information or if you have any questions, you can email standards@higa.ie or talk to a member of the team by calling 01 814 7400.

8. Next steps

HIQA will review and consider all submissions received during the consultation process. Following this process, HIQA will finalise the Draft National Standards for Children's Social Services and make changes to the standards based on your feedback. The main amendments will be published in a Statement of Outcomes document.

The final standards will be presented to the Board of HIQA for approval. Following approval by the Board, the standards will then be submitted for approval by the Minister for Health, in consultation with the Minister for Children, Equality, Disability, Integration and Youth.

Summary of the Draft National Standards for Children's Social Services

Principle 1: A Human Rights-based approach

Standard 1.1		
The outcome a child should expect	What a service provider must do to achieve this	
I am respected, valued and listened to by the staff in the services I use, and staff encourage and support my participation in my care and support.	The service provider has arrangements in place to ensure the rights of children are paramount in all decisions about their care and support and that children are supported to participate in these decisions.	
Standard 1.2		
The outcome a child should expect	What a service provider must do to achieve this	
I am supported to be involved in planning and decision-making about my care and support, and I have the right information to help me to make decisions about this.	The service provider has arrangements in place to ensure that children can participate in decisions about their care and support, and have all of the available information they need to participate to do so.	
Standard 1.3		
The outcome a child should expect achieve this		
If I have a concern or complaint about the service it is listened to, recorded and acted on.	The service provider facilitates children, their family or people caring for them to express their concerns or complaints about the service and has arrangements in place for managing and responding to these.	

Principle 2: Safety and Wellbeing

Standard 2.1		
The outcome a child should expect	What a service provider must do to achieve this	
I have the right to be safe and to live my life free from harm or abuse, and all services work together to support this right. Staff talk with me about my safety and support me to stay safe.	The service provider works to ensure that children are safeguarded from harm and abuse through the consistent implementation of Children First, relevant legislation, regulation, national policy and standards. The service provider works in collaboration with other services and professionals to ensure children are safeguarded.	
Standard 2.2		
The outcome a child should expect	What a service provider must do to achieve this	
My family is encouraged to be involved with services in my community that help to keep us safe and grow stronger as a family. If we need support, these services provide this before any problems we have get worse.	There are a range of prevention, early intervention and welfare services in place that support children and families in a timely and accessible way.	
Standa	ard 2.3	
The outcome a child should expect	What a service provider must do to achieve this	
My wellbeing is important to the services and the staff that are working with me and they support me to reach my full potential at all stages of my life.	The service provider has arrangements in place to ensure each child reaches their full potential. This is done in collaboration with the child, their family or the people caring for them, and other services, as appropriate. The service reviews and updates these plans regularly to reflect the child's changing needs.	

Standard 2.4			
The outcome a child should expect	What a service provider must do to achieve this		
My family is involved in making decisions about the care and support that we need and making sure that it is right for us.	The service provider has structures in place to involve children and their families in assessing their care and support needs, planning for these needs and reviewing any interventions to ensure they are appropriate.		
Standard 2.5			
The outcome a child should expect What a service provider must do to achieve this			
I am supported to keep and to develop important relationships in my life.	The service provider has arrangements in place to support children to maintain and develop strong and caring relationships with their family and other important people in their lives.		

Principle 3: Responsiveness

Standard 3.1		
The outcome a child should expect	What a service provider must do to achieve this	
I have a good relationship with staff who respect me and spend time getting to know me as a child, as well as my needs and my circumstances.	The service provider plans, organises and manages its workforce to deliver safe and effective child-centred care and support.	
Standard 3.2		
The outcome a child should expect What a service provider must do achieve this		
I know that staff will advocate for me to get the best care and support possible to meet my needs.	The service provider has arrangements in place to train, supervise and support staff to ensure staff are confident in advocating for the needs of children.	

Standard 3.3		
The outcome a child should expect	What a service provider must do to achieve this	
I have confidence that the staff who are caring for and supporting me have the skills, training and experience to keep me safe and meet my needs, and that they are supported to do their job well.	The service provider has systems and structures in place to ensure staff deliver child-centred, safe and effective care and support. Staff are supported and supervised to do this.	

Principle 4: Accountability

Standard 4.1		
The outcome a child should expect	What a service provider must do to achieve this	
I am confident that the service caring for and supporting me is properly managed and follows the rules and policies to make sure I get the right care and support.	The service provider has effective leadership, governance and management arrangements in place with clear lines of accountability, responsibility and communication. Information is used to plan, manage, and deliver child-centred, safe and effective care and support.	
Standard 4.2		
The outcome a child should expect achieve this		
I am confident that any service involved in caring for and supporting me is checked regularly to see that it is doing this properly.	The service provider has formalised governance arrangements for assuring the delivery of safe, child-centred care and support and monitors the quality and safety of services provided on its behalf. This includes compliance with relevant legislation, national standards and policies.	

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Standard 4.3		
The outcome a child should expect	What a service provider must do to achieve this	
My care and support is consistent and I have the opportunity to build a relationship with one staff member in particular, who gets to know me, my situation and my needs.	The service provider has arrangements in place to plan, manage and organise its workforce to ensure children receive responsive, coordinated and consistent care and support.	
Standard 4.4		
The outcome a child should expect	What a service provider must do to achieve this	
If I need care and support from more than one service, this is planned and organised so that I get the right service, at the right time, and I do not experience any gaps in my care and support.	The service provider has arrangements in place to ensure that appropriate care and support is coordinated within and between services in a timely and integrated way. Information is used effectively to ensure this happens and arrangements are in place to share relevant information.	
Standard 4.5		
The outcome a child should expect	What a service provider must do to achieve this	
Any service I am using regularly looks at how it can improve the care and support given to me, and other children using the service, so that I get the best	The service provider fosters a culture of continuous quality improvement, responding to and learning from audits, events, and feedback to achieve the	

Principle 1: A Human Rights-Based Approach

How a child experiences a human rights-based approach:

I have the right to be treated with dignity and to be recognised as an individual who is able to participate in and exercise a level of control over my life. I have a right to participate in decisions about my care and support, and my family and the people caring for me are included in this process. Services work to support my participation. This ensures that I, and the important people in my life, can express our views, feelings and wishes in order to effect change in the care and support that I get.

Ireland has ratified international legislation and developed national legislation, guidance, policies and standards that seeks to uphold the rights of children and their families. Under these, children have the right to be treated with dignity and to be recognised as individuals who are able to participate in and exercise a level of control over their lives. In line with the United Nations Convention on the Rights of the Child (UNCRC), Article 42A of the Irish Constitution explicitly recognises and affirms the rights of the child to participate, and the Child Care Act 1991 sets out clear obligations to uphold a child's right to participate in decisions that affect their lives. (9,10,11) Children's social services work to uphold this right by actively encouraging children who are at risk or in the care of the State, to participate in decisions about their care and support, while taking into account each child's age, ability and communication needs, as well as their safety. To support meaningful participation, services develop a culture that supports systems and structures at all levels of the service to ensure that children's views are sought, listened to and acted on. Services recognise that children may need support from their family, or people caring for them, in order to participate meaningfully and ensure that there are mechanisms for these groups to be included in the decision-making process, as appropriate.

Services only share the child's personal information in a way that respects the child's rights and in line with legislation and policy. Services provide children with clear and accurate information about the work that they do, who is providing it and what the intended outcome of the work is. Staff provide this information in a format that is appropriate to the child's age, stage of development and communication needs. This assists children to understand the role that these services have in keeping them safe and helping them to reach their full potential. When they have this understanding, children are more able to express their views, feelings and wishes on this work and to make informed decisions about matters that affect their lives.

Services ensure that children have the opportunity to develop stable and continuous relationships with staff. Respectful and regular communication between staff and children creates an open dialogue where children can talk about their views, feelings and wishes. Using this knowledge and understanding, staff can facilitate children to participate in a way that suits their needs and situation, and that effects change.

Services recognise that children have diverse needs and put in place supports to ensure that every child has an equal opportunity to participate, regardless of their ethnicity, gender, religion, language, abilities or any other status. Services also recognise that there can be barriers for engagement and participation by children. Staff demonstrate their commitment to facilitating all children to participate in a way that meets their rights and needs by providing them with the right tools and supports.

A child's connection to their family, friends and community is important to their developing sense of identity and place in the world. When considering how to support and build this connection, services fully take into consideration the child's views, and balance this with their best interests. Staff regularly communicate with the child to make sure all decisions are made in line with the child's views, changing needs and best interests.

Services foster an open culture that welcomes feedback and suggestions, and encourages children to discuss any concerns they have. Where a child, their family or people caring for them have feedback or a complaint about the services, there is a clear and open process for hearing, recording, and responding to this, underpinned by a feedback and complaints process. Children, their family or people caring for them, are encouraged to express their views and use this process to ensure that their voice is heard if the service is not what they expected. Services respond to feedback and complaints, and ensure that the outcomes of feedback and complaints, and where relevant, what has changed as result, is communicated to children, and their advocates. These processes allow children to express their views and experiences openly, and to see how they are being used to help to improve the service. The service also ensures that children are aware of other organisations and bodies, outside the service, where they can share feedback or make a complaint.

Standard 1.1		
The outcome a child should expect	What a service provider must do to achieve this	
I am respected, valued and listened to by the staff in the services I use, and staff encourage and support my participation in my care and support.	The service provider has arrangements in place to ensure the rights of children are paramount in all decisions about their care and support and that children are supported to participate in these decisions.	

- 1.1.1 My right to participate in my care and support is clearly communicated to me by staff in a way that meets my needs, and I am supported to participate in a way that best suits me. This includes making sure that my family, or people caring for me, are involved in decisions about my care and support.
- 1.1.2 I feel listened to by staff who understand the issues that are important to me and who support me in expressing my views on these issues.
- 1.1.3 I am seen by staff as an expert in my own experiences and they consult with me to understand my needs and wishes.
- 1.1.4 I am supported to participate in my care and support and included in all decisions about it. My race, sex, colour, language, religion, ethnicity, disability or any other status is respected.
- 1.1.5 I understand that my personal information is only shared with those who need it, in order to provide me with care and support, and this is clearly explained to me. This is done in a way that respects my rights.
- 1.1.6 When decisions are made that go against my wishes, they are clearly explained to me by staff, and I understand why these decisions were made, even if I don't agree with them.

Standard 1.2		
The outcome a child should expect	What a service provider must do to achieve this	
I am supported to be involved in planning and decision-making about my care and support, and I have the right information to help me to make decisions about this.	The service provider has arrangements in place to ensure that children can participate in decisions about their care and support, and have all of the available information they need to participate to do so.	

- 1.2.1 I am given clear information about my care and support that is communicated to me in a way that I understand.
- 1.2.2 I am provided with enough time, space and information to understand and form an opinion on the purpose of the care and support that I am receiving. My views are listened to. I am involved in decisions about any changes to the care and support that I get.
- 1.2.3 I am supported to see what has been written about me, for example in my case file, in a way that is right for me, if it does not involve other people's private information. This helps me to make decisions about my care and support.

Standard 1.3	
The outcome a child should expect	What a service provider must do to achieve this
If I have a concern or complaint about the service it is listened to, recorded and acted on.	The service provider facilitates children, their family or people caring for them to express their concerns or complaints about the service and has arrangements in place for managing and responding to these.

- 1.3.1 I know how to make a complaint and I understand that I have a right to voice my opinion on the services and how staff care for me.
- 1.3.2 I am informed of the outcome of any complaint I make. If there is a delay, staff keep me up to date.
- 1.3.3 I feel comfortable asking for an explanation if I am unhappy with the outcome of my complaint.
- 1.3.4 My family or the people caring for me know how to make a complaint and they are informed about the outcomes from any complaints that they make.

Principle 2: Safety and Wellbeing

How a child experiences safety and wellbeing:

I have the right to be safe and to live a full, healthy and happy life, free from harm or abuse. Services work to ensure that I am protected from harm and I am provided with real opportunities to grow and develop. Services recognise that it is important for me to live with my family, close to my friends and community, if it is safe for me to do so. Services work to strengthen and support my family and community to prevent issues arising and to respond quickly if they do, so that I can live in a safe and nurturing environment that helps me to reach my full potential.

All children have the right to be safe and to live a full and happy life, free from harm or abuse. Services working with children and people caring for children have a responsibility to be alert to concerns about a child's safety and wellbeing, and to respond to these in a child-centred way in line with legislation, national policy, standards and guidelines. *Children First National Guidance for the Protection and Welfare of Children* provides a framework for the assessment and management of child protection and welfare concerns, assists in identifying children's needs, assessing and managing risk and putting plans in place to protect children and promote their welfare. Services proactively work together to ensure that children, their families, or people who care for them, get the care and support that they need in a timely and proportionate way, to protect children from harm and to promote their wellbeing.

Services recognise that children generally do best when they grow up in a safe and strong family, near to their friends, school and community. By building on existing strengths and providing earlier and more proactive community-based interventions, services work to ensure that any concerns about a child's safety and wellbeing are addressed quickly and effectively, and that children can continue to live with their families, if this is safe for the child. These services are accessible, inclusive and responsive to the needs of families, and enable them to address their needs, and to build their capacity. A respectful and trusting relationship between families and those providing support ensures that families are more open to hearing what the issues are, and engaging with services to address issues, even if this is difficult.

A child's immediate safety is paramount and services must respond quickly and effectively to address any risks to a child's safety. However, it is essential that services working with children at risk, or in the care of the State, work beyond the

concept of safety and focus on the child's overall wellbeing, their needs, interests and goals, in order to support them to reach their full potential.

Services work together to enhance children's physical, mental and emotional health, their educational and training development, and their relationships with their family and community. The way in which each service meets these needs is appropriate to the level of engagement the child has with that service. A service focused on a child's wellbeing identifies what supports each child needs to enhance their wellbeing, and coordinates these supports to ensure that these are put in place in a timely way.

Services undertake an assessment of a child's individual strengths and needs.**
They do this by working with the child, their family and people caring for them, and other services, as appropriate, to ensure timely, relevant and proportionate interventions are put in place to build on these strengths and support a child's needs. These interventions, and their intended outcomes, are agreed and documented, a timeframe is set out, and the responsibility for providing these interventions is clearly assigned. Outcomes from these interventions are used to assess and inform the child's ongoing care and support.

Children's needs and circumstances are dynamic and services have mechanisms in place to review and respond to these changing needs and circumstances to ensure that a child is safe and their wellbeing is enhanced. Children, their family and people caring for them, are involved in planning interventions to respond to these changes in an open and honest way, even if this is difficult. Children are given the time, information and support to understand and prepare for any changes to their care and support.

Services recognise that children can be particularly vulnerable when they are transitioning between services or are being discharged from a service. To reduce this risk, services plan and manage these transitions carefully with the child, with people caring for them and with services, and coordinate follow-up support to ensure the transition has been effective. To ensure that a child with experience of care is supported in their transition from childhood to adulthood, services begin planning and preparing for this transition at an early stage. Services support each child to become developmentally ready for this process and ensure that there is an agreed plan in place to meet the child's needs, interests and goals.

Page 26 of 52

^{**} In the literature, taking account of a child, their family and community's strengths is also called a strengths-based approach. This approach focuses on the positive attributes of a child, their family and community and seeks opportunities to complement and support existing strengths and capacities as opposed to focusing on the problem or concern.

Standard 2.1

The outcome a child should expect

I have the right to be safe and to live my life free from harm or abuse, and all services work together to support this right. Staff talk with me about my safety and support me to stay safe.

What a service provider must do to achieve this

The service provider works to ensure that children are safeguarded from harm and abuse through the consistent implementation of Children First, relevant legislation, regulation, national policy and standards. The service provider works in collaboration with other services and professionals to ensure children are safeguarded.

- 2.1.1 I am confident that the services I use know what to look out for to keep me safe, and that they understand their role and responsibilities in protecting me from harm. This includes following the rules and policies that help to keep me safe, like Children First and other laws about protecting children.
- 2.1.2 If I am concerned about my safety, or the safety of others, this is taken seriously by staff and they follow up on these concerns quickly to make sure they are dealt with.
- 2.1.3 I am asked about what is going on in my life, how I feel about it and what needs to happen so I can be safe and well. I know that staff write this down so that I don't have to keep answering the same questions again and again.
- 2.1.4 I feel that the care and support that I get to keep me safe is balanced and fair, and is focused on building on my strengths and those of my family, or the people who care for me.
- I get the specialist support that is right for me if I need extra help to keep me safe or to help me to reach my full potential.

- 2.1.6 If I can't live with my family because it is not safe, this is explained to me and my family, even if this is difficult.
- 2.1.7 I am involved in planning for where I am going to live and how I will be cared for. Staff make sure that the service or people who will be caring for me and supporting me can meet my needs.
- 2.1.8 I know that if my needs or my circumstances change that the services I use will work with me to plan for these changes in an open and honest way, even if this is difficult.
- 2.1.9 If I feel that the actions that the service is taking are not fair, the reasons for these actions are explained to me and I am supported to express my views and I am listened to. I am supported by staff or an advocate from outside the service to help me to express my views and wishes.

Standard 2.2		
The outcome a child should expect	What a service provider must do to achieve this	
My family is encouraged to be involved with services in my community that help to keep us safe and grow stronger as a family. If we need support, these services provide this before any problems we have get worse.	There are a range of prevention, early intervention and welfare services in place that support children and families in a timely and accessible way.	

- 2.2.1 Staff working with me make sure that my family know about services that are available in my community and they encourage us to connect with these services.
- 2.2.2 My family and I get the support that we need to learn how to handle everyday ups and downs so that we build on the strengths in our family and stop problems from happening or from getting worse.
- 2.2.3 My family and I have a good relationship with services and we feel comfortable asking for and accepting help if we need it. The services treat us with respect and don't judge me or my family.
- 2.2.4 I am confident if we have any problems that staff in services look out for this and find ways to help us early on.
- 2.2.5 If my family is getting support from more than one service, all of these services work well together and everybody knows what their role is, and has the information they need to provide us with the right support.
- 2.2.6 My family and I understand what each service is doing to support us. The staff contact us regularly, in person, or by phone, letter or email, whichever method suits us best.

Health Information and Quality Authority

2.2.7 My family and I receive ongoing support. Even after our case is closed we have someone we can talk to who can help us to get the support we need if things change.

Standard 2.3	
The outcome a child should expect	What a service provider must do to achieve this
My wellbeing is important to the	The service provider has arrangements
services and the staff that are working	in place to ensure each child reaches
with me and they support me to reach	their full potential. This is done in
my full potential at all stages of my life.	collaboration with the child, their family
	or the people caring for them, and other
	services, as appropriate. The service
	reviews and updates these plans
	regularly to reflect the child's changing
	needs.

- 2.3.1 I am confident that services give me the care and support that I need so that all different parts of my safety, health and wellbeing are looked after and I can reach my full potential. If I need support with my education and training, there is a plan about how this is going to happen.
- I am supported by staff to make positive choices about my safety and wellbeing. They talk to me about my physical, mental and emotional health and wellbeing in a way that I understand and that helps me to make informed choices.
- 2.3.3 Any plan about my care and support includes details about my safety and wellbeing and says how these needs are going to be met, who is responsible for this, how long this is going to take and what other services need to be involved in my care and support. This plan is written down and I, my family or the people caring for me are involved in developing the plan, and we can see it if we want to.
- 2.3.4 I know that the different services that I need to reach my full potential work together to plan my care and support, and that they have the right information to do this properly.

- 2.3.5 My plan is reviewed regularly with me, my family or the people who care for me, and the services that support me, to make sure that my plan is meeting my needs, goals and interests as my life changes and I grow and develop.
- 2.3.6 If I am living away from my family, I am given time and support to understand how any changes to my care and support will affect me. My care plan is updated to show what changes have happened in my life and what support I am getting to help me to adjust and manage these changes.
- 2.3.7 If I am moving back to live with my family, this is carefully planned with me, my family and the people caring for me so that it is done at the right time and with my best interests in mind.
- If I am living away from my family, I get the care, time and support I need to help me to prepare for becoming an adult and to live independently. I have an aftercare plan that reflects my needs, interests and goals, and I get the support I need from staff to achieve my goals.

Standard 2.4		
The outcome a child should expect	What a service provider must do to achieve this	
My family is involved in making decisions about the care and support that we need and making sure that it is right for us.	The service provider has structures in place to involve children and their families in assessing their care and support needs, planning for these needs and reviewing any interventions to ensure they are appropriate.	

- 2.4.1 My family is unique, staff recognise this and spend time getting to know our strengths and needs so that they can develop a plan to support us that is in my best interests.
- 2.4.2 My family's circumstances are taken into consideration when developing a plan to support us. These circumstances include things like where we live, our traditions, and our way of life.
- 2.4.3 My family and I are involved in any reviews about the support that we are getting to make sure it is right for us and that it is meeting our needs. This is done in a way that suits our family and is respectful of us.
- If my family and I need more support, or if I can't live with my family because it is not safe, this is explained to me and my family, even if this is difficult. If we feel that the actions that the service are taking are not fair, we are supported to express our views and be listened to.

Standard 2.5	
The outcome a child should expect	What a service provider must do to
	achieve this
I am supported to keep and to develop	The service provider has arrangements
important relationships in my life.	in place to support children to maintain
	and develop strong and caring
	relationships with their family and other
	important people in their lives.

- 2.5.1 I am confident that staff caring for and supporting me work in a creative way to make sure that I can stay in contact with my family, the people who care for me, and my friends, even when the circumstances make this difficult to do.
- 2.5.2 I am supported to live with my family, when this is in my best interest. If I cannot live with my family, I am supported to live close to them, keep a strong relationship with them and see them regularly.
- 2.5.3 If I have brothers and sisters, we all get to live together. If there is a reason that we cannot live together, this is explained to me and staff support me to see them regularly and to do ordinary things together.
- 2.5.4 I am encouraged to build strong and caring relationships with the people who care for and support me, and these relationships can last throughout my childhood and beyond.

Principle 3: Responsiveness

How a child experiences responsive services:

I have a right to receive care and support from skilled, experienced and trained staff that put my needs first. These staff take the time to get to know me and see my strengths, needs, interests and goals in a wider context, and do not focus on only meeting my most urgent needs.

Children who are at risk or in the care of the State have a right to care and support from skilled staff who work to meet their need for safety and wellbeing. Responsive services ensure that children's needs are always put first, and that services work together with children, families and people caring for children to improve outcomes for the child. Responsive services organise and manage their workforce to ensure that they have the right staff with the required skills, flexibility, and experience to respond effectively to the needs of children who need care and support. This involves determining what the right staffing levels, skill-mix, competencies and capabilities are, in order to meet these needs. Responsive services ensure that they have safe and effective recruitment processes, appropriate staff workloads, and dynamic systems to manage and retain staff.

In responsive services, staff look at the whole child and their wider needs, and do not focus on meeting their presenting needs in isolation. To do this, staff listen to the child, look at their individual family and living circumstances, and proactively seek the views of other services that are working with them. Together, this information assists staff in planning appropriate care and support in the short, medium and longer-term. Using this information, staff advocate for care and support that is tailored to a child's individual needs and circumstances, and is delivered in the right way, at the right time and for the required duration. Staff regularly reflect on the appropriateness and effectiveness of any interventions through reflective practice.

In responsive services, staff have the time and capacity to build honest and trusting relationships with children, their family or those caring for them and to get to know them in a way that suits them. Staff respect and value children's views, and follow through on actions that have been agreed with them. If there is a reason that staff cannot follow through on an action, this is explained by the staff member to the child in a timely and appropriate way.

Staff are clear about their roles and responsibilities in caring for and supporting children, working in line with national and local policy and procedures to uphold

children's rights and meet their needs. All staff working with children have a role in delivering a safe, high-quality service and should be supported to do this, both individually and in effective teams. Staff receive ongoing supervision and space to reflect on their work. Responsive services recognise the impact on staff of caring for and supporting children who are at risk or who are in the care of the State, and provide them with the relevant support to manage this.

Staff are registered with their professional regulatory body, where relevant. As aspects of service provision, and the needs and profile of children using the service, change and develop over time, staff are supported to participate in ongoing professional development through training and education to retain, reflect and build on their skills and knowledge. This training supports staff to be confident that they are delivering the right care and support to children with diverse needs and situations. Staff are provided with the relevant tools and time to put any training into practice.

Standard 3.1	
The outcome a child should expect	What a service provider must do to achieve this
I have a good relationship with staff, who respect me and spend time getting to know me as a child, as well as my needs and my circumstances.	The service provider plans, organises and manages its workforce to deliver safe and effective child-centred care and support.

- 3.1.1 I am cared for and supported by staff who get to know me, my likes and dislikes and spend time with me to do this in a way that I enjoy.
- 3.1.2 I am comfortable speaking to staff and can be open about things that make me worried or scared.
- 3.1.3 I experience care and support from staff that are interested in me and who want to support me to be safe and to reach my full potential.
- 3.1.4 I am shown respect, care and courtesy by staff who value me.
- 3.1.5 I am regularly asked for my views by staff to make sure their understanding of my needs, preferences and goals are the most up to date.

Standard 3.2	
The outcome a child should expect	What a service provider must do to achieve this
I know that staff will advocate for me to get the best care and support possible to meet my needs.	The service provider has arrangements in place to train, supervise and support staff to ensure staff are confident in advocating for the needs of children.

- I trust the staff that work with me and I know that they will follow up on any actions that we have agreed on. If they can't do this, they will let me know why.
- I have confidence that staff are working in my best interests and are creative and flexible in making sure that my needs are met.

Standard 3.3	
The outcome a child should expect What a service provider must d achieve this	
I have confidence that the staff who are caring for and supporting me have the skills, training and experience to keep me safe and meet my needs, and that they are supported to do their job well.	The service provider has systems and structures in place to ensure staff deliver child-centred, safe and effective care and support. Staff are supported and supervised to do this.

- 3.3.1 I trust the staff providing my care and support because they have the qualifications they need to do their job, including knowing the signs that I might be at risk.
- 3.3.2 I am confident that staff working with me get the right supervision^{††}, support and training that they need to do their job well.
- I am cared for and supported by staff who are clear about their role in keeping me safe, and in my care and support, and who are open and honest with me about this.
- I am confident that staff know what other services I need and that they have the skills to identify and coordinate these so that I get the right support, at the right time and in the right way.
- 3.3.5 If I am moving to another area or to another service, my social worker contacts the staff there and makes sure that they have the right information to support me straight away.
- 3.3.6 If I am going back to live with my family, my social worker plans this with me and with the other staff who will be caring for and supporting me. These staff help me to prepare for this change

^{††} Staff are supervised in delivering child-centred, safe and effective care and support, to ensure they perform their role to the best of their ability.

- practically and emotionally, and I get the support I need to be safe and reach my full potential.
- 3.3.7 If I am in care, my social worker and the other people involved in my care and support, work with me to prepare for my transition from childhood to adulthood. We discuss and agree a plan for what I need practically and emotionally when I leave care so that I am safe and reach my full potential.

Principle 4: Accountability

How a child experiences accountable services:

I receive safe, consistent and high-quality care and support. The services I use are well-managed, everyone knows and understands their roles and responsibilities and works in a way that promotes my human rights.

All staff have a responsibility to ensure that children receive high-quality safe care and support that is consistent, coordinated and focused on achieving good outcomes for them. Leadership and governance are essential to ensuring that children's social services are accountable for the care and support they deliver to children who are at risk, or who are in the care of the State. The quality and safety of services that are commissioned or provided externally are monitored through formalised governance arrangements. Leaders and managers have an important role to play in strengthening and encouraging their service's quality and culture, and in supporting collaborative working with other services and people caring for children, to ensure that children are safe, that their wellbeing is improved and that they are supported to reach their full potential. Managers ensure that all staff understand their role in achieving these outcomes. A culture of human rights, care, creativity and hope is evident in the behaviour and attitudes of leaders and managers in an accountable service.

An accountable service ensures that it fulfils its statement of purpose, or mission, by planning, managing and organising the service to achieve its stated outcomes in the short, medium and long-term. To do this, it is essential that services organise and use resources effectively to ensure the delivery of high-quality, safe, and consistent care and support. Services plan and organise the workforce to ensure that the range of services that support children, are delivered in a safe, consistent and child-centred way.

Managers at all levels are responsible for ensuring that the service is complying with relevant legislation and regulations, national policy, standards and guidelines, and is operating in accordance with any service agreements or contracts to ensure that children are safe and that their needs are met. The service has clear policies, informed by relevant legislation and national policy, to support the delivery of its outcomes. Managers support staff to deliver effective services in line with these policies. Management supports and empowers staff to exercise their professional and personal responsibility to provide the right care and support, at the right time, to ensure that children who are at risk have the best outcomes and are supported to reach their full potential. Management actively involves staff, and people caring for

children in quality improvement initiatives, which allows the service to better respond to identified risks, to mitigate their impact and to prevent future risks arising.

An accountable service supports intra and interagency working^{‡‡} to ensure that a child's whole needs are met in a timely and effective way. Leaders and managers demonstrate a sustained commitment to collaboration with a wide range of services and disciplines working with children, and ensure that their expertise is used to effectively meet children's needs. Services have clear arrangements in place to define responsibilities within and between services, to support children who require assistance from more than one service. Services regularly communicate with each other to ensure that there is clarity around the role of each service and to provide up to date information on changes and developments in the sector. Staff respect the values, opinions, and contributions of other staff from different disciplines, and are supported to work and train together to build mutual skills. Accountable services have reliable and secure information management systems and an agreed information governance framework to ensure that quality data (which is relevant, accurate, reliable, timely, coherent, comparable, accessible, punctual and clear) is shared in a timely and appropriate manner to facilitate staff to meet the needs of each child.

Information is an important resource in planning, managing, delivering and monitoring child-centred, safe and effective services. Leaders and managers use information to measure how they are achieving good outcomes for children by setting indicators and using these to regularly reflect and evaluate the performance of their service. This ensures that the care and support the service provides is of a consistently high-quality, regardless of the type or location of the service, and is effective in meeting the needs of children, their families or the people caring for them. The feedback, concerns and complaints of children using the service, and those of their families, foster carers, advocates and staff, are taken into account as part of this evaluation process, to improve the quality and consistency of the care and support provided. Services learn from external reviews and inspections and ensure that recommendations are put into action to improve the experience of children who require care and support.

^{‡‡} Services working in an integrated way both within and with other services, organisations and professionals.

Standard 4.1	
The outcome a child should expect	What a service provider must do to achieve this
I am confident that the service caring	The service provider has effective
for and supporting me is properly	leadership, governance and
managed and follows the rules and	management arrangements in place
policies to make sure I get the right	with clear lines of accountability,
care and support.	responsibility and communication.
	Information is used to plan, manage,
	and deliver child-centred, safe and
	effective care and support.

- 4.1.1 I experience care and support that promotes my rights and the rights of others in a positive and hopeful way.
- 4.1.2 I know what the service does, and how it does it, because it is written down in a statement about the service. This statement is explained to me in a way that I understand.
- 4.1.3 I am confident that the service makes decisions about my care and support using good information.
- 4.1.4 I know who is in charge of the service and I can talk to them if I have a concern.
- 4.1.5 I am confident that the service checks that staff and people caring for me are suitable to work with children.
- 4.1.6 I get the right care and support because there are enough staff and they have the resources they need to do their job.

Standard 4.2	
The outcome a child should expect	What a service provider must do to achieve this
I am confident that any service involved in caring for and supporting me is checked regularly to see that it is doing this properly.	The service provider has formalised governance arrangements for assuring the delivery of safe, child-centred care and support and monitors the quality and safety of services provided on its behalf. This includes compliance with relevant legislation, national standards and policies.

- I know that the service I use is checked regularly so that I get the best possible care and support.
- I am asked for my views by the people checking the service and these views are used to improve the service. My family, or the people caring for me, are also asked for their views. These views are taken seriously and we are told how they will be used.

Standard 4.3	
The outcome a child should expect	What a service provider must do to
The outcome a child should expect	achieve this
My care and support is consistent and I	The service provider has arrangements
have the opportunity to build a	in place to plan, manage and organise
relationship with one staff member in	its workforce to ensure children receive
particular, who gets to know me, my	responsive, coordinated and consistent
situation and my needs.	care and support.

- 4.3.1 I have one dedicated staff member who gets to know me, my situation and my needs so that they can arrange the right care and support for me.
- I have time to build up a relationship with this staff member and I can rely on them for support.
- 4.3.3 If the staff working with me are changing, I know the reason for this change. Changes are planned with me in advance and I am given time to get to know new staff.
- I get good quality care and support no matter what service I am using and no matter what area I live in.
- 4.3.5 I know how long I am going to get care and support for and I understand the reasons for any changes to this.

Standard 4.4

The outcome a child should expect

If I need care and support from more than one service, this is planned and organised so that I get the right service, at the right time, and I do not experience any gaps in my care and support.

What a service provider must do to achieve this

The service provider has arrangements in place to ensure that appropriate care and support is coordinated within and between services in a timely and integrated way. Information is used effectively to ensure this happens and arrangements are in place to share relevant information.

- 4.4.1 I experience joined-up care and support from the different services, who work together, so that my needs are met at the right time and in the right way for me. I am aware of what each service should be doing to support me and who is responsible for this.
- 4.4.2 I am confident that the staff providing these services have the skills to plan and coordinate my care and support in and between the services I use.
- 4.4.3 I, my family or the people caring for me, are kept up to date on what all of these services are doing to support me.
- I have the time and opportunity to get to know staff in each of the services that are providing my care and support.
- I am told what information is being shared between staff involved in providing my care and support in different services. I have confidence that these staff will use my information in a way that respects my privacy and confidentiality.
- 4.4.6 If there is a reason that I won't be getting support from the different services that I need, then this is explained to me.

Standard 4.5	
The outcome a child should expect	What a service provider must do to achieve this
Any service I am using regularly looks at how it can improve the care and	The service provider fosters a culture of continuous quality improvement,
support given to me, and other children using the service, so that I get the best	responding to and learning from audits, events, and feedback to achieve the
care and support possible.	best outcomes for children.

- 4.5.1 My service plans what it is going to do to meet my needs, and the needs of other children using the service. Using good information, the service measures whether they have done this properly.
- I am regularly asked to give my views on the service and I am given the time and space to do this.
- 4.5.3 My views are taken seriously and I am told how they have been used.
- 4.5.4 If I, my family or the people caring for me, give feedback or makes a complaint then this is used to help to improve the service.

Appendix 1 — Membership of the Advisory Group to inform the development of the Draft National Standards for Children's Social Services and the HIQA Project Team

Advisory Group membership

Name	Organisation
Aisling Gillen	Service Director West - Family and Community Support Services, Tusla
Brian Lee ^{§§}	Director of Quality Assurance, Tusla
Catherine Bond	CEO, Irish Foster Care Association
Colette McLoughlin	Head of Policy and Research, Tusla
Eva Boyle	Interim Head of Programme (Children's Services), HIQA
Gordon Hill	Vice President, National Youth Council of Ireland
Jules Kurvink	Volunteer, Empowering People in Care (EPIC)
Karla Charles	Policy Manager, EPIC
Kate Gillen	Social Work Specialist, Department of Children, Equality Disability, Integration and Youth
Linda Creamer	Service Director Dublin North East, Child Protection and Welfare Services, Tusla
Louis O'Moore	Director, Social Care Ireland
Marie Kennedy	Area Manager, Child and Family Agency, Tusla
Michele Clarke	Chief Social Worker, Department of Children, Equality, Disability, Integration and Youth
Patricia Finlay	Service Director Dublin Mid-Leinster, Tusla

 $[\]S\S$ Brian Lee left the Advisory Group at the end of November 2020. Page 48 of 52

Patricia Whelehan Kennedy***	General Manager, Child and Adolescent Mental Health, HSE
Paula Long	Regional Director, National Educational Psychological Service
Rachel Flynn	Director of Health Information and Standards, HIQA (Chair)
Rachel McCormack	Board Member, Irish Association of Social Workers
Roberta Mulligan	Member of the Social Work Registration Board, CORU
Ruth O'Reilly ^{†††}	Senior Standards Officer, National Disability Authority
Simon O'Neill	Volunteer, EPIC
Siobhan Greene	Director of Children's Services, Barnardos
Stanley Houston ^{‡‡‡}	Lecturer in School of Social Work and Social Policy, Trinity College Dublin
TJ Dunford	General Manager, Primary Care, HSE
Tony O'Donovan	Principal Officer, Irish Youth Justice Services

Project Team, HIQA

Niamh O'Rourke	Head of Standards, HIQA
Linda Weir	Standards Manager, HIQA
Deirdre Connolly	Standards Development Lead, HIQA
Shauna McCarthy	Standards Development Officer, HIQA ^{§§§}
Carol McLoughlin	Standards Development Officer, HIQA****
Cecil Worthington	Subject Matter Expert, HIQA

^{***} Patricia Whelehan Kennedy attended the first Advisory Group in November 2019 and was replaced by Sinead Reynolds for the second meeting of the group in November 2020.

thi Ruth O'Reilly attended the first Advisory Group in November and was replaced by Áine Higgins Ni Chinnéide for the second meeting of the group in November 2020.

^{****} Stanley Houston attended the first Advisory Group in November 2019 and an alternate representative, Trevor Spratt, attended the second meeting of the group in November 2020.

^{\$\}frac{\partial \text{SSS}}{\partial \text{SSS}}\$ Shauna McCarthy joined the Project Team from September 2019.
***** Carol McLoughlin joined the Project Team from January 2020.

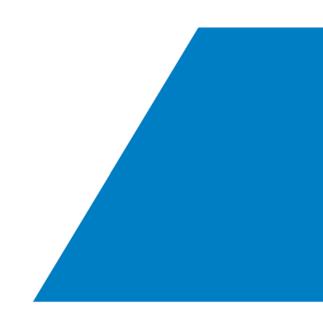
Appendix 2 – Organisations that made submissions to the Scoping Consultation

(August - September 2019)

- Barnardos
- Brothers of Charity
- Child and Family Agency, Tusla
- Crosscare
- Daughters of Charity
- Department of Children, Equality, Disability, Integration and Youth
- Fostering First Ireland
- Fresh Start
- Health Information and Quality Authority (HIQA)
- Health Service Executive (HSE)
- Irish Aftercare Network
- Irish Association of Social Workers (IASW)
- Irish College of General Practitioners (ICGP)
- Irish Foster Care Association (IFCA)
- Irish Penal Reform Trust (IPRT)
- Irish Primary Principals' Network (IPPN)
- Mental Health Commission
- National Disability Authority (NDA)
- St Patrick's Mental Health Services
- Traveller Families Care
- UNESCO Child and Family Research Centre, NUI Galway
- Voices of Young Refugees in Europe
- Youth Advocacy Programme (YAP)

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