Chapter 2:

Governance and Finance

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Part One: Governance

Introduction

1 During the period 1922 to 1995, two levels of governance operated for voluntary and statutory children’s homes and criminal justice institutions for young people: inspection by Government departments and internal monitoring by providers of the residential care. Powers, duties and requirements in relation to inspection and monitoring of children’s homes were set down in legislation, statutory regulations, Government circulars and related policies and procedures of care providers. Also, in addition to these formal arrangements, welfare authorities had to assure themselves of the care provided to children they placed in voluntary homes as they still remained responsible for them in law.

2 In this chapter we will outline how requirements in relation to inspection and monitoring of children’s homes and institutions developed during the period 1922 to 1995 and will consider at a general level to what extent they were implemented and proved effective. In each of the chapters dealing with individual homes and institutions, we have considered how effective inspection and monitoring activity was in identifying and addressing issues about the adequacy of the physical conditions and facilities in homes and the quality of the care provided to children and young people living in them.

The period 1922 to 1950

3 In 1922 the residential care of children was governed by the Children Act 1908 and by the Poor Relief Acts, which empowered Boards of Guardians to care for children in workhouses or to have them boarded out. The limited provision for governance of residential care of children was contained in the Children Act 1908, which provided for certified reformatories and industrial schools to be inspected at least once a year and gave the Secretary of State the power, but not the duty, to inspect children’s homes. Section 25 of that Act stated:

“the Secretary of State may cause any institution for the reception of poor children or young persons, supported wholly or partly by voluntary contributions and not liable to be inspected by or under the authority of any other government department, to be visited and inspected from time to time by persons appointed by him for the purpose.”

1 HIA 100-101.
The Secretary of State had no power under this legislation to require voluntary homes to be registered nor could any government department intervene in the arrangement for the training, education or after-care of children accommodated within them.2

4 The Ministries of Northern Ireland Act (1921) established the Northern Ireland Ministry of Home Affairs (MoHA) and made it responsible for the inspection powers and duties set down in the 1908 Children Act. In compliance with legislation and guidance the majority of departmental files and records relevant to the time period covered by this Inquiry have been reviewed and either destroyed in accordance with records management procedures or passed to the Public Records Office of Northern Ireland (PRONI). Only a few records of inspection activity still exist, therefore the Department of Health, Social Services and Public Safety (DHSSPS) was unable to confirm to what extent inspection of children’s homes was carried out between 1922 and 1995. MoHA inspection reports were confidential to the Ministry and not shared with children’s homes so copies of them were not available in the records maintained by homes. However, the homes’ records did contain some related material such as letters from the MoHA following up matters identified during inspections and later inspection reports by the Social Work Advisory Group which were shared with homes, all of which assisted our considerations.

5 The limited number of inspection reports that were available to us for this period showed that inspections were generally undertaken on an annual basis by a MoHA children’s inspector and a medical officer. The reports of the inspections tended to focus on the physical environment and facilities available in homes and contained only brief comments about the appearance and general health of the children. We saw evidence in records maintained by providers of care, for example the Sisters of St Louis, that the MoHA wrote to homes to follow up issues identified during inspections and that this extended to seeking information about the medical care being provided to particular children.

6 The MoHA was also responsible for inspecting reformatory and industrial schools, and reported annually on these institutions within a report to the Governor of Northern Ireland about services and functions in regard to law and order. The information provided in these reports included the number of children each establishment was certified to hold, the grounds for
committal, statistics in relation to admissions and discharges, and funding arrangements. For example, it was reported that in 1927 forty-five boys and eighteen girls were admitted to industrial schools, and the grounds for committal were non-compliance with School Attendance Orders in twenty-six cases, begging in eleven cases, wandering in nine cases, minor offences in nine cases, and destitution/being orphans in eight cases.³

Information was also provided about the health of the children and the medical attention they received, the education and training provided to them and, in the majority of cases, the employment they entered on discharge. In the report for 1927 it was recorded:

“At the annual inspections of the various Schools during the year the children in general looked healthy and cheerful and bore every appearance of being well cared for; the dietary on the whole was adequate; and the general condition of the Institutions was excellent.”⁴

The 1934 report moved from a confirmation that all institutions had been inspected and a summary of general comments to the provision of brief quotes from the inspection reports of each school. For example, it was reported that all the boys in St Patrick’s reformatory and industrial school looked well cared for and the school was “bright and cheerful as the result of internal re-decoration carried out in a very creditable manner by the inmates.”⁵

The next piece of relevant legislation was the 1946 Public Health and Local Government (Administrative Provisions) Act (Northern Ireland), which established welfare authorities to carry out the functions of the Boards of Guardians. Eight welfare authorities were established across county and county borough council areas in Northern Ireland. Each welfare authority was required to appoint a Welfare Officer who would assume the responsibilities that had previously been invested in the Boards of Guardians. The welfare authorities were also required to act through statutory welfare committees. This structure divested the Boards of Guardians of their responsibility for children.

In 1946 the Government also published a White Paper The Protection and Welfare of the Young and the Treatment of the Young Offender and the recommendations contained within it were given legislative force.

³ GOV 35028.
⁴ GOV 35028.
⁵ GOV 35071.
through the Children and Young Persons Act (Northern Ireland) 1950 (referred to below as the CYP Act 1950). The CYP Act 1950 centralised the Government’s responsibility for the care of children under MoHA and gave the MoHA more powers and duties in relation to the inspection of children’s homes.

The period 1950 to 1972

At the time of the passage of the CYP Act 1950 the majority of children in residential care were accommodated in voluntary homes run by Roman Catholic religious orders and had been placed in the homes mainly on a private basis. In an attempt to improve the regulation of these homes the CYP Act 1950 provided that:

a. voluntary children’s homes had to be registered by the MoHA.  

b. a voluntary children’s home’s registration could be removed if it appeared to the MOHA that it was being conducted in a manner that was not in accordance with regulations made or direction given under the Act.

   c. any person appointed by the MoHA to inspect a voluntary home had the power to enter such homes and to make “examinations into the state and management thereof and the conditions and treatment of children therein as he thinks requisite.”

The MoHA’s initial focus in implementing the CYP Act 1950 was the registration of existing voluntary children’s homes. From 1950, the report to the Governor of Northern Ireland was extended to cover child welfare services and included information on the progress the MoHA was making in meeting its new responsibilities for registering and inspecting voluntary children’s homes. The report of 31 December 1950 recorded that seventeen voluntary homes had been registered, and by the time of the report issued on 31 Dec 1954 this number had increased to twenty-three registered homes.

Documentation relating to the initial registration of Manor House, a voluntary children’s home in Lisburn run by the Irish Church Missions, gave us an insight into the registration process. A MoHA children’s inspector, Ms

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6 Section 99(1) HIA 232.
7 Section 99(4) HIA 233.
8 Section 102 HIA 237.
9 GOV 35038.
10 GOV 35051.
Forrest, visited the home on 8 June 1950 and met with a member of the Management Committee of the home and the matron and inspected the facilities. Miss Forrest provided a brief report on her general impressions of the home for her senior colleagues. On 22 June 1950, the Management Committee submitted an application for the home to be registered, which included information about how many children could be accommodated in the home, the current number of children accommodated and the number of staff caring for them. Seven days later, in a letter dated 29 June 1950, the MoHA wrote to confirm Manor House had been granted registration and that the Ministry would consider applications for funding to assist the improvement of premises or equipment and the securing of qualified staff.

This letter also explained that the MoHA intended to issue regulations for the conduct of children’s homes, but that its powers to inspect children’s homes would be put in force straight away and that inspectors would carry out their first inspections within the next few weeks.\textsuperscript{11} However, despite this indication that an inspection was imminent no inspection took place and almost three years passed before a MoHA official visited the home.

The short period of time the MoHA took to consider the application suggested that the decision to register the home was based on Miss Forrest’s initial assessment of it, with the expectation that a closer look at its operation would be achieved through inspection. In relation to the lack of inspection of Manor House in this post-registration period the Department of Health, Social Services and Public Safety (DHSSPS) as the successor body to the MoHA, pointed out that the MoHA would have been under pressure at that time coping with the requirements of the new legislation, including the registration of all voluntary homes.\textsuperscript{12}

We accepted this and recognised that at this time there were only two children’s inspectors to cover the whole of the province. We also noted from MoHA files and records maintained by providers of care that in addition to dealing with registration of voluntary homes the inspectors provided feedback on funding applications and advised on the development of services. However, as we set out in our findings in Chapter 20 which deals with Manor House, the lack of inspection at this time was significant because conditions for the children in that home deteriorated considerably in the period between registration being granted and the first inspection.

\textsuperscript{11} MNH 2927.
\textsuperscript{12} MNH 306.
We found that lack of resources for inspection of children’s homes by Government departments was a recurring issue, which we will return to later in this chapter.

The MoHA issued Statutory Regulations to support the implementation of the CYP Act 1950 - the Children and Young Persons (Voluntary Homes) Regulations (Northern Ireland) in 1952. These Statutory Regulations specified arrangements that providers of residential care for children were required to put in place for the monitoring of their homes. A copy of these Regulations can be found at Appendix 1 to this chapter.

In the 1950s inspection reports continued to be confidential to the MoHA and again the Government’s records management and disposal policy meant that only a few inspection reports from that period were available to us. The reports we saw continued to be brief and focussed mainly on the numbers of children being accommodated, the number of staff available to care for them, the physical condition of the home and the status of any funding application for improvements to the home. They did include confirmation that inspectors had examined records that homes were required to keep, such as those about the administration of corporal punishment. In the main, the comments relating to the direct care of the children were limited and somewhat superficial even in reports that contained critical comments about poor physical conditions in homes, including overcrowded bedrooms and inadequate toilet and bathroom facilities, poorly clothed children and low staffing levels.

Miss Forrest, recorded her concerns about the conditions in some voluntary children’s homes in a memorandum she sent to senior colleagues in April 1953, in which she provided her brief impressions of all the voluntary children’s homes. A copy of Miss Forrest’s memorandum can be found at Appendix 2 to this chapter. In relation to the two children’s homes in Londonderry and the two homes in Belfast run by the Sisters of Nazareth she reported poor conditions and inadequate staffing and, for example, described Nazareth Lodge in Belfast as “very institutional for older children, and babies in desperate plight.” She summarised her views about these four homes:

“I find these Homes utterly depressing and it appals me to think that these hundreds of children are being reared in bleak lovelessness.”

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13 HIA 288.
14 HIA 1463.
15 HIA 1464.
Despite Miss Forrest’s recommendation that the MoHA should press for a complete overhaul of these homes and assist in every way possible, the poor conditions in these and other voluntary homes, such as Rubane which was run by the De La Salle order in Kircubbin, were allowed to persist and in some cases worsen for a considerable number of years. When Miss Forrest visited the home Nazareth Lodge on 9 January 1954 she found little improvement in the conditions and recorded that while she found the babies “well-cared, well-clothed and fed”…

“The whole premises - except the parts immediately above the laundry and boiler-house - were dreadfully cold. …The babies’ hands were blue with cold and felt icy to touch. …The school-children are now the worst off and Rev. Mother agrees that they are not getting any sort of chance in life and cannot make proper development, especially those who have known nothing but this institutional care from babyhood. …What is needed here is really fundamental re-organisation so that these little creatures can have some individual loving care instead of being dragooned. Rev. Mother recognises this and even went so far as to say that children playing in the gutters of the slums were better off, if they had a father and mother to care for them, however poorly”.16

In the inspection reports we had access to, inspectors repeatedly recorded that they had made clear to providers that improvements were needed to the physical conditions in homes, but there was little evidence of the MoHA using its statutory powers, including the ultimate power of removing registration from a voluntary children’s home, to require improvements. We are aware of only two occasions when the MoHA actively considered removing registration from a children’s home. The first occasion was in 1953 when inspectors found dire physical conditions in Manor House. The Irish Church Mission (ICM) which ran the home agreed to remove the children and close the home. However, due to the intervention of the then Minister of Home Affairs, who advised a sympathetic approach, the ICM was allowed to retain registration of the home while first deliberating on its future and then planning for it to reopen. The second occasion was when the Good Shepherd’s home in Newry was failing to comply with fire regulations. Following letters from the Secretary of the MoHA to the Mother Superior and to the solicitors acting for the home the necessary work was completed and the fire certificate issued. Both these examples showed that an assertive approach by the MoHA achieved results.

16 SNB 16116.
The MoHA was not just dependent on inspection activity to ascertain the standards in children’s homes. The Child Welfare Council (CWC) was established under Section 128 of the CYP Act 1950 and was charged with the duty of providing advice to the MoHA about how it was performing in relation to its functions under the 1950 Act, and to make representations to the MoHA with respect to any matter affecting the welfare of children and young persons. As part of meeting this remit, the CWC visited children’s homes and reported its findings. In 1955 a Study Group established by the CWC visited eighteen of the, by then, twenty-four voluntary children’s homes registered by the MoHA, and almost all of the fourteen children’s homes provided by welfare authorities. The CWC reported the findings of the Study Group in its 1956 report *Children in Care*, which included the observation that a number of children’s homes visited, both statutory and voluntary

“seemed to be seriously understaffed especially for the care of babies and we feel that this problem affects most children’s homes from time to time because of the periodic fluctuations in the number and type of children who have to be cared for.”

The CWC recognised that it was difficult to set down an exact ratio of staff to children given the range of homes and the range of ages of children cared for in them. However, it proposed that excluding cooks and domestic help, the ratio of full-time staff for children under five should not be less than one to three, and where the children were older, this ratio might be reduced as far as one in six. We noted that in the MoHA’s 1956 report to the Governor of Northern Ireland, which was by then entitled *Report on the Administration of Home Office Services*, reference is made to the publication of the CWC’s report *Children in Care*. It received wide publicity, but no indication was given of the MoHA’s view of the findings in the report or of any action it proposed to take to address the concerns expressed within it about conditions in children’s homes in the province.

Miss Forrest accompanied members of the CWC Study Group on their visits to childrens’ homes, and we saw evidence in inspection reports and internal MoHA memoranda that she referred to the proposed staffing ratios and promoted them in discussions with voluntary homes. However, there was no formal action taken by the MoHA to implement these ratios, and chronic understaffing, particularly in voluntary homes run by religious

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17 HIA 1756.
18 HIA 552.
orders, was allowed to continue. In its 1966 report *Role of Voluntary Homes in the Child Care Service*, which Miss Forrest helped to draft, the CWC concluded:

“...in many voluntary homes there are at present insufficient staff to ensure that the demands made on them are reasonable and that the children receive sufficient individual attention.”

The Department of Health and Social Services (DHSS), as the immediate successor department to the MoHA, told the Hughes Inquiry that the MoHA had issued the 1969 *Residential Task in Child Care: the Castle Priory Report*, which proposed staffing levels to welfare authorities and it was regarded by them as a guide. It also confirmed that it had issued a circular in 1974, *Planning – Manpower Guidelines* which set out staff ratio guidelines for residential establishments. The DHSSPS accepted in its evidence to this Inquiry that the recommended staffing levels for children’s homes in the DHSS circular were lower than the Castle Priory guidelines but pointed out that the Eastern Health and Social Services Board had told the Hughes Inquiry that the Castle Priory standards were those it aspired to achieve.

The DHSSPS also referred to the DHSS’s evidence to the Hughes Inquiry that administering authorities of voluntary children’s homes were free to set their staffing levels and that any deficiencies in the levels set were addressed through inspections of the homes. It defended the approach of its predecessor departments and stated that it remained of the view that staffing levels in childrens’ homes should have been determined by the particular needs of the resident group and should have been sufficiently adequate to ensure that appropriate standards of care could be effectively promoted and maintained. However, it conceded in relation to the staffing levels in the 1950s and 1960s in children’s homes run by the Sisters of Nazareth in Londonderry:

“In an era and social climate when the causes supported by charitable work and philanthropic efforts were not the responsibility of the State staff costs may have been driven down to the extent that an acceptable standard of care for children was difficult or impossible to achieve.”

19 HIA 552.
20 SND 15678.
21 SND 15678.
22 SND 15678/9.
We consider that this concession did not go far enough, because while charitable work may not have been the responsibility of the State it was ultimately responsible for the welfare of children in voluntary homes and recognised that responsibility through the regulatory responsibilities and powers it vested in the MoHA for the registration and inspection of these homes.

26 There appeared to be a range of reasons why the MoHA did not take more assertive action to address unsatisfactory conditions in voluntary children’s homes. Some related to the availability of funding for improvements, the reluctance of some congregations to provide required information about their finances to support funding applications, and the views of politicians at that time about who should bear the cost of voluntary residential care for Roman Catholic children. We will consider these matters further in the section of this chapter dealing with the funding of residential childcare.

27 Part of the reluctance to take action, we concluded, was that the financial and logistical implications of closing a voluntary children’s home would have been considerable. Large numbers of children were being cared for in these homes, which were mainly funded through public donations and depended on members of religious orders working long unsociable hours, often for little or no wages. The cost of removing these children into the care of the State would have been significant, and even if it could be afforded there would not have been sufficient places in the available statutory children’s homes to accommodate them.

28 There was also evidence suggesting that the MoHA was careful to respect the rights of the Catholic Church to manage its own affairs and not to get into conflict with it about its wish to ensure that children born into its faith were raised within it. There was evidence of this in the placatory tone of correspondence from MoHA officials to Cardinal Conway in November 1965 about their concerns over the management of St Joseph’s school in Middletown, and their assurance to him in subsequent correspondence that the views of the Catholic Church would be of “paramount importance” in determining the provision of training school accommodation for Catholic girls in Northern Ireland. It was also apparent in later years, when in 1993 the police informed the Northern Ireland Office (NIO), which was then responsible for training schools, that it was investigating allegations of abuse by the then principal of St Patrick’s training school. Officials from the NIO and the Social Services Inspectorate (SSI) met with Bishop Farquhar in whose diocese the school was and with Father McCann, the Chair and Secretary of the Board of Management of the school, who decided that it
was not necessary to suspend the Principal while the police investigation was underway. Officials were clearly uneasy about this decision, but although they were representing the Government department responsible for the funding and regulation of the school they did not feel able to apply pressure and insist on the Principal being suspended but instead adopted a watching brief.23

29 It may also be the case that the MoHA’s approach of not intervening directly to require improvements or not using its power to remove registration from unsatisfactory homes was due to the views of senior officials about the approach that should be taken to inspection. We noted that in internal correspondence between senior civil servants dated 31 December 1954, an “A.R.” wrote to a “Mr Freer” about inspection of voluntary organisations24 in which he commented that staff in the MoHA “have gone much too far, and made too heavy weather out of the whole business.” A.R. recommended an informal approach to visiting to avoid any suggestion that the Ministry was responsible for the standards within an organisation and advised that officials should not get more deeply involved than they presently were.

30 It is probable that a combination of these factors were in play but the result, as will be seen in the chapters dealing with individual institutions, was that for many years children in some voluntary homes in Northern Ireland lived in conditions that MoHA inspectors knew were very unsatisfactory.

31 With regard to the promotion of good childcare practices within children’s homes, the DHSSPS told us that the MoHA sent the 1952 Memorandum on the Conduct of Children’s Homes to the secretary of every voluntary home in Northern Ireland25 and that it promoted a model of good practice which aimed to prevent neglect and the physical and emotional ill-treatment of children in residential care. A copy of the 1952 Home Office Memorandum can be found as Appendix 3 to this chapter. The DHSSPS made the point that:

“...the principles and good practice guidance contained in the 1952 memorandum had the potential, if implemented, to significantly diminish the potential for physical, sexual or emotional abuse and neglect of children in institutional care.”26

23 Day 149, p.60.
24 HIA 1586/7.
25 SND 15690.
26 SND 15992.
We accepted this point and agreed that the Memorandum provided relevant guidance and promoted the welfare, including the emotional well-being of children in care. However, no matter how enlightened this Memorandum was, its impact was severely limited because it was not fully implemented. We heard evidence that in many homes in the province, the principles and good-practice guidelines set out in the Memorandum, for example those concerning the treatment of enuresis and the type of punishment suitable for different ages of children, were not adhered to. This lack of adherence was the responsibility of those providing the care but it was also the case that it was not picked up or addressed through inspection.

Adherence to the Children and Young Persons (Voluntary Homes) Regulations (Northern Ireland) 1952

Given the limited resources available to the MoHA for inspections one would have expected it to focus on ensuring that voluntary organisations were meeting statutory regulations about the monitoring of their homes, so that it could place some reliance on internal governance identifying and addressing problems and promoting good childcare practice. However, we found that was not the case.

The statutory regulations placed specific duties and requirements on the “Administering Authority” of homes, which was defined in Regulation 3(1) as the “the person or persons carrying on the voluntary home.” We found that there was a lack of clarity in some homes about who was the Administering Authority. For example, in Rubane the Bishop of Down and Connor and senior priests appointed by him formed the Board of Governors, but the De La Salle order was responsible for the day-to-day management of the home. The MoHA did not seek confirmation of who was the Administering Authority, and although inspectors had regular contact with the home that contact was mainly with the brother in charge and only on a few occasions did MoHA officials engage with the Board of Governors.

The DHSSPS accepted in relation to Rubane in particular, but also more generally, that a fundamental purpose of inspection should be to ensure that statutory requirements were being met. It accepted that the MoHA had not clarified who was the Administering Authority for Rubane and that generally there was insufficient engagement with the Board of Governors. This lack of engagement was particularly significant, because it meant that when inspectors engaged with the De La Salle Order about alleged abuse in the home they depended on what it told them about the outcome
of investigations into such allegations without reference to the Board of Governors.

36 Regulation 4(2), of the statutory regulations was one of the most important in relation to monitoring the care and welfare of children in voluntary homes. It required that:

“The administering authority shall make arrangements for the home to be visited at least once in every month by a person who shall satisfy himself whether the home is conducted in the interests of the well-being of the children, and shall report to the administering authority upon his visit and shall enter in the record book referred to in the Schedule hereto his name and the date of his visit.”

37 This regulation, which was aimed at ensuring the well-being of the children being cared for in homes, was not consistently met by voluntary agencies or enforced by the MoHA, or subsequently the DHSS. This lack of enforcement was significant as we found that internal monitoring of voluntary children’s homes by management committees was mainly poor. The exceptions to this were Manor House, which when it reopened had a proactive management committee that concerned itself with the quality of care being provided to children, and Barnardo’s homes, which as part of a UK organisation had detailed structures and procedures for internal monitoring of its homes.

38 We found that the management committees of homes run by Roman Catholic orders, particularly in the 1950s and 1960s, generally concerned themselves with practical and financial matters and did not specifically monitor the quality of the care the children were receiving, despite the statutory regulation requiring them to do so. This may have been partly because the efforts to secure and manage available funding had to be such a priority. However, it also appeared that respect for nuns and brothers, and an expectation that their Christian beliefs would ensure they provided good and loving care, meant that their practice was not closely monitored and their assurances about how well children were doing in their care were readily accepted.

39 There was also an expectation and acceptance that the work and conduct of nuns and brothers would be overseen by their religious orders. Senior members of relevant religious orders did make regular visitations to homes.

27 HIA 288.
However, we found that visitations focused on the religious and spiritual life of the community and did not sufficiently monitor the quality of the care being provided to children. The references to the children tended to be about their activities, accomplishments and plans, although there were some references to plans to improve the physical facilities for them. The acceptance and reliance on the internal governance of orders also led to situations where allegations of physical and/or sexual abuse of children were dealt with privately as an internal matter by orders, without reference to the relevant Management Committee/Board of Governors, or to welfare authorities responsible for the children making the allegations, or to the police.

We concluded that if the MoHA had confirmed the Authorising Authority for homes, made clear the regulations they were required to meet and enforced monthly visiting there would have been a greater likelihood that the legislative focus on the care and well-being of the children would have been realised. The DHSSPS conceded that it was a systemic failure of its predecessor bodies not to have ensured that the requirements of the 1952 Regulations were being met.

It also acknowledged with regard to Rubane that:

“...rigour of inspection, proper monitoring by responsible authorities and clearly defined management responsibility and accountability are essential to the well being of children in care.”

We agreed with this analysis and, as will be clear from the following chapters, we were critical of where inspection and monitoring did not happen or was lacking in rigour, focus and impact. However, all the evidence we considered pointed to Miss Forrest being a conscientious and astute inspector who was concerned about children and the conditions they were living in and who worked hard to support staff in homes to make necessary improvements, and we commend her personal efforts.

**Regulation of statutory homes**

Section 89 of the CYP Act 1950 imposed a general duty on welfare authorities to exercise their powers with respect to children in care as to further their best interests and to offer them opportunities for the proper development of their character and abilities. Section 92 placed a specific
duty on welfare authorities to provide accommodation for children in their care “where it is not practicable or desirable for the time being to make arrangements for boarding out”\textsuperscript{29} and set down requirements in relation to the provision of that care.\textsuperscript{30}

These requirements included the provision of specific types of homes for children with different needs, the promotion of the religious upbringing of children and, in support of a policy bias towards fostering, the setting of time limits on how long children should be placed in residential care. Welfare authorities were also required to seek the approval of the MoHA for the appointment, qualification and training of staff in children’s homes. Section 92 (5) of the Act provided that the MoHA could close a home if it was “unsuitable for the purposes or if the conduct of the home failed to comply with regulation.”\textsuperscript{31}

Following the passage of the CYP Act 1950 there was a rapid increase in the number of children received into statutory care. In 1947, 1,000 children had been placed in care by private arrangement; by 1959 this number had reduced by 249 to 751. In the same period, the number of children in statutory care more than doubled, with an increase from 501 children in 1947 to 1,148 children in 1959.\textsuperscript{32} The policy bias for fostering was implemented in relation to these 1,148 children, with 728 of them boarded-out, 226 in statutory children’s homes and 158 of them placed in voluntary children’s homes by welfare authorities.

Section 136 of the CYP Act 1950 provided for the MoHA’s powers in relation to inspection of voluntary children’s homes to extend in like manner to any place other than a voluntary home in which a child was maintained under the Act, thereby giving the MoHA the power to inspect statutory children’s homes and hostels.\textsuperscript{33} The Children and Young Person (Welfare Authorities’ Homes) Regulations (Northern Ireland) 1952, which were issued on foot of the legislation, set down requirements for how welfare authorities should monitor the care provided in their children’s homes. Regulation 5 imposed a requirement that the Children’s Officer, which each welfare authority was required to appoint, should visit each children’s home at least once a month and submit a report on these visits.

\begin{itemize}
\item \textsuperscript{29} SND 164.
\item \textsuperscript{30} HIA 228.
\item \textsuperscript{31} HIA 229.
\item \textsuperscript{32} HIA 1096.
\item \textsuperscript{33} HIA 268.
\end{itemize}
to the Welfare Committee. A similar requirement extended to the Welfare Committee. Regulation 5(1) required that each children’s home should be visited at least monthly by a member of the Welfare Committee who had the responsibility to satisfy himself that the home was conducted in the interest and for the well-being of the children and to report back on the visit to the Welfare Committee. Welfare authorities were also required to submit a return to the MoHA each quarter about the children accommodated in residential care.

47 Kincora and Bawnmore Boys’ Home were the only statutory homes we considered which operated in this period. Taking Kincora as the example of the approach adopted it was clear from available evidence that the Belfast Welfare Authority established the necessary visiting and reporting processes to meet these monitoring requirements but did not fully implement them. In the period from 1960 to 1962, only about 50% of the required reports from the Children’s Officer were minuted. However, this situation improved, and from 1968 until 1973 almost all of the required visits were completed, except for very occasional gaps during the summer holiday periods. In contrast, the Hughes Inquiry found that while the requirement for visits by members of the Welfare Committee was largely met in the years 1960 to 1965, the frequency of statutory visits declined thereafter, and that such protection as this monitoring offered residents in Kincora was largely absent in the period January 1972 to September 1973. The Hughes Inquiry accepted that not all visits may have been minuted and recognised the limitations of such visits, e.g. how willing teenage boys would be to disclose abuse to visiting committee members. However, it concluded that the Belfast Welfare Authority’s record of compliance with its statutory duty to undertake visits to Kincora from 1966 to 1973 could not escape criticism and we agree with that conclusion.34

48 The regulations did not extend to requiring regular visits to individual children in residential care or regular reviews of their progress. The Health and Social Care Board (HSCB) accepted from the evidence provided to this Inquiry that too often, during this period, there were no records or recollections of visits made by social workers to children placed in care and that some children were only visited once or twice a year. It conceded that generally in the period before 1968 the policy and practice of field social workers making regular visits to children placed in residential care was underdeveloped in Northern Ireland by comparison with other regions

34 KIN 75223.
of the United Kingdom and accepted that was a failure on the part of its predecessor organisations.\(^{35}\)

Robert Moore, the Children’s Officer in the Belfast Welfare Authority, attempted to address this situation in 1967 by introducing a policy of a minimum monthly visit to each child placed in a home. However, the HSCB accepted from evidence provided about witnesses to the Inquiry, that this policy was not consistently applied. Also, as late as March 1985, Mr Bamford of the Southern Health and Social Services Board (SHSSB) told the Hughes Inquiry that monthly visits were not possible within the Board’s existing staff resources and had to be on the basis of visiting children “as often as is necessary to provide him with meaningful support, to maintain interests in his needs as an individual and to maintain his relationship with relatives and friends and those significant to him.”\(^{36}\)

While accepting that lack of regular contact with children placed in residential care was a failure of its predecessor organisations, the HSCB suggested that part of the reason for this failure was that there was no statutory requirement for such visits and that the Government had placed different statutory safeguards on children who were boarded out as opposed to those in residential care.\(^{37}\) The HSCB also pointed out that the MoHA did not provide any guidance about the maintenance of contact with children in care, although it “had overarching responsibility for policy and services to children and ultimate responsibility for children placed in residential care.”\(^{38}\)

The DHSSPS responded to this criticism and pointed out that where duties are conferred directly on a body, such as the general duty placed on welfare authorities in primary legislation to further the best interest of children or the specific duties contained within the statutory regulations, it is the responsibility of those on whom the duty is conferred to determine how best these might be discharged.\(^{39}\)

We agreed with the HSCB that a statutory requirement would have been helpful and would have given the maintenance of contact with children placed in care the priority it deserved amongst competing demands. However, we considered that even in the absence of such a requirement,

\(^{35}\) GOV 656.
\(^{36}\) KIN 74353.
\(^{37}\) GOV 655.
\(^{38}\) GOV 654.
\(^{39}\) GOV 794.
welfare authorities who had taken the significant step of placing children in residential care should have recognised and met their responsibility for maintaining contact with those children.

53 There were also no statutory requirements for the review of the care and progress of children in care. Mr Moore also introduced a policy in the Belfast Welfare Authority in 1967 for such reviews to take place every three months. We saw evidence of reviews taking place in other authority areas, and of welfare committees receiving reports about the circumstances of individual children and plans for their future. However, as the HSCB accepted, an overview of the case files available to this Inquiry showed that there were inconsistencies in the convening of reviews.\textsuperscript{40}

54 We were of the view that these inconsistencies in the level of contact maintained with children placed in care and in the review of their progress were particularly significant in relation to children placed in voluntary homes by welfare authorities, since the welfare authorities were not directly in control of the policies and practice in those homes. Regular visiting by social workers would have enabled a professional eye to be cast on the general conditions and practices in these homes.

Welfare Authorities’ monitoring of standards in voluntary homes

55 The welfare authorities remained responsible in law for children they placed in voluntary homes and therefore had a responsibility to assure themselves of the care provided to those children. The HSCB accepted in this regard that the voluntary children’s homes used by welfare authorities in this period were too large, and due to their size and institutional nature were not conducive to providing a homely environment for children.\textsuperscript{41} It also made a specific concession that the routine moving of boys on from Nazareth Lodge to Rubane when they reached secondary school age, largely dependent on their performance in the transfer examination, was not in keeping with the legislative requirement imposed on welfare authorities under section 89 of the CYP Act 1950. This section required welfare authorities to exercise their powers with respect to children in their care so as to further their best interests and to afford them opportunity for the proper development of their character and abilities.\textsuperscript{42}

\textsuperscript{40} GOV 657.
\textsuperscript{41} GOV 650.
\textsuperscript{42} GOV 653.
However, the HSCB pointed out that while social worker witnesses to the Inquiry spoke about the institutional nature of the care provided in large voluntary homes they also said that they considered the homes provided a satisfactory standard of physical care and that the children were safe. They also referred to the renovations that were made over time to voluntary homes to improve living conditions for children, such as the creation of smaller living units.

The HSCB argued that given the range and scope of the statutory duties and powers placed on the MoHA in relation to the regulation of voluntary children’s homes, including powers to limit the numbers of children in a home and remove registration if mandatory regulations were not being complied with, it was reasonable for the HSCB’s predecessor bodies to take a voluntary home’s registration as assurance that it met basic standards of care.43

We accepted this point and agreed that regulation properly applied by the MoHA should have enabled welfare authorities to rely on a voluntary home’s registration. Nevertheless, it is the case that welfare authorities placed children in homes such as Rubane, Nazareth Lodge and Termonbacca at times when they were clearly overcrowded, had inadequate facilities and low staffing levels, and we consider those circumstances should have led them to question whether it was appropriate to place more children in those homes. We recognised that in some circumstances there may not have been any viable alternatives, but that should have spurred the welfare authorities to consider how to require and support improvements in the homes they used in order to protect and promote the well-being of the children they placed in them. These conclusions are set out in the chapters dealing with these homes.

As part of the Warning Letter process the HSCB stated that the placing of children in these homes was the responsibility of individual social workers and that they would not have been privy to information as to the number of children, staffing levels and overall facilities in the homes. We did not accept this response. When children were received into care by a welfare authority, whether on a voluntary basis or as a result of a court order, they were placed in the care of the corporate body not the individual social workers who made the practical arrangements for their reception into care. It was therefore the corporate body that was responsible for their ongoing

43 GOV 668-669.
care. While social workers acted on behalf of welfare authorities they did so within management structures and would have had to seek approval for the placement of children in voluntary homes not least because of the financial implications of such placements. Also, while their concern was the well being of individual children there were examples, which we have referred to, where social workers reported general concerns about practices or conditions in voluntary homes and allegations of physical abuse to their senior managers. We recognised that welfare authorities did not have a regulatory role in relation to voluntary homes but this did not mean that they had no responsibility to consider the adequacy and suitability of the placements they were using and the facilities they were paying for.

There were examples of welfare authorities taking appropriate action in response to concerns raised about voluntary homes. For example, in 1964 when County Down Welfare Authority received allegations from a boy they had placed in Rubane that he was being sexually abused in the home they promptly referred the matter to the police and the MoHA. The Belfast Welfare Authority, which also had boys placed in the home, was informed about the allegations, and a senior member of staff from that authority visited the home to assure himself that appropriate action had been taken and that the home remained suitable for the placement of boys.

Bob Bunting succeeded Mr Moore as Children’s Officer in Belfast Welfare Authority in November 1971. He told us that in that role he received a copy of three monthly review reports of all the children in the authority’s care who were accommodated in residential care. He explained this meant he was informed about standards of care in the voluntary children’s homes used by the Belfast Welfare Authority. He told us that he raised any concerns about the care being provided in a voluntary home with the officer in charge of the home and raised any significant concerns with the MoHA.44

We saw evidence of this when it came to Mr Bunting’s attention that Nazareth Lodge had allowed couples to visit children and take them out of the home without prior assessment of their suitability. He informed that home and other voluntary homes that couples and families had to be approved by the Belfast Welfare Authority before they could take out children who were the responsibility of that authority.45
The period 1972 to 1995

63 The early 1970s saw significant changes being introduced to the structures for the delivery of statutory social services and the arrangements for the regulation of residential care services. In December 1969, Brian Faulkner, the then Minister for Development for Northern Ireland, initiated a review of the organisation of local government in Northern Ireland. The report of the review, known as the Macrory Report, was published in June 1970. It recommended a major reorganisation of local government in Northern Ireland, including the reduction of the number of local authorities from 72 to 26 and the integration of health and social services. To achieve this integration it recommended that hospitals, community health and social services should be organised as a single system through the creation of four Health and Social Services Boards (Northern, Southern, Eastern and Western Boards).

64 This recommendation was accepted and then developed by consultants Booz-Allen and Hamilton and published in a report dated February 1972 called An Integrated Service: The reorganization of health and personal social services in Northern Ireland. In this report the respective role and responsibilities in the new integrated health and social services were described as:

“The Ministry of Health and Social Services should be responsible for overall objectives, policies and resource allocation...the Area Boards for planning and monitoring of services and District Units for managing and delivering services.”46

65 The Health and Personal Social Services (NI) Order 1972 (the 1972 Order) established the Health and Social Services Boards (the Boards), which replaced welfare authorities. From 1 October 1973 the Boards operated through a structure of Districts that delivered the services at a local level.

66 The Departmental responsibility for regulation of residential childcare services also changed at this time. The provisions of the CYP Act 1950 in relation to the powers of inspection by the MoHA had been re-enacted through Sections 130 and 168 of the Children and Young Persons Act 1968 (CYP Act 1968). In 1971, the MoHA’s two children’s inspectors, while retaining their functions in respect of the MoHA, became part of the Social Work Advisory Group (SWAG) within the then Ministry of Health.

46 FJH 20634.
and Social Services under the direction of a Chief Social Work Advisor.\textsuperscript{47} The Departments (Transfer of Functions) Order (NI) 1973 transferred the remaining functions of the MOHA under the 1968 Act to the Department of Health and Social Services (DHSS) including responsibility for the registration of voluntary children’s homes.

67 The CYP Act 1968 had removed the requirement for welfare authorities to have the post of Children’s Officer and the HSCB suggested that this created a lacuna in the allocation of responsibility for statutory visiting of children’s homes until the DHSS issued the Conduct of Children’s Home Direction (Northern Ireland) 1975. Bob Bunting told us that he had to make provision for these responsibilities to be covered within the EHSSB until they were again regulated for in 1975.

68 The DHSSPS disagreed that this lacuna was created and stated that statutory regulations for monthly visiting of statutory children’s homes continued to be in force between 1968 and 1975. The DHSSPS also pointed out that the evidence provided by the EHSSB to the Hughes Inquiry showed that in the period 1963 to 1973 the statutory duty for visiting children’s homes was delegated from the Children’s Officer to other members of the Residential and Day Care management team and that this delegation continued after re-organisation.

69 The Conduct of Children’s Home Direction (Northern Ireland) 1975, referred to above, set down revised requirements for the monitoring of statutory children’s homes and hostels to reflect the new organisational arrangements and reporting structures in Boards. Section 3(3) required a Visiting Social Worker to visit a home at least once in every month and to submit a report in writing through the District Officer to the Director of Social Services. The Director of Social Services had the responsibility to bring any matters of concern or interest arising from these reports to the attention of the Personal Social Services Committee. In addition, under Section 3(2) of the Direction, a member of the Personal Social Services Committee was required to visit each children’s home at least once in every quarter to satisfy her/himself that the home was conducted in the interests and well-being of the children and to report back to the Committee. These monitoring activities were expected to focus on the overall standards of care and practice in the homes rather than the individual well-being and progress of individual children.

\textsuperscript{47} SND 15665-15666.
The HSCB accepted that each Board devised its own approach to meeting the monitoring requirements and that for around ten years after re-organisation no Board had developed written guidance for those undertaking the monitoring. The HSCB also accepted that generally there had been a failure to consistently meet the statutory requirements placed on Boards to monitor their children’s homes.

However, in accepting this failure it pointed to its reading of the Hughes Inquiry in this respect that visits by Personal Social Services Committee members and line managers were unlikely to detect homosexual abuse in the absence of a complaint or seeing a physical representation of the child. The HSCB went on to submit “The Board considers this would equally extend to other forms of abuse.” We did not accept this conclusion. We agreed that because of its nature signs of sexual abuse would have been hard to detect. However, we considered that it would have been possible for appropriately trained visitors who visited a home regularly and maintained consistent contact with the children to detect signs of neglect and possibly to pick up signs of intimidation, fear and physical abuse.

We also questioned the effectiveness of the monitoring that did take place. We are in no doubt that the WHSSB took a conscientious approach to monitoring of its children’s homes by senior managers and members of its Personal Social Services Committee and that their findings were recorded and reported. A significant amount of time and effort was put into these monitoring activities and pertinent issues were identified. For example, the impact that emergency placements and lack of appropriate placements for children to move on to had on Harberton House’s ability to meet its remit were clearly identified, and the adverse effects on the children resident in the home were clearly understood. However, these circumstances were not effectively addressed. Also, despite monitoring of Kincora, from May 1958 when the hostel opened until September 1964, the warden was the only member of care staff and was expected to work for long periods by himself with very limited time off. We consider that the effort expended in monitoring and the costs entailed are only justified if the monitoring actually has a positive impact on the operation of the home and the quality of care provided to the children residing in it. Otherwise the activity could become an end in itself and give a false sense of assurance that the context, facilities and practices in a home were being adequately attended to.

48 GOV 649.
**Sheridan Report**

A significant review of the regulation of children’s homes was undertaken in 1982 as a result of the uncovering of sexual abuse of boys in the Kincora hostel run by the EHSSB. The then Secretary of State for Northern Ireland, Mr Prior, told the House of Commons, on 18 February 1982, that while police investigations and trials into the abuse of boys in Kincora were not yet complete he was seeking immediate advice and assistance from the relevant department in England to ensure that all appropriate steps were taken to improve the supervision and management of homes and hostels for children and young persons. Subsequently, a three-person team led by Miss Sheridan, Deputy Director of the Social Work Service, was appointed. The team focussed on:

(a) the overall position and role of the Department in relation to children’s homes;

(b) in particular the extent and nature of the Department’s responsibilities for inspection and supervision;

(c) what additional steps the Department has been able to take since 1980 to improve or cause to be improved aspects in (ii);

(d) what would be possible and necessary for the future, and in particular whether any clarification of roles was necessary or any additional help required.49

In the opening comments of her report Miss Sheridan set out her understanding that when SWAG was set up in 1971 it was not able for some years to recruit staff with up-to-date knowledge, experience and qualifications in childcare. She commented that this situation reflected the challenges faced by the Boards when they were set up in 1973, in that they only had a limited number of trained childcare officers, and in common with the rest of the UK had only a tiny proportion of trained residential childcare staff. Miss Sheridan observed that the staffing position in SWAG had recently been strengthened with the appointment of advisers, qualified and experienced in all aspects of childcare.

Miss Sheridan’s report was provided to the DHSS in Northern Ireland in June 1982, and Miss Brown provided a follow-up report to the DHSS in July 1983 analysing what action had been taken in response to the Sheridan Report. She reported that as of 9 July 1983 (some three and a half years after

49 HIA 641.
matters came to light in Kincora) 42 of the 60 residential childcare facilities in the province had been inspected, and the remaining eighteen homes were still to be inspected. Reports of nineteen of the completed inspections had been submitted to the DHSS and the remaining twenty-three were in the course of preparation. Five follow-up visits had been completed.

Following consideration of Miss Brown’s report the Permanent Secretary of the DHSS, Mr Dugdale, wrote to his Assistant Secretary, Mr Wilson:

“...there is clearly a lot going on within the Department on these matters and there are also some indications of a positive response by the agencies in the field. This is all to the good. But I am concerned at the length of time which the whole operation is taking. Especially if – which is by no means beyond the bounds of possibility – the spotlight on Kincora and the other homes where criminal offences were committed swings away from the investigations conducted by the RUC and back to the failings of the child-care system, the Department could be exposed to very damaging criticism for failing to tackle the issues with the urgency that their gravity demands.”

Mr Dugdale’s fears were justified when during the Hughes Committee of Inquiry into Children’s Homes and Hostels, the Chief Social Work Adviser, Mr Armstrong, was held to account for the lack of inspection by the SWAG in the 1970s and early 1980s, and the delays post-Kincora in SWAG completing a full round of inspections and follow-up visits to all children’s homes in the province.

Mr Armstrong had been appointed as Deputy Chief Social Work Adviser in May 1974, before being promoted to the post of Chief Social Work Adviser in August 1983, and he was therefore able to speak from personal experience of the challenges SWAG faced in resourcing inspection activity.

He explained that in 1974 the newly created DHSS took over responsibility for the inspection of all residential childcare services with the exception of training schools. It was recognised that the two children’s inspectors who had transferred from the MoHA, now called Social Work Advisers, could not cover all the required inspections and an additional Social Work Adviser was appointed in August 1975. It was also decided that inspection reports should contain more detail and a revised format was agreed in February 1976 with a view to having annual reports prepared on
all children’s homes in the province. However, this plan did not materialise because of lack of resources. Just as the additional third Social Work Adviser completed his six month induction period, Miss Forrest retired and it took a year to replace her. As it was not possible for two Social Work Advisers to report on all voluntary and statutory homes it was decided that they should concentrate on voluntary homes.

Mr Armstrong explained that SWAG decided on this approach because, in the main, voluntary homes did not have the well defined structures for administration and management of homes that statutory authorities had and it was therefore considered that they needed “more professional attention.”51 In response to this explanation the Hughes Inquiry noted that the only SWAG report extant for Nazareth Lodge for the period 1973 to 1983 related to an inspection carried out in October 1983, which was after the abuse in Kincora came to light, although it accepted that Social Work Advisers had visited the home on four other occasions from 1973. The Hughes Inquiry found this level of inspection to be unsatisfactory, especially in light of Mr Armstrong’s evidence that SWAG tended to devote more attention to voluntary rather than statutory homes during the 1970s.52

Mr Armstrong explained that when events in Kincora were uncovered the approach to inspection was reviewed and it was decided that more detailed inspections of homes were required and a new format of two inspectors spending three to four days in a home was introduced.53 He confirmed that in the period between October 1980 and March 1984 all the children’s homes in the province were inspected.

Mr Dugdale’s recorded concerns in 1983 about the slow progress in completing the post-Kincora programme of inspections were put to Mr Armstrong, who accepted that even with the inspection team being augmented by two additional inspectors it took considerable time to complete inspections. He also conceded that because the priority was to complete initial inspections, follow-up inspections which were supposed to take place a year after initial inspections to monitor the progress homes had made in meeting recommendations, had been delayed. He explained that this delay in monitoring progress meant that the effectiveness of inspections could not be judged.54

51 KIN 70394.
52 HIA 915.
53 KIN 70394.
54 KIN 70406-70408.
Mr Armstrong was shown to a memo of 12 May 1980 written by his predecessor, Mr Wilde, in which he indicated that the role of SWAG was seen not so much as regulatory and inspectorial but as promotional and educational in terms agreed in advance with Boards and voluntary organisations. Mr Wilde had commented that this approach had created general misunderstanding and confusion, both in the statutory and voluntary sectors, about the Department’s relative powers and the policy of SWAG in exercising them. Mr Armstrong suggested Mr Wilde was referring to voluntary organisations being confused because although the powers of registration and inspection were vested in the DHSS and exercised through SWAG, Boards as the main users of voluntary residential childcare also had to monitor the quality of the care provided. He also indicated that there was similar confusion in the statutory sector about the inspectorial role of SWAG vis-a-vis the monitoring role of the Boards.

Mr Armstrong accepted that the term ‘inspection’ had fallen into disuse and there had been more emphasis on discussion and provision of advice. However, he emphasised that the power of inspection remained with the DHSS and confirmed that from 1980, under his leadership, it was made very clear that SWAG was undertaking inspections. By the time the Hughes report was published in December 1985 all voluntary and statutory children’s homes in the province had been inspected and follow-up visits had also been completed.

In response to criticisms about the lack of inspection activity by SWAG from 1973 to 1980 the DHSSPS told us that during that period the work of SWAG was characterised by wider childcare consultation and advisory responsibilities and periodic visits to, but fewer inspections of, children’s homes. It asserted that the retraction of inspection activity was not a gradual lapse into complacency nor a dereliction of duty on the part of the DHSS but a change of focus driven by the Seebohm Report, which recommended that the role of the inspectorate should be “not so much regulatory as promotional, educative and consultative.”

The DHSSPS stated that SWAG’s consequent change of focus to establishing supportive and advisory relationships with both voluntary

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55 KIN 70409.
56 KIN 70411.
57 HIA 965.
58 SNB 9566.
59 Seebohm report Page 197.
and statutory providers of residential childcare services and assisting the DHSS in the social work aspects of its functions was implementing a Departmental policy approach that was part of a UK-wide Government policy on creating new relationships with local providers.60  61

During the Inquiry, Dr Harrison, on behalf of the DHSSPS, communicated with Sir William Utting, a former Social Services Inspectorate Chief Inspector for England and Wales, about this shift in focus. Sir William was the Director of Social Services from 1970 to 1976 for the Royal Borough of Kensington and Chelsea and he recalled that at that time statutory children’s homes were not inspected but that the Social Work Service (SWS), the English equivalent of SWAG, visited voluntary children’s homes. 87

Dr Harrison also contacted David Gilroy CBE, former Deputy Chief Inspector of the SWS. Mr Gilroy confirmed that although the SWS did not systematically visit or inspect statutory children’s homes between 1976 and 1985 it did visit voluntary children’s homes under the powers of inspection vested in the Secretary of State. He explained that these visits were conducted in an advisory, supportive and developmental style, but that following each visit, a report on the home was forwarded to the Child Care Branch within the English DHSS. These reports were not shared with the administering authorities of the homes or local authorities, but a follow-up letter providing feedback on the visit was sent to the home’s administering authority. Mr Gilroy explained that if issues of concern or matters requiring further attention were identified, SWS, with the agreement of the Child Care Branch, would undertake a further visit to the home or take such other action as deemed necessary.62

The DHSSPS accepted that the DHSS’s explanations to the Hughes Inquiry for lack of inspection of children’s homes focussed on resourcing issues and commented:

“It would appear, however that the implications of the Seebohm report for the intended role of SWAG were either not known or not communicated by personnel who provided evidence to the Inquiry.”

We were not persuaded by the DHSSPS’s explanation for the lack of inspection. No documentary evidence was provided to support it except that Mr Wilde used similar language about inspection in his memorandum

60  GOV 003.
61  SNB 9570.
62  GOV 1300.
referred to above as that used in the Seebohm report. The DHSSPS indicated:

“...Whilst Mr Wilde was plainly familiar with the Seebohm terminology he was seemingly unfamiliar with the policy context.”

We found it inconceivable that Mr Wilde, as the Chief Inspector, would be unfamiliar with the policy context for inspection. We also noted that there was no reference in the Sheridan Report to a deliberate change of policy in relation to inspection. Moreover, Mr Armstrong, who held senior positions in SWAG from 1974, told the Hughes Inquiry that the lack of inspection activity, and in particular the failure to implement the policy of annual inspections agreed in 1976, was due to a lack of resources. We consider that given Mr Armstrong’s role and his length of service with SWAG he would have been knowledgeable about the policy background to inspection and competent to explain it. Also, as referred to above, in an internal SWAG report of May 1980, about a new approach to inspection, it was recognised that advisers had not been able to devote sufficient time to each home to allow them to engage in thorough inspections.

The DHSSPS did go on to concede in its submission to this Inquiry about finance and governance matters that:

“Had the agreed appropriate action been taken in 1976 to strengthen DHSS scrutiny, this might have helped minimise further opportunity for abuse to occur within children’s homes.”

We accepted and agreed with that concession. As part of the Warning Letter process the Department of Health (DoH), the successor department to the DHSSPS, reiterated the explanation that the policy developed in the early 1970s of ‘visiting’ children’s homes as opposing to conducting regular annual ‘formal inspections’ of homes was adopted as a result of the proposals contained in the Seebohm report. The DoH accepted that the DHSS’s decision in 1976 to amend this approach and adopt a policy of visiting and making a full report on all children’s homes annually was not implemented between the years 1976 and 1981 and that this was a systemic failing. However, it stated that whilst visits by SWAG were aimed at providing professional advice to homes they also included a degree of scrutiny including consideration of poor practice and encouragement towards best practice and that therefore it would not be right to suggest that the concept of ‘inspection’ was abandoned.

63 GOV 784.
However, our view that the move away from annual inspection visits was a resource issue and not the result of a change of policy in response to the Seebohm report was strengthened through consideration of an internal DHSS paper dated 28 May 1980, which was contained in a DHSS file we received from PRONI. The purpose of the paper was to consider a new programme of inspections of children’s homes and training schools and to clarify the inspection process, including the methods to be used and the format for reports. The existing approach to regulation of children’s homes was outlined in the introduction to the paper:

“Social Work Advisers (Child Care) visit and write reports on voluntary and statutory homes as part of their normal duties. The reports are in the main concerned with material provisions, management, regimes and support services. They may give some impression of standards of care but our advisers have not been able to devote sufficient time to each home to allow them to engage in a thorough inspection. This paper attempts to formulate a plan for regular inspections of all homes by the Department’s advisers.”

We consider that it is clear from this contemporaneous DHSS paper that lack of resources rather than policy direction was the reason for reduced inspection activity.

We do not underestimate the demands on the limited number of staff in SWAG in the 1970s and early 1980s and recognise that they were contributing to policy developments and consultations at that time as well as maintaining some limited contact with children’s homes. We accept that the visits SWAG made to children’s homes meant that the children in those homes had the benefit of some external scrutiny of the conditions they were living in and the care they were receiving. However, as will be clear from our findings in relation to individual children’s homes we found the lack of inspection by SWAG in this period amounted to a systemic failing by the DHSS to ensure these homes provided proper care.
Implementation of other recommendations in the Sheridan Report

Respective roles and responsibilities in inspection and monitoring

94 The Sheridan Report confirmed the view of Mr Wilde that the respective roles and responsibilities of the DHSS and the Boards in supervising and inspecting statutory homes required clarification. It also identified that clarification was required in relation to the monitoring of voluntary homes, including the role of Boards in exercising satisfactory supervision of the care of children they placed in voluntary homes. The report suggested that achieving this clarity and developing more effective monitoring by Boards and voluntary organisations would enable the DHSS in the long term to assume a greater element of “monitoring the monitors.”

95 In response to these recommendations, the DHSS issued a circular entitled Monitoring of Residential Child Care Services on 21 October 1983, in which it clarified that the Boards, as agents of the DHSS, were responsible for the provision of statutory residential childcare services and for monitoring the delivery of those services. It further clarified that the Boards were accountable to the DHSS for the way in which they discharged these responsibilities in terms of the quality, range and availability of services and that the DHSS had to be satisfied that each Board had adequate monitoring arrangements.

96 In order for the DHSS to be satisfied, the Boards were required to submit detailed statements of their monitoring arrangements by the end of 1983 and thereafter to produce and submit annual monitoring statements outlining “the elements monitored, the methods used, the trends observed, the areas of concern identified and the action taken to remedy deficiencies”. A list of the “main elements to be monitored” was also provided by the DHSS.

97 We found that these structural arrangements were less straightforward in practice when SSI inspectors were concerned about the WHSSB’s plans to close Fort James children’s home, and in particular the impact it could have on the other children’s home in the immediate area. We noted that in contemporaneous internal SSI documentation about the matter an inspector identified the serious implications the closure would have for

65 HIA 654.
66 KIN 75356.
Harberton House and the structure of residential services within the Foyle Unit of Management more generally.

98 The SSI wrote in relatively strong terms to advise against the planned closure, but this advice was not accepted and the closure went ahead. When it was informed that the WHSSB intended to increase the number of beds in Harberton House to compensate for the closure of Fort James the SSI wrote in even stronger terms to strongly advise against that course of action.\textsuperscript{67} The WHSSB responded to explain that the increase in beds in Harberton was an interim measure pending a reduction in the need for residential care stemming from a greater emphasis on preventive work. An inspector described that aspiration as “somewhat heroic, particularly given that the number of foster parents in the Western Board area is declining.”\textsuperscript{68}

99 The SSI communicated its concerns to the WHSSB’s Director of Social Services but when this did not have the desired effect as far as we are aware there was no attempt by the SSI or the DHSS to escalate these concerns to Board level. Also, although, according to the circular, the WHSSB was accountable to the DHSS for the “quality, range and availability” of its residential childcare services we saw no evidence of the DHSS holding the WHSSB to account on the basis of the SSI’s concerns. This suggested to us that despite the stated position in the circular there continued to be a lack of clarity in practice about the respective roles of the DHSS and the Boards and the authority relationship between them. We concluded in Chapter 23 dealing with Fort James and Harberton House that in order to avoid intervening too directly in the provision of services neither the DHSS nor the SSI, acting on its behalf, responded as assertively to the WHSSB as they should have, given inspectors’ assessment of the adverse implications of the closure of Fort James and the increase in beds in Harberton House.

Continuing disagreement about the respective roles of the boards and department

100 It was also the case that despite the work in response to the Sheridan Report to clarify the roles and responsibilities of the DHSS and the Boards, continued disagreement about them was a significant and consistent feature of the evidence we received from the DHSSPS and the HSCB

\textsuperscript{67} FJH 40054.
\textsuperscript{68} FJH 40053.
throughout this Inquiry. For example, the respective responsibilities of the DHSS and the Boards for the overall quality of residential childcare were a continuing point of contention. The HSCB, in its submission in relation to governance, stated that the DHSS held “ultimate responsibility for residential childcare and the children placed therein” and referred to the evidence Dr Maurice Hayes, the Permanent Secretary, gave to the Hughes Inquiry, in which he accepted during questioning that the Department held the ultimate responsibility. 69

101 The DHSSPS responded to this assertion by describing it as simplistic and referred us to a DHSS circular issued in 2006, Responsibilities, Accountability and Authority of the Department of Health, Social Services and Public Safety, Health and Social Services Boards and Health and Social Services Trusts in the Discharge of Relevant Personal Social Services Functions to Safeguard and Promote the Welfare of Children, which set out the legal position between the Department, the Board and Trusts in relation to children. The legal position was that while the State was ultimately responsible as parent of all children, in accordance with the common law principle of “parens patriae”, it generally exercised its powers to safeguard and promote the welfare of children by providing the legal authority for responsible authorities to discharge statutory functions on its behalf.

102 The DHSSPS pointed out that the 1950 and 1968 Children and Young Persons Acts placed a duty on Welfare Authorities and then Boards in this regard:

“Where a child is in the care of a welfare authority, it shall be the duty of that authority to exercise their powers with respect to him so as to further his best interests, and to afford him opportunity for the proper development of his character and abilities.” 70

103 The DHSSPS further pointed out that under the provisions of the 1952 Regulations every Welfare Authority was directly responsible for ensuring that each children’s home in its charge was conducted in such a manner and on such principles as would further the well-being of the children in the home, and that this responsibility was subsequently transferred to Boards. On the basis of this delegation of authority the DHSSPS argued that, rather than assuming direct responsibility for residential childcare,

69 GOV 664.
70 Section 89 (1) of the 1950 Act (HIA 226) and Section 113(1) of the 1968 Act (HIA 372).
the role of relevant Government departments was to ensure the availability of residential childcare services that were adequate and sufficient to promote the social welfare of children who needed them.

104 We accepted the DHSSPS’s analysis of the respective roles and responsibilities of Government departments and Welfare Authorities, and then Boards, for the provision of residential childcare. We consider Welfare Authorities and Boards were responsible for protecting and promoting the interests of children in their care, ensuring that the care provided was appropriate to meet the individual needs of children placed by them and for quality and safety of their children’s homes. We also consider that the Administering Authorities of voluntary children’s homes and in particular the congregations that ran some homes, were responsible for the quality of care provided and for protecting the interests and promoting the welfare of the children resident in them. As will be clear from a number of chapters dealing with individual voluntary and statutory institutions we were critical and found systemic failings in how these responsibilities were carried out at times.

105 However, we also consider that Government departments had an overarching and ultimate responsibility to ensure that the authorities to whom it delegated functions undertook them in a responsible and effective manner. Registration and capital funding of voluntary children’s home, inspection of all children’s homes and consideration of strategic plans for childcare including the development and changing remits of children’s homes, were important elements in meeting that over-arching responsibility. Also, in addition to the department’s overall responsibility for preparing legislation, regulations and policies, it was important that they kept abreast of developments in professional practice and ensured that new thinking was promulgated to the services.

**Monitoring of voluntary children’s homes**

106 The *Monitoring of Residential Child Care Services* circular also clarified that while Boards retained responsibility in law for the children they placed in voluntary homes, and should have satisfied themselves about the standard of care being provided to each child they were not responsible for monitoring the overall standards, either professional or material, of voluntary homes. However, it recognised that Boards needed to receive information about the professional standards of care and the quality of facilities in voluntary homes in order to help them assess the suitability of a home as a placement for a child in their care. Therefore, it stated
the intention that the DHSS would hold discussions with voluntary organisations about how best this information could be shared. These discussions took place and by the time the Hughes Inquiry reported to the DHSS in December 1985, SWAG reports on voluntary children’s homes were being shared with Boards.

107 The circular provided that voluntary children’s homes were also required to review their monitoring arrangements and to submit a statement on them. They were specifically required to confirm their arrangements for monthly visiting of the home.

**Co-operation between voluntary homes and boards**

108 The Sheridan Report also recommended that the DHSS should seek to build up effective co-operation between voluntary homes and between them and Boards in providing residential childcare services. In response to this recommendation the DHSS issued a discussion paper on 23 December 1983 to Boards and voluntary organisations providing residential childcare on *The Statutory/Voluntary Relationship in the Provision of Residential Child Care*. In light of comments received on the initial discussion paper the DHSS issued a formal consultation paper on the same subject on 18 January 1985. The consultation paper and the covering letter set an agenda for discussions between Boards and the Management Committees of voluntary homes and asked for a joint report to be submitted by the end of July 1985 endorsed by the Board and the relevant Management Committee(s) outlining the issues discussed and the solutions proposed.

109 Joint reports were submitted within the set timescale by the Southern, Northern and Western Boards, but the EHSSB was only able to submit an interim progress report because it had not been able to reach agreement with voluntary bodies about significant matters including the level of per capita payments the Board should pay in respect of children it placed in voluntary children’s homes. The EHSSB’s final report was not received until December 1988, but showed that considerable progress had been achieved in resolving the issues that were causing concern including the per capita fees issue, a matter we will consider further in the Finance section of this chapter.

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71 HIA 653-654.
72 HIA 4050–4064.
73 HIA 5354.
74 HIA 5354.
Roles and responsibilities in handling complaints from children in care and their parents

110 A continued lack of clarity about respective roles and responsibilities for monitoring and inspecting children’s homes was apparent in relation to the development and implementation of a complaints procedure for children in care and their parents.

111 The Sheridan Report recommended that the DHSS should introduce adequate arrangements for consideration of complaints by children in care and their parents about treatment in children’s homes. In response, the DHSS completed two rounds of consultation with the Boards, voluntary agencies and organisations representing the interests of staff and issued guidance in May 1985 on a procedure for investigating complaints. This guidance was issued despite the staff side withdrawing from the consultation process because of concerns that the proposed procedure would not provide staff with adequate protection from unfounded allegations of mistreatment. Ms Doreen Brown, the civil servant responsible for developing the guidance, told us that the DHSS had to decide whether to defer publication of the guidance until staff co-operation had been achieved or issue the guidance in the absence of that co-operation. She explained that the DHSS chose the latter option so as not to countenance a potentially open-ended delay.75

112 This decision meant that it was then up to the Boards to reach agreement with the staff side about the development and implementation of a complaints procedure. The Boards worked together to reach agreement with the staff side but it took until January 1990 for the complaints procedure to be agreed.76 If the DHSS had managed through the consultation process to reach agreement with the staff side before it issued the guidance, that would have greatly assisted the Boards to develop the detail of their own operational arrangements and implement them in a timelier manner. However, we considered the DHSS was right to issue the complaints procedure when it did in order to maintain momentum in the implementation of an important safeguard for children in residential care.

113 In its response to the Warning Letter process the DoH emphasised that the DHSS did not stand back from seeking to assist the resolution of the dispute between Boards’ management and staff side. It explained

75 SNB 9043.
76 GOV 822.
that such was the DHSS’s concern that in January 1986, the Permanent Secretary, Dr Hayes, issued to the Boards a set of principles for safeguarding the rights of staff against whom complaints were made. In the covering letter Dr Hayes requested the Boards to incorporate the principles into their internal procedures for handling complaints. Dr Hayes also noted his appreciation that the Boards might face some practical problems incorporating these principles into a detailed procedure for investigating complaints. He therefore asked the Boards to review the operation of their procedures for investigation of complaints one year after implementation and advise the DHSS whether operation in accordance with the Hayes principles had caused difficulties in particular cases. This suggests that Dr Hayes may have been hopeful for an earlier resolution of the dispute. The DoH confirmed that the Hayes principles were incorporated into the complaints procedure issued in January 1990 which had been agreed with the Social Work Staffs Joint Council which represented the staff side.

From the evidence we considered there were clear examples of social workers responding to complaints of children in voluntary homes through addressing issues directly with managers of the home or referring more serious matters to their senior managers. Complications arose when a Board concluded that complaints raised general issues about care practices in a home that had the potential to affect all the children in the home. This was the case in 1981, when the EHSSB referred complaints about care practices in Rubane to SWAG because it considered they raised general issues about the care standards in the home which only SWAG had the over-arching responsibility and authority to investigate. SWAG persisted in the view that it was for the EHSSB to investigate and address the complaints of children it had placed in the home.

The guidance on complaints procedures issued in 1985 did not resolve these types of tension and the EHSSB and the SWAG engaged in similar debates in 1985-86 about allegations from three former residents of Nazareth Lodge that they had been abused by staff in that home. These allegations were made after the DHSS issued the guidance about the complaints procedure but before the Boards gained the agreement of the staff side to implement it. These complaints and how they were dealt with are considered in detail in Chapter 9 which deals with Nazareth Lodge.
116 The relevant point in relation to governance was the fundamental difference in view between managers in the EHSSB and SWAG about who should take responsibility for investigating these complaints. The EHSSB carried out preliminary investigations but concluded that it fell to the SWAG, on behalf of the DHSS, to investigate further since the children making the allegations were no longer resident in the home and the nun who was the main subject of their complaints was no longer working in the home. Also, the EHSSB managers considered that the allegations raised general matters about the care provided in the home that required a wider-ranging investigation than they had the authority to undertake. The SWAG resisted this approach and advised the EHSSB to investigate the complaints in line with the guidance the DHSS had issued about complaints procedures.

117 The EHSSB and the SWAG corresponded on this matter for a considerable length of time but could not agree a way forward. As will be clear from Chapter 9 dealing with Nazareth Lodge we are critical about the use of correspondence as the medium for resolving this complex matter. Given the historical nature of the alleged abuse and the status of the complaints procedure, it was not an effective approach and ultimately resulted in allegations of a serious nature not being fully investigated by a body independent of the Sisters of Nazareth.

118 The circumstances surrounding the investigation of these allegations were raised again in hearings for the governance and finance module, and differences of opinion about respective responsibilities continued to be voiced. In defending the position of its predecessor body, the DHSSPS stated that if concerns about the behaviour of staff in a voluntary children’s home, which indicated a need for staff training, supervision or disciplinary action, were brought to the attention of the DHSS it could only encourage an appropriate response on the part of the voluntary organisation since it was not the employing body. It also pointed out that a Board was ultimately responsible for the care and well-being of children it placed in a voluntary home. However, it accepted that if a Board investigated and found the staff problems in a home “to be serious and endemic, the ultimate sanction that the Department would have had at its disposal at the time would have been to de-register the home.”

119 The DHSSPS further clarified its position, saying that since at the time the complaints emerged there were no current complaints about the care
provided in Nazareth Lodge and no grounds to suggest that the alleged abuse had been perpetuated or condoned by staff currently in the home, or that children in the home were affected, the DHSS did not have a locus to investigate. The DHSSPS also emphasised that the DHSS’s powers related to inspection and that they had used those powers in Nazareth Lodge in January 1986 and had identified no evidence of any abusive practice historically or currently in the home.

120 Bob Bunting, who was involved at the time the allegations were made, told us it was wrong of the DHSS to expect the EHSSB to investigate concerns about children no longer resident in the home using a complaints procedure which had not been agreed. The HSCB reiterated this point and stated that the EHSSB was being directed to implement a complaints circular that was not fit for purpose at the insistence of the DHSS, and that no system failure should attach to the Board. 79

121 It was clear from the wealth of documentation we received, including statements provided after the close of public hearings, that strongly opposing views are still held about the apparent rights and wrongs of the positions adopted by the EHSSB and the DHSS in relation to who was responsible for investigating these allegations. The DHSSPS did acknowledge that if SWAG had convened a meeting between the key players at the time, including representatives of the EHSSB and the Administering Authority for Nazareth Lodge that could have helped to achieve an agreed way forward. 80 We agreed with this as we considered SWAG had the ultimate responsibility to ensure these matters were properly investigated.

**Review of registration**

122 As the Registering Authorities, the MoHA and then the DHSS had powers to review and if necessary remove registration of voluntary children’s home. As indicated above, we were only aware of two occasions when active consideration was given to removal of registration. Up until the mid-1980s there was no formal process for registration to be reviewed. Inspection of children’s homes was the only vehicle for consideration of continuing suitability for registration, therefore lack of inspection also meant lack of review of registration.

79 GOV 674.
80 SNB 9563.
However, as part of strengthening monitoring arrangements in response to the Sheridan Report the DHSS introduced an annual review of registration. Mr Buchanan of the DHSS wrote to the Management Committee of each voluntary home on 10 May 1985 asking for the provision of factual information about the home and indicating that SWAG would be in touch to arrange for an inspection of the home. Mr Buchanan explained that consideration of the factual information and the outcome of inspections would enable the DHSS

“...to consider on an annual basis the quality of provision and services existing in each home, and, in its capacity as registering authority, to satisfy itself that there was no impediment to the continued registration of the home concerned.”

Subsequent to 1985, DHSS officials and representatives from the SSI held annual meetings with each voluntary organisation and Board to discuss the annual monitoring information that they had submitted. The DHSSPS pointed out that the meetings with voluntary organisations were termed “Review of Registration” thereby signalling that suitability for registration was being kept under continuing review. We considered the introduction of review meetings to be a welcome and necessary means of providing more focus to the governance of voluntary children’s homes for the providers of the care and the regulators of that care.

**Inspection of residential childcare**

On 22 March 1985 the Department wrote to the Boards to announce annual focussed inspections of children’s homes and hostels and full-scale inspections every five years. The agendas for both types of inspections were detailed and included annual consideration of compliance with regulations/directions, examination of statutory records, and monitoring arrangements.

The Department also announced that the annual inspections would be preceded by discussions with each Board about its policy and procedures in relation to residential childcare, which would then be the subject of a separate report. Similar inspection arrangements were put in place for voluntary homes.

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81 SND 9150.
82 GOV 801.
The DHSS issued the Hughes report for consultation on 30 April 1986. It contained fifty-six recommendations to improve, inter alia, the operation of homes, the recruitment, pay, terms and conditions and training of staff and the internal monitoring and external scrutiny of the quality of care being provided to children in homes. The report was critical of the lack of inspection of children’s homes by the SWAG but recognised that post Kincora the DHSS had strengthened the focus on inspection and the SWAG had inspected all children’s homes.

The DHSS confirmed in its detailed response to the recommendations in the Hughes report that it had formally designated the Administering Authority of each voluntary children’s home and in turn these Authorities had formally designated the person who was visiting the home on their behalf. It further confirmed that voluntary agencies had been asked to implement the recommendation that written guidance should be provided for those undertaking statutory monitoring visits. With regard to inspection of voluntary homes it confirmed that the written reports of designated visitors would be required to be open to inspectors.

The DHSS also confirmed that it accepted and had asked the Boards to implement recommendations for strengthening their internal monitoring of children’s homes, such as ensuring that statutory visits by PSSC members involved informal contact with children, and that the outcomes of these visits were included in the annual monitoring statements submitted to the DHSS.

The DHSS accepted recommendations about inspections by SWAG, such as that all inspections should involve a sample scrutiny of children’s personal files to ensure that social work visits and reviews were regular. In response to the recommendation that the SWAG inspection programme should include unannounced visits and significant matters arising should be recorded and pursued, the DHSS stated that it did not consider that unannounced visits need to become a feature of the inspection programme but pointed out that the authority to carry out such visits existed and could be exercised if circumstances arose which demanded it.

In 1986, the SWAG, in collaboration with the Board’s Assistant Directors of Social Services agreed a comprehensive set of standards for residential childcare. This was the first time that an explicit statement of practice and

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83 HIA 4322.
84 HIA 4317.
85 HIA 4323.
professional criteria was issued.\textsuperscript{86} Also in 1986, the SWAG was renamed the Social Services Inspectorate, thereby confirming its inspectorate remit and focus.

132 From 1987 the frequency of inspection of statutory children’s homes was reduced to every three years. The DHSSPS told us this decision was based on the DHSS having required Boards to strengthen their monitoring of their residential childcare services; submit annual monitoring reports on these services to the DHSS and inform the DHSS about any untoward incidents in their children’s homes.

133 While we accepted this rationale, we also considered that this change in approach was probably prompted to some extent by resource considerations and the capacity of the SSI to annually inspect all children’s homes.

134 In 1994 the SSI further developed standards for inspection and monitoring of children’s homes: \textit{Quality Living Standards for Services: Children who live away from Home}. On 26 May 1995 the Department issued a circular \textit{Monitoring of Residential Child Care Services} which modified and consolidated the arrangements for the monitoring of residential childcare services and introduced new standards for the inspection of such services.\textsuperscript{87} It was the framework within which a programme of annual inspections of voluntary children’s homes (including two unannounced visits) and three-yearly inspection of statutory children’s homes was conducted by the SSI.\textsuperscript{88} The DHSSPS told us that this programme included a strong emphasis on the need for inspectors to speak directly to children and seek confidential feedback from children and their parents regarding aspects of the care in the home.\textsuperscript{89}

135 In 1996 the inspection of children’s homes was transferred from the DHSS to the Boards’ Regulation and Inspection Units, which had been established in 1994 and were subsequently transferred to the Regulation, Quality and Improvement Authority under the provisions of the Health and Personal Social Services (Quality, Improvement and Regulation) (NI) Order 2003.

\textsuperscript{86} SND 15667.
\textsuperscript{87} HIA 7305.
\textsuperscript{88} SND 15667.
\textsuperscript{89} SND 15667.
Regulation of training schools and criminal justice institutions

136 The responsibility for inspection of training schools transferred from MoHA to the Northern Ireland Office (NIO) in 1974, and the NIO vested its powers of inspection to the SWAG as the DHSS had done in relation to other types of residential childcare. The lack of inspection by SWAG affected the training schools as it did the children’s homes, but we found it was compensated for to some extent by the consistent attention of the Training School Branch of the NIO, whose officials maintained a high level of contact and oversight of the training schools. Although the establishment of the Ministry (later the Department) of Health and Social Services and its responsibility to provide and secure the provision of personal social services in Northern Ireland was legislated for through Article 4 of the Health and Personal Social Services (Northern Ireland) Order 1972 the formal transfer of duties from the MoHA to the DHSS did not take effect until 1 January 1974. The responsibility for provisions relating to young offenders was also assumed by the NIO at that time.90

137 NIO officials held regular meetings with senior managers and representatives of the Boards of each of the training schools. The minutes of these meetings that we saw showed that although there was a focus on financial and administrative issues, there was also discussion of policy developments, legislative change and particularly serious concerns that the schools had about managing the behaviour of particular children and on occasion the conduct of members of staff.

138 From the evidence we heard it appeared that training schools and criminal justice institutions were generally better resourced than children’s homes, and the NIO appeared more open and quicker to respond to requests for additional funding. This more favourable position was evident in the level and qualification profile of staff. SWAG inspectors found that staffing levels across the four training schools were generally satisfactory, and although shortfalls did result in some overtime working, temporary staff were also employed to assist at such times. Inspectors also found there had been an extensive programme of secondments to full-time qualifying training in the late 1970s and early 1980s. Several senior staff had completed a post-qualifying course and most of the schools had a policy of recruiting professionally qualified staff to fill vacancies as they arose. The DHSSPS

90  GOV 10004-10005.
indicated to us that overall the staffing ratios in the training schools in 1989 compared favourably with, and may well have represented an improvement on, the ratios that existed in a number of children’s homes at that time.91

139 The more rigorous approach to inspection post Kincora and Hughes was also extended to training schools. In 1991 a more formal arrangement for inspections, including formal arrangements for the funding of inspection activity, was agreed between the NIO and the DHSS and a draft paper was considered setting out expectations for SSI inspections.92 This included that the SSI should advise the NIO, inter alia, on control and aftercare issues in training schools. The SSI agreed with the NIO that each training school would receive two unannounced visits each year. Inspections were to be undertaken every four years, interspersed by more frequent less intensive reviews referred to as “regulatory inspections”,93 and an annual monitoring report was to be submitted by the Director of each training school to the Management Board, the NIO and SSI based on the format introduced for children’s homes.94

140 In addition to holding responsibility for training schools the NIO was responsible for Hydebank, which was a Young Offenders Centre opened in 1979 and operated under the provisions of the Treatment of Offenders Act (Northern Ireland) 1968 (the Act). The Governor of Hydebank reported to the Director of Prison Operations in the Northern Ireland Office (NIO) and we were told by a former Governor, Mr Murray, that the Director in his time, Mr Kendrick, would make frequent visits to Hydebank, and carried out rounds of the establishment to satisfy himself that everything was in order.95 We were also told that officials from the NIO Treatment of Offenders Branch were frequent visitors to Hydebank and attended a number of routine meetings and that, for example, an official from the NIO chaired the meetings that determined whether a boy should be trusted with orderly status.96 In addition, as part of the arrangement whereby the HM Chief Inspector of Prisons for England and Wales (HMCIP) inspected one prison in Northern Ireland each year, Hydebank was inspected by HMCIP in June 1982 and again in October/November 1994.

91 RGL 1355.
92 RGL 1357.
93 RGL 1358.
94 RGL 1357.
95 HYD 484.
96 HYD 513.
We found that the level of direct contact between NIO officials and criminal justice establishments was helpful in relation to funding and policy issues and in enabling the NIO to appreciate the challenges the services were facing. We concluded that more direct engagement by DHSS officials with residential childcare homes could have brought similar advantages.

The impact of organisational change

In the evidence it provided for the Governance and Finance module, the HSCB made the point that “from 1973 until 1995, the management arrangements for health and social services were changed repeatedly at the initiative of the Department”\(^97\) and these organisational changes “inevitably impacted upon the stability and development of operational structures as lines of accountability and decision-making had to adjust to fit the new structure.”\(^98\)

The DHSSPS response to this analysis was that these changes were not introduced on a whim but were the implementation of key UK Government policies aimed at strengthening and improving health and personal social services. It pointed out that such changes normally followed consultation by its predecessor bodies, which included consideration of the practical implications of proposed changes, and that it was the responsibility of Boards to ensure that lines of accountability were clear and to provide training and guidance to their staff to ensure that they could fulfil their roles in a responsible and effective manner.\(^99\)

We accepted that new structures were introduced with the intention of improving the delivery of services, but considered that the HSCB made a valid point about the disruption and distraction caused by reorganisations. It was clear from the evidence we heard that the transfer of responsibilities from welfare authorities to Boards took some time to settle down. This situation was made more complex when it involved a multi-professional staff group working in one small unit, as was the case in Lissue Hospital.

We considered Lissue Hospital in relation to the residential care it provided to children. We found that following re-organisation it ended up in 1973 with a situation whereby nursing staff were accountable to a Chief Administrative Nursing Officer, based in Lisburn, consultant psychiatrists

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\(^{97}\) GOV 660.
\(^{98}\) GOV 797.
\(^{99}\) GOV 797.
were accountable to the EHSSB, social workers were accountable to the North and West Belfast Trust and psychologists were accountable to the Royal Group of Hospitals Trust. Witnesses who worked in Lissue told us that this complicated set of governance arrangements resulted in a multiplicity of accountability and communication lines and a lack of overall strategic management of Lissue.

Although this is a very particular and somewhat extreme example it does point to the importance of ensuring that the effects of high-level organisational and structural change on the delivery of services, particularly niche services, are fully identified and addressed.

**Conclusions about Governance**

Although the importance of regular monitoring and inspection of residential childcare services was given legislative force, it was not sufficiently or consistently implemented to provide the intended safeguards. We found that a lack of clarity about who was the Administering Authority for some voluntary children’s homes meant that required monitoring did not take place and it was not enforced by the inspectorates. Although the structures and arrangements for internal line management and monitoring were generally better for statutory homes, we also found inconsistencies in how monitoring policies were implemented and at times an apparent inability of managers and Committee members to move beyond identifying problems to addressing them.

We found that the lack of inspection by SWAG was due to a lack of resources for inspection activities rather than a policy decision. We also noted that while inspectors accurately identified issues and recommended appropriate remedial action, their follow-up to ensure action had been taken was less consistent, even when the same issues were identified through subsequent inspection activity. For example, in relation to Nazareth House, Derry, recommendations about staffing levels, staff structures and deployment of staff were made in 1983, 1986, 1989, 1991, 1992 and 1993, and recommendations about the need for more adequate staff supervision/professional support arrangements were made in 1983, 1986, 1989, 1991, 1992, 1994 and 1995.

We also noted a lack of assertiveness in enforcing statutory requirements. We understood the concern to maintain an appropriate distance from service delivery and avoid any undermining of the responsibilities of service
providers. However we considered that at times MoHA and SWAG were not as effective as intended, because as well as not being adequately resourced to carry out their duties in a timely manner, they did not use the authority vested in them to enforce requirements and were not persistent in requiring action.

150 We considered that closer involvement by DHSS officials in the oversight of the scrutiny of children’s homes could have led to a quicker realisation that internal monitoring of children’s homes needed to be strengthened and that the resources of SWAG needed to be increased in order for external scrutiny to be delivered to an adequate level.

151 However, we recognised that the DHSS responded constructively to the recommendations of the Sheridan Report and the Hughes Report and worked collaboratively with the Boards and voluntary organisations to improve the monitoring and inspection of children’s homes. We also recognised that SWAG staff contributed to this work alongside a demanding inspection schedule, and that from that time on there was a significant improvement in the standards of care and practice in children’s homes.

152 The DHSS also took a proactive role in increasing the qualification profile of residential childcare staff, including contributing to the costs of staff in voluntary children’s homes achieving professional qualifications. This initiative was successful to the extent that in time Northern Ireland had a better level of qualified residential childcare staff than any other country in the United Kingdom.

153 It is also important to acknowledge that statutory and voluntary agencies worked hard to co-operate with these initiatives and did so at a time when they were providing services within very challenging social and economic circumstances, which were exacerbated by the political unrest.
Part Two: Finance

Funding of voluntary children’s homes

As previously explained, prior to the reorganisation of local government administration that commenced in 1946, the Poor Law system operated in Northern Ireland. Boards of Guardians were responsible for securing the care and welfare of children whose parents or guardians were unable or were deemed unfit to look after them. The majority of voluntary children’s homes at that time were run by Roman Catholic religious orders. These homes were established in response to the considerable poverty and need in the Roman Catholic communities and by a desire of the Roman Catholic Church to ensure that children born into that faith were brought up in it. Roman Catholic bishops asked religious orders such as the Sisters of Nazareth and the Sisters of St Louis to run children’s homes in the province and the funding of the homes came mainly from public donations and legacies.

For example, the Sisters of Nazareth in Belfast and Londonderry depended on the door to door collections made by nuns in the cities and surrounding countryside, which were supplemented by the produce from the farms situated in Nazareth Lodge and Termonbacca and the Government funding granted to these farms. In Belfast, the fund-raising expertise of Brother Stephen Kelly of the De La Salle order contributed greatly to meeting the costs of the care and after-care of boys in St Patrick’s and Rubane. However, despite the significant generosity of the Roman Catholic communities towards these homes, the level of poverty particularly in the 1920s to the 1960s, coupled with the commitment of religious orders that those in need should not be turned away, meant that up until the late 1960s many of these voluntary children’s homes were overpopulated and under-resourced.

It was not only homes for Roman Catholic children that depended on public support and donations. The Irish Church Mission which ran Manor House, a children’s home in Lisburn, also depended on public donations and paid two collectors to seek contributions and collect them. When one of the collectors had to resign through ill health and there was a delay in the appointment of her successor the home experienced a significant loss of necessary revenue.
Welfare Authorities contributing to the funding of voluntary homes

157 Following the reorganisation of local government in 1946, County Councils and County Boroughs received revenue funding from various sources, including local rates and government grants and were required to establish welfare authorities. The CYPA 1950 placed duties and powers on these welfare authorities to establish children’s homes and to contribute towards the welfare of children they placed in voluntary homes. The DHSSPS explained in its evidence to us that this latter provision marked the beginning of mandated state support to the voluntary residential children’s sector. Welfare authorities were also empowered to recover contributions from the parents of children in their care, but their circumstances were usually such that any contributions were negligible.

158 The MoHA maintained an oversight of the financial arrangements between welfare authorities and voluntary homes. While Section 118(2) of the CYPA 1950 enabled welfare authorities to contribute to the costs of care for children they placed in voluntary homes, Section 90(5) of the Act legislated that the MoHA had to approve the rates of payments to be made and that the rates could only be changed with its approval.

159 The CYPA 1950 also provided that the MoHA could provide financial support to voluntary children’s homes to assist them to improve their premises and augment their qualified staff. Under Section 119(2) of CYPA 1950, the MoHA recouped 50% of the grants it paid to voluntary agencies for these purposes from the welfare authorities. The proportion of the cost each welfare authority was required to pay was determined on the basis of its population size. The welfare authorities were not happy about this arrangement because they were required to contribute to funding grants which they had no say in approving. They pointed out that this lack of consultation made it difficult for them to predict what element of their budget they needed to reserve each financial year for funding of voluntary children’s homes. The welfare authorities were particularly resistant to having to contribute to the funding of homes that were not in their locality and which they were therefore unlikely to use.

160 As explained in the chapter dealing with the Sisters of Nazareth homes in Londonderry, the County Londonderry Welfare Committee was particularly...
resistant to these funding arrangements. An internal MoHA memorandum dated April 1953 referred to Londonderry Welfare Committee’s description of the arrangements as “taxation without representation” and its request that welfare authorities should be consulted in advance about grant applications. The MoHA decided that since the amounts involved were small the delays that would be caused by consulting with welfare authorities in advance and dealing with any disputes about whether funding should be granted would not be justified, and that therefore the funding decisions should remain in its hands. At a subsequent meeting with the Association of Welfare Committees on 26 February 1954, MoHA officials pointed out that giving grants to voluntary homes was:

“... more economical than direct provision of new Homes by Welfare Authorities, as the Voluntary Homes do not charge full rate, as they have their own voluntary fund and labour. In fact there was the question as to whether there should not be a halt to the provision of Statutory Homes and the using of more Voluntary Homes.”

However, in response to the continuing concerns expressed by the welfare authorities, MoHA officials agreed to give them as much advance notice as possible about proposed expenditure in a current year and provisions for the following year, and we saw evidence in the minutes of later meetings between MoHA officials and the Association of Welfare Authorities that this notice was provided. Also, in 1955, the MoHA established the Children’s Homes and Training Schools Committee under the chairmanship of Miss Bessie Maconachie, MP:

“to advise the Minister whether or not the circumstances appear to be such as to call for special financial assistance from public funds under the Act.”

The committee contained representatives of the churches, the Child Welfare Council and welfare authorities.

It was clear from a memorandum that a MoHA official sent to his Minister in July 1958 that officials were keen for welfare authorities to provide more financial assistance to voluntary children’s homes. The official set out his view that Section 118 (2) of the 1950 Act could and should be used more widely:

101 SND 7484.
102 SND 7475.
“...if the welfare authority feels that the managers of a children’s home in their area are, in fact, helping and relieving them indirectly of looking after children, some of whom would otherwise fall to be taken into care and perhaps housed by the welfare authority, and if that Home is finding it impossible to make ends meet it is a legitimate and proper thing, and incidentally good business, to make a contribution to the Home’s general funds by a grant under sub section (2)”.  

163 Somewhat ironically this enabling interpretation of the legislation was provided in the context of the official advising the Minister that the Londonderry County Borough Welfare Council’s proposed grant of £1,000 to Termonbacca Children’s home to address its serious financial position should not be approved. The official offered this advice on the basis that the accounts provided by the Sisters of Nazareth to support the grant application showed that the home benefitted at times of financial need from loans from its mother house that it was not under pressure to repay. Therefore, he concluded the true financial situation of the home was not sufficiently bad to justify approval of the grant.  

164 While recommending that the grant should not be approved the official accepted:

“...there is no doubt whatever that this Home by its activities has in the past and will in the future relieve the rate-payer and the tax-payer of very considerable sums on Child Welfare, compared with which the proposed grant of £1,000 is a trifle, but, of course, the same thing could be said of a dozen other voluntary organisations in Northern Ireland.”

**MoHA grants to voluntary homes**

165 This approach derived from a fundamental expectation of the Government that voluntary children’s homes should be funded through voluntary effort. This was made clear in the guidance provided to voluntary organisations about applying to the MoHA for grants under section 118(1) of the CYPA 1950. That guidance stated:

“The Ministry does not intend that these grants should weaken voluntary effort by taking the place of voluntary donations and endowments and
it is thought the larger organisations will have adequate income from such sources to meet their requirements. Where for example, an application is made in respect of one of a number of homes run by a voluntary organisation, the resources of the organisation as a whole will be taken into consideration”.\textsuperscript{106}

166 This requirement that the resources of a whole organisation should be taken into consideration created significant difficulties for Termonbacca in 1959 when approval for funding to make improvements to its accommodation for children was delayed because the Mother House, which was located in Hammersmith in London was reluctant to provide required information about its overall funding situation. This reluctance to provide financial information also contributed to delays in Nazareth House Belfast applying for available grants at a time when the conditions in the home were in dire need of improvement. In Module 1, Sister Brenda McCall on behalf of the Sisters of Nazareth confirmed that in the 1950s and 1960s the Congregation’s policy was to maintain complete secrecy in relation to its financial affairs. She explained that only the Superior General and her council would have known what funds the congregation had at its disposal\textsuperscript{107} and accepted that the secrecy around finances created delays in homes receiving necessary state funding.\textsuperscript{108}

167 Sister Brenda McCall also indicated that sisters may have been reluctant at that time to accept funding from social services for fear that “their voluntary status might be taken off them” or that it would lead to the children not being brought up in the Catholic faith.\textsuperscript{109} Former senior managers of social services departments (Bob Bunting and Robert Moore) also suggested that religious orders may have been reluctant to accept grants from the State for fear that could lead to an undermining of their independence and their right to decide on admissions to homes and how they should operate.

168 It was also clear that there was some political reluctance in relation to the provision of grants. For example, when Nazareth House Derry made an application for a grant towards the provision of a new play hall the Unionist MP for the City of Derry, E.W. Jones QC MP, wrote to the then Minister of Home Affairs, G.B. Hanna QC MP:

\textsuperscript{106} SND 5814.
\textsuperscript{107} Day 35, pp.170 and 171.
\textsuperscript{108} Day 35, pp.172 and 173.
\textsuperscript{109} Day 35, p.205.
“On further reflection about this matter I am even more strongly convinced that this Grant should not be made at any time but particularly at the present time when public monies should be so carefully guarded.”

Contemporaneous internal MoHA documentation showed that there was a view that it was inappropriate to fund the development and extension of voluntary homes when statutory children’s homes were becoming increasingly available. In a memo of 18 October 1957 a senior civil servant concluded in his report to the then Minister of Home Affairs, Walter Topping, about a meeting officials had with the De la Salle Order regarding plans to extend its home in Rubane:

“I think the remedy lies with the Roman Church. If it is the determined policy of that Church to foster Voluntary Homes to the exclusion of the Welfare Authorities then they must be prepared to do so at their own expense”.

While there were difficulties and delays surrounding the provision of government grants to voluntary homes it is important to acknowledge that when they were provided they were used to good effect to significantly improve the design and fabric of homes and increase the facilities available to children. Therefore, it is important to acknowledge that the state increasingly recognised its responsibility to the children in voluntary homes and that led to funding for placements there.

**Funding of placements in voluntary children’s homes**

The Child Welfare Committee (CWC) referred to above, published a report *Children in Care* in 1956 in which it was observed that although welfare authorities were empowered to pay maintenance grants for children they placed in voluntary homes this was of limited assistance to many voluntary organisations, as the greater proportion of children in their homes were placed there on a private basis. The CWC concluded that it could not recommend any form of grant-aid for a child placed in a home without reference to a welfare authority because such a practice “would raise problems of policy in relation to the further public control of the management of Voluntary Homes”. It recommended that it should be a

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110 SND 7503.
111 RUB 10203.
112 HIA 1766.
duty of voluntary homes to seek the advice and help of welfare authorities before admitting a child to a home.\textsuperscript{113} It further recommended in its 1960 report \textit{Operation of the Social Services in Relation to Child Welfare} that a period of one month should be allowed following the admission of children on a private basis to a voluntary home, during which time welfare authorities would not regard these children as being “technically in care” of the voluntary organisation until the question of financial responsibility had been fully discussed.\textsuperscript{114}

\textbf{CWC report \textit{Role of Voluntary Homes in Child Care}}

\textbf{172} The CWC commented in its 1966 report \textit{Role of Voluntary Homes in Child Care} that these recommendations were not accepted because the voluntary homes were concerned that they would interfere with their “essential liberty to admit children privately, confidentially and at their own discretion”\textsuperscript{115} and the welfare authorities were concerned they would create difficulties when assessing respective responsibilities. The CWC also noted that welfare authorities were unwilling to co-operate with some voluntary homes because they saw them as too ready to accept children without adequate investigation of their circumstances, and/or they implemented a rigid segregation of age groups and sexes which they considered was inappropriate for many children requiring residential care.

\textbf{173} The attitudes of parents were also identified as significant. The CWC recognised that parents of illegitimate children in particular might be reluctant to discuss their situation with a public authority. It also acknowledged that some parents were of the view that only a home which operated under the auspices of their own church could ensure their children’s religious upbringing.

\textbf{174} The CWC categorised admissions to voluntary homes under three headings:

- \textbf{Non Statutory Cases} – children accepted into voluntary homes by purely private arrangements with their parents or guardians;

- \textbf{Quasi Statutory Cases} – children admitted privately to voluntary homes who although not in local authority care, might have been placed in the voluntary homes if the question of their admission had been raised with the Welfare Authority; and,

\begin{flushleft}
\textsuperscript{113} HIA 1765.  \\
\textsuperscript{114} HIA 497.  \\
\textsuperscript{115} HIA 556.
\end{flushleft}
• **Agency Cases** – children who were in the care of a Welfare Authority and placed in voluntary homes by it.\textsuperscript{116}

175 It provided statistics as of 31 March 1965 which showed that out of a total number of 822 children in voluntary children’s homes only 238 had been placed there by welfare authorities; the remaining 584 children had been placed through private arrangements and therefore no state funding was available for their care. A similar picture emerged in relation to the 131 children in the care of voluntary organisations who had been boarded-out; only twenty-one of these children were funded by welfare authorities. This meant that in total only 259 out of 953 children in the care of voluntary organisations were “Agency” children. The remaining 694 children, 32\% of all children in care in Northern Ireland at that time, were being cared for on a private basis. The CWC compared this situation to that in England and Wales, where 17\% of children were in care on a private basis, and Scotland, where 15\% of children were in care on a private basis.\textsuperscript{117}

176 To assess the impact of this funding situation the CWC asked voluntary agencies to provide information about their finances, but only received responses from ten homes. Two of these homes said they had adequate resources while the other eight said they had not and were hampered by lack of finance in improving accommodation, providing basic amenities and employing staff.\textsuperscript{118}

177 The CWC also noted that even where welfare authorities were paying fees for children they placed in voluntary homes the fees did not cover the full cost of maintaining children in the home and were considerably less than the level of funding required to maintain a child in a statutory home. The CWC advised voluntary agencies to charge the full cost, but observed that in order to do so they would need to get their accounts into order.\textsuperscript{119}

178 The CWC concluded:

> “…the solution here lies very largely with the homes themselves: many could get considerably more assistance than they do at present from public funds by early and close liaison with welfare authorities where there is a possibility that a child may be eligible for reception into care”.\textsuperscript{120}

\textsuperscript{116} HIA 554.
\textsuperscript{117} HIA 554.
\textsuperscript{118} HIA 559.
\textsuperscript{119} HIA 561.
\textsuperscript{120} SND 7837.
These discussions about the respective responsibilities of voluntary homes and welfare authorities in relation to the reception of children into care continued until the mid-1970s. Increasingly by that time the majority of children were placed in voluntary homes by welfare authorities. However, there continued to be a number of children who had been placed in the homes in previous years on a private basis and whose care was still being paid for by the religious orders running the homes. This was the case in Rubane. In 1971 the financial burden of repaying debt incurred through renovating the home and the increased costs of maintaining the property led the brother in charge, BR 2, to ask relevant welfare authorities to take on the support of the remaining twenty boys who had been placed in the home on a voluntary basis.\footnote{RUB 10591.}

The Belfast Welfare Authority responded positively to this request, but on the basis of two important provisos: firstly, that the boys’ files must be provided so that contact could be made with any families they might have and the possibility of reconnection explored; secondly, it was made clear to the De La Salle Order that in future placements would have to be agreed in advance and that it would not be acceptable for the Order to accept voluntary placements and then expect the welfare authorities to fund them. We considered that these were appropriate provisos which sought to prevent children remaining in care if that could be avoided, and to avoid children being admitted to care without other interventions being explored. The provisos were also in keeping with the philosophy of the 1968 CYPA, which for the first time established prevention as an underlying principle in childcare practice and introduced discretionary powers to provide families with material help as a means of preventing children being placed in care.\footnote{SND 164.} This was an important principle, as it was clear from the records of voluntary homes we considered that many children were placed on a private basis in homes because their parents were unable to provide for them and, in particular, fathers were unable to work and care for their children when their wives were absent due to ill health or death.
Impact of restructuring of local Government

181 When local government was restructured in 1973 the DHSS retained the legal responsibility for registering voluntary children’s homes and for grant-aiding any improvements which involved capital expenditure. Grant-aid was based on Government granting up to 75% of full costs; the voluntary organisation had to fund the remaining 25% of the costs. Also, where grants were funded, requirements were placed on the voluntary organisation that they had to repay all or part of the money if it ceased to provide the relevant service within a certain number of years.

182 The DHSSPS told us that as part of the restructuring of local government the DHSS actively encouraged the newly established HSSBs to support their local voluntary sector. In a Circular published in December 1974 Support for Voluntary Organisations the DHSS clarified that its role was to support voluntary bodies that operated at a regional level financially, and that the Boards would be locally responsible for supporting voluntary bodies within their geographic area. The Circular outlined the Boards’ statutory powers to make contractual arrangements and make grants with voluntary organisations for the provision of social services and to make available premises, vehicles, equipment, etc to assist voluntary organisations for the provision of social services. The Department clarified that the Boards’ annual allocation covered support for voluntary organisations and that it did not propose to earmark funds for these bodies.

183 In the mid-1970s the funding of voluntary homes improved when the HSSBs agreed to move from paying maintenance costs for individual children they placed in voluntary homes to making “per capita” payments, which would include a contribution towards the running costs of the homes. Bob Bunting told us that he took the initiative to introduce this approach in the EHSSB area. He provided us with a copy of a report he presented to the EHSSB which explained the limitations of the previous maintenance fees. These included that they did not cover all costs, and additional grants had to be paid as the need arose, for example to pay the costs of holidays. More fundamentally, since voluntary organisations contributed towards the general running costs of the homes they were “indirectly subscribing to the upkeep of children who were in the care of

123 GOV 523 – 528.
124 GOV 525.
The EHSSB agreed to pay the per capita rate for children who had been placed in Nazareth House and Nazareth Lodge on a voluntary basis, which significantly improved the funding of these homes.

The new per capita rate was based on the annual running costs of the home minus the voluntary/charitable income that the voluntary organisation was expected to raise divided by the number of places to be provided by the voluntary home. Bob Bunting explained that the expectation was that the voluntary organisations would contribute up to 5% of the total revenue expenditure.

In October 1978 the DHSS wrote to the Boards to inform them that it was giving them greater flexibility to provide financial assistance to voluntary agencies. This greater flexibility included increasing the Boards’ authority to pay grants without Departmental approval up to a limit of £25,000 and 90% of expenditure, and giving Boards authority to pay capital grants of up to £5,000 to voluntary agencies without Departmental approval. The DHSS also recognised the need for prompt payment of grants and allowed that, where necessary, a proportion of a grant could be paid in advance on the basis of estimates of expenditure.

The Boards reviewed per capita rates annually and, at times, additional allocations for specific needs continued to be made to voluntary homes. Bob Bunting explained that this arrangement worked up until 1980, when a decrease in occupancy levels in voluntary homes increased the per capita maintenance costs. He pointed out that despite a challenging financial climate for the EHSSB, weekly per capita maintenance rates to voluntary homes were increased, and one-off grants were made to cover deficits which had arisen because of low occupancy rates, but even these measures were not sufficient to cover the full operational costs of homes. We saw evidence of this approach; the EHSSB made a deficit payment of £45,000 to Nazareth Lodge for the year ended 31 March 1982 and in 1987 agreed to increase the weekly per capita payment for children placed in the home from £80 to £147 conditional on two additional staff being employed in each of the four groups of children in the home.

125 HIA 5391.
126 SNB 9005.
127 SNB 100126.
The Statutory/Voluntary Relationship in the Provision of Residential Child Care

187 As indicated above, in January 1989 the DHSS issued a discussion paper entitled The Statutory/Voluntary Relationship in the Provision of Residential Child Care to Boards and voluntary bodies. As part of the discussions prompted by that paper, EHSSB officers proposed that in order to ensure the financial viability of the voluntary children’s homes in its area a fee would be paid for an agreed number of places in each home regardless of occupancy levels but on the basis that the relevant voluntary organisations should contribute up to 5% of the costs of their homes.\footnote{128} The voluntary organisations argued that each home’s capacity to make such a contribution should be reviewed on an annual basis. They pointed out that they had to bear 25% of the costs of improvements to their homes as a condition of receipt of capital funding grants from Government, and where that applied it would affect a voluntary organisation’s capacity to pay a further 5% towards the running costs of the home.

188 When officials found it impossible to agree a way forward in relation to this matter it was referred to the Board, which eventually confirmed its intention to try and meet the total deficits arising from the shortfalls in funding the agreed operational expenditure for the voluntary homes at the end of each financial year, taking into account any contribution from the voluntary home towards the running costs.\footnote{129} This compromise maintained the principle of voluntary organisations contributing to the costs while accepting that their ability to do so would depend on the other demands on their available funding. This intention was confirmed at an annual meeting between representatives of the Board and voluntary children’s homes held on 12 September 1988.\footnote{130}

189 The Sisters of Nazareth in Londonderry experienced similar difficulties when falling numbers in the home increased the cost of overheads. Although the WHSSB increased the weekly per capita rate it paid per child from £88.34 at December 1985 to £173 in December 1987, the homes continued to struggle to meet its costs. The SSI intervened to request the Board to address the financial difficulties experienced by the home, and the Board accepted that the Sisters of Nazareth had a justified case in seeking an...
increase in the weekly per capita rate. To assist the situation, the DHSS gave the WHSSB £65,000 in 1987 to provide additional assistance for voluntary children’s homes. The WHSSB used £47,642 of this funding to pay off the home’s 1985/86 budget deficit, but further additional funding was required in succeeding years to pay off substantial deficits and the Sisters of Nazareth made the case that care in the home was compromised because of lack of funding. In an internal SSI memo written in July 1992 by an inspector, Marion Reynolds, about her visits to children’s homes in the WHSSB she recorded that the sister in charge of Nazareth House, SR 2, had written to Dominic Burke to advise him that the quality of care available in the home was being adversely affected by the current staffing levels.131

In the early 1990s, responsibility for the purchase of children’s residential care services was delegated to the newly established Health and Social Services’ Trust. Trusts entered into detailed annual contractual arrangements with voluntary sector providers regarding matters such as: the aims and purpose of the home within the Board/Trust’s children’s services plans; the standards expected of the home; the number of children’s places to be provided; and, the rate at which these would be purchased by Trusts. Such contractual arrangements were also based on an expectation that a proportion of the costs of providing the service would be met by charitable income.

**Conclusions about voluntary children’s homes**

It was ironic that as the religious orders were able, through the funding they received for weekly per-capita fees and capital grants, to improve the physical conditions and amenities of their large homes, the demand for placements in these homes began to steadily decline. This decline raised the overhead costs of the homes and meant that the orders remained in financial difficulties. The lack of demand for placements was due to a range of factors including: more statutory homes being built; less stigma about single parenthood/illegitimacy, which reduced the number of young children coming into care and consequently reduced the length of time children stayed in homes; smaller families; more welfare assistance for families experiencing poverty; emphasis on preventive work to assist children to remain with their families; a preference for fostering where

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131 GOV 35011.
accommodation away from home was required and where residential care was required a policy of accommodating children as close to their own communities as possible. This trend was best illustrated by the case of Rubane, where for years inadequate bedroom and toilet/bathroom facilities existed while discussions about the financing of improvements and what form they should take were ongoing. Not long after the new houses were built some of them had to be shut because of under-occupancy. It was also the case that increasingly the homes were seen as less equipped to meet the challenges of working with the older children coming into care, many of whom displayed disruptive behaviour.

192 We accepted the submission of the Sisters of Nazareth that throughout the period from 1922 to 1995 the Order operated homes under extreme financial stress, which was known to the DHSS, the Boards and their predecessors and that the financial straits under which they were operating had an impact on the quality of care they were able to provide. The same could be said of the De La Salle home in Rubane.

193 We concluded that from the 1920s to the 1960s many children of Northern Ireland were accommodated in large, overcrowded and understaffed homes, some of which had inadequate basic facilities. Staff shortages led to a lack of supervision and dependence on older children to supervise younger children, which created the circumstances in which children were physically and sexually abused.

194 We recognised that Government departments had a responsibility to ensure that public money was spent wisely and that religious orders should have been prepared to provide financial information to support funding applications. It was also the case that children were accepted into voluntary homes when at times there was not sufficient space or resources to care for them properly and where little or no consideration had been given to whether their birth families could have been supported to continue to care for them. However, as will be clear in the chapters dealing with individual homes, we were critical of the lack of financial assistance, and/or significant delays in the provision of it, to large Roman Catholic homes when it was clear from inspectors’ reports that the physical conditions in the homes required urgent improvement, and that too few over-worked and untrained religious staff were caring for large numbers of children. Although many of the children in these homes had been

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132 SNB 100125.
admitted without any reference to or involvement of statutory authorities, they were still ultimately children of the state and their welfare was its responsibility. We are aware that particularly in the 1920s through to the 1960s many children were also living in poor physical conditions in their family homes, but the children in the voluntary homes did not have the advantage of parental and wider family care. Many of the witnesses we heard from told us they felt alone, scared and unloved.

Funding of training schools

One aspect of the voluntary care of children that attracted funding even in the 1920s was that provided in industrial schools and then training schools. The 1908 Children and Young Persons Act provided the Chief Secretary with powers to recommend that monies be paid from Treasury towards the expense of any child or youthful offender up to certain limits, and also legislated for local councils to provide for children’s reception and maintenance in the schools. Industrial schools run by voluntary organisations could also receive children privately admitted to care. The funding of voluntary placements had to come from voluntary subscriptions and donations, to the body responsible for the school.

In January 1922 the Minister of Home Affairs established a Committee on Reformatory and Industrial Schools in Northern Ireland, which reported in June 1923. The Committee recognised that many schools were operating under extreme financial pressure because falling numbers meant overheads were high and that in some schools children were involved in trade activities rather than educational pursuits in order to raise funds. The Committee recommended that funding of homes should be by capitation grant of 2/6d per head, per week from the Government and an equal amount provided by local authorities.133

The MoHA reported to the Governor of Northern Ireland in 1927 that Government grants of 7/6d per week were being paid for each child in an industrial school and that county boroughs were required to make an average payment of 5/- per head, per week for children from their areas accommodated in the schools. The report also noted that while the amount of parental contributions for the year was just over £657 that contribution was:

133 SPT 17081-17109.
“...a valuable method of impressing upon certain types of parents their responsibility for the maintenance of their children and is enforced in every case where this can be done without undue hardship”.134

198 The 1950 CYPA set out the circumstances in which a child could be committed to a training school. The subsequent 1952 Training School Rules135 set out how training schools should be managed and run. The responsibilities of the Board of Management of schools were set down and these included appointing a finance committee and exercising effective control over all expenditure.136

199 Article 150 of the Children and Young Persons Act (Northern Ireland) 1968137 brought in new funding arrangements, confirming that funding for training schools was to be provided and controlled by central government. Grants which were to cover the full costs of maintaining a child in a training school, were administered by the MoHA and then in due course the NIO.

200 The DHSSPS and the NIO provided information about the financial relationship between the NIO and training schools. Schools were accountable to the NIO for the management of their expenditure and had to furnish the NIO with reports and accounts on request and comply with any directions by the NIO in respect of such records and accounts. They also had to submit quarterly and annual estimates of expenditure and maintain financial records enabling the school to monitor spending and plan their future operation. Also, although Boards of Management had responsibility for acquiring and releasing staff, staff could only be appointed after approval was obtained from the MoHA and then the NIO.

201 As will be clear from the chapters dealing with juvenile justice establishments, we found that on the whole from 1950 training schools were better funded than children’s homes and, in particular, voluntary children’s homes. The NIO closely monitored the schools and met regularly with representatives of the Boards of Management and senior staff. A clear benefit to the schools of this monitoring was that officials were alert to the financial needs of schools, for example to appoint new staff, improve and extend facilities, remedy damage to the fabric of a school, and generally responded to them in a sympathetic and prompt manner. Although there were examples of where shortages of staff affected the operation of schools we found

134 GOV 35008.
135 SPT 80063-80073.
136 SPT 80064.
137 SPT 80096-80110.
that access to funding was less contentious and more forthcoming. We concluded that was because training schools were meeting a statutory function that was intended in part to ensure community safety and provide public protection.

**Funding of statutory residential childcare**

202 When the Health and Social Services Boards were established on 1 October 1973, one of the responsibilities allocated to them was the administration of childcare services on behalf of the DHSS. While the DHSS retained responsibility for policy, strategic planning and resource allocation, the Boards were given responsibility for operational planning and provision of services. A committees and advisory structure was developed for Area Boards, which included each Board having a Personal Social Services Committee which inter alia had responsibility for discharging the Board’s statutory duties with regard to children and young persons.

203 As we have outlined above, the level of funding available to each welfare authority, and then Board, and the amount it paid in placement fees to voluntary children’s homes had a very significant impact on the level of funding available to those homes and, for example, the level of staffing they could afford. The same was obviously the case in relation to statutory children’s homes, where the level of funding allocated to each home determined staffing levels and the training opportunities available to staff and the physical layout and maintenance of the home.

204 We heard evidence about three statutory children’s homes, Kincora, a hostel for boys run by the EHSSB, and Fort James and Harberton House, children’s homes run by the WHSSB. In relation to Kincora, we found that the staffing levels in the hostel were always below those recommended in the Castle Priory guidelines and that for the first six years it operated there was only one member of care staff. However, it was clear that once the post of assistant warden was created, subsequent occasions when the warden had to work alone were due to difficulties in recruiting an assistant warden rather than any lack of funding for that post. There was also evidence that resources were invested in improving the physical layout of the home, for example adding staff accommodation so that the warden who lived in could have more separate sleeping accommodation.

138 FJH 20659.
139 FJH 20663.
and no longer had to share a bathroom with the boys. We received no complaints about the facilities provided to the boys and positive reports about the efforts to secure them work experience and employment.

The evidence we received about Fort James and Harberton House raised significant issues about how the WHSSB’s lack of funding for its childcare services adversely affected the operation and staffing of these children’s homes. This evidence also raised the more fundamental question of whether the WHSSB’s lack of funding for childcare services was as a result of historic underfunding of the North West of the province by the Government. The evidence we received in the Governance and Finance module highlighted the complexities and tensions surrounding the allocation of core funding to the Boards. We decided that consideration of these general funding issues was relevant because of the context they created for the WHSSB’s attempts to secure additional funding for its childcare services after peer sexual abuse was detected in Harberton House.

**Allocation of core funding to Boards**

The funding of the Boards was determined by the distribution of the Northern Ireland block grant received from Westminster. The Secretary of State for Northern Ireland had autonomy to determine the allocation across spending Departments, including the then DHSS. The bidding for resources by Departments and allocation of resources was managed by the Northern Ireland Department of Finance and Personnel.

The Boards were entirely dependent on the funding they received from the DHSS. Each Board’s allocation in 1973 was made up of monies previously allocated to the bodies formerly responsible for the provision of health and social services within its area. Where an existing body or service’s field of responsibility straddled the boundaries of Boards, an apportionment of funds was made on the basis of population and agreed with the Boards concerned.

When giving evidence in Module 5 of the Inquiry Dominic Burke, a former senior manager of the WHSSB, indicated that because the funding allocations to the Boards were based on the historical income of their predecessor County Council Welfare Committees, the WHSSB was at a funding disadvantage from the beginning. He explained:
“The budgets in those days were -- the county councils received their money from the rates paid to them from businesses and domestic houses in the area. In areas like Belfast or County Down, County Antrim to some extent, the amount of rates raised was clearly greater there than it was in the west of the province and in and around County Londonderry, the city of Derry and Tyrone and Fermanagh. So there was an underlying discrepancy, as it were, or deficit with regard to the funding in the West, and while it moved forward, that underlying deficit wasn’t addressed for a long time. From time to time it was, but not consistently.”

209 Tom Frawley held a number of senior positions in the WHSSB and was ultimately the General Manager of the Board. Mr Frawley provided a statement for Module 5 in which he set out the particular challenges faced by the WHSSB and the significant calls on the funding available to it. He explained that when the Boards were established in 1973, while the population of the Western area represented approximately 16% of the total population of Northern Ireland, 25% of the people who lived in the area were less than fourteen years of age and 10.5% were over 65 years of age. He pointed out that the population of the Western area was amongst the most disadvantaged in Northern Ireland:

“....the area had the worst record in Northern Ireland for unfit dwellings and for overcrowding; had the most socially and economically deprived population in the Province; had one of the highest incidents of heart diseases in the world and one of the highest unemployment rates in the United Kingdom”.

210 He also pointed out that while at that time the average density for the Western area was 56 persons per square kilometre, it ranged from 29 persons per square kilometre in Fermanagh to 262 persons per square kilometre in Derry. He explained that this range meant the WHSSB had to respond to very different types of service need and faced a considerable challenge in ensuring that services were as accessible as possible.

211 While we accepted Mr Frawley’s analysis of the particular challenges facing the WHSSB, we recognised that other Boards were also having to handle the organisational and funding implications of reorganisation and

140 Day 125, p.32.
141 FJH 600.
142 FJH 599-600.
integration of health and social services. For example, Bob Bunting, a senior manager in the EHSSB, pointed out that reorganisation had created an imbalance in the size of Boards which left the EHSSB responsible for serving over 40% of the Northern Ireland population. He explained that this meant it had to be organised into six districts to ensure the effective delivery of services and that resources such as children’s homes had to be shared and were no longer managed centrally. He also pointed out that the EHSSB’s catchment area included Belfast with some of the most socially deprived inner-city areas in Europe, which was recognised during the 1970s when the EHSSB area was included in European Union initiatives to address social disadvantage in what were categorised as “Areas of Special Social need”. It was also the case that the EHSSB argued that the core funding it received did not take sufficient account of the costs it bore in providing specialist medical services for the whole of the province and medical training.

When the Boards were first established, the Personal Social Services (PSS) element of the budget was safeguarded by being separately earmarked in the annual allocations made to the Boards by the DHSS. This was in order to ensure that PSS resources were not diverted to address health needs. Each Board had a range of Programmes of Care such as Acute Care, Mental Health, Physical Disability and Family and Child Care, and had to decide how to allocate its grant across these Programmes of Care so that it could meet its statutory responsibilities and the related policy aims and objectives set by the DHSS.

Dominic Burke told us that funding for existing services, such as residential childcare services, took the ‘lion’s share’ of available funding and that there was always a debate about how funding available for allocation to new initiatives might be shared between the different Programmes of Care.

Proposals for the Allocation of Revenue Resources for Health and Social Services (PARR)

Following reports on resource allocation in England, Wales and Scotland the DHSS set up a Working Group, which included representatives from the four Boards, to determine a more equitable means of allocating available

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143 RUB 5575.
144 Day 125, pp.42 to 43.
funding to Boards. The Working Group was asked to provide advice on the fairest way of sharing out the limited financial resources available rather than commenting on the level of funds needed. The report of the Working Group Proposals for the Allocation of Revenue Resources for Health and Social Services (PARR) was published in November 1978.145

The Working Group acknowledged that although in the years from 1973 some efforts had been made to channel growth money to priority areas and client groups, the general effect of the allocation system had been to perpetuate the historical situation, rather than to reflect any objective measure of the need for services of the population served. To address this situation it recommended the use of a funding formula based on the methodology of the English RAWP (Resource Allocation Working party) formula, which was used to calculate allocation of funding to Regional Health Authorities and on the Revenue Support Grant calculation used in England to calculate social services expenditure requirements for local authorities.

The aim was that the formula would enable the distribution of available resources on the basis of the relative needs of the populations served by each Board and also the additional specific costs incurred, in particular by the EHSSB, in providing regional services to patients from outside a Board’s area.

The resulting funding formula was known as PARR (Proposals for the Allocation of Revenue Resources). PARR operated as follows:

(a) account was taken of the population of each Board’s area;
(b) each service areas population was then weighted using factors such as age, sex, and utilisation rates;
(c) adjustments were then made to take account of factors which included mortality rates; incidence levels and rurality;
(d) all the weightings were then brought together in the same proportion as the historic revenue expenditure on each category to arrive at each Board’s initial allocation;
(e) general practitioner service costs were excluded from the distribution system and continued to be funded on an actual cost basis; and,
(f) further adjustments were then made on the movement of patients across administrative boundaries (patients resident in one Board area

145 GOV 437-513.
receiving treatment in a hospital administered by another Board) and the additional costs of teaching and other regional responsibilities to arrive at each Board’s notional share of revenue resources.

218 Although much of this work was informed by developments in the rest of the UK, the significant difference was that in Northern Ireland the allocation to the Boards included funds for PSS, while in the rest of the UK these remained the responsibility of local authorities.

219 The DHSSPS told us that the Working Group recognised that the social needs of the population were subject to many influences, including employment, income, housing, health and education. It explained that Standardised Mortality Rates (SMRs) were used as a measure of relative need in the Health element and they were also considered relevant for PSS on account of the Department of Health England’s conclusions that:

“On the whole, the evidence suggests that high SMRs are associated, not only with morbidity but also with poor social conditions”\(^{146}\)

220 The Working Group recommended that it was no longer appropriate to protect the PSS budget in the way described above as it would create ‘practical difficulties’ in applying the formula and that a single integrated allocation for health and social services should be provided to each Board\(^{147}\).

An initial allocation was determined for each Board on the basis of:

(a) the sum required for the maintenance of existing levels of services, updated for pay and price increases;

(b) Revenue Consequences of Capital Expenditure (RCCE);

(c) earmarked allocations; and,

(d) a minimum growth allocation to offset the effects of changes in the population structure.\(^{148}\)

221 The proposed methodology was tested and notional allocations allocated to each Board using the PARR formula were provided in the report. The DHSSPS pointed out that there was very little difference between the actual allocations the Boards received in 1978-79 and the notional PARR allocations and that, in particular, the WHSSB’s actual allocation was 0.1% more than the notional allocation calculated by the PARR formula.

\(^{146}\) GOV 443.

\(^{147}\) GOV 472.

\(^{148}\) GOV 553.
The report concluded that the use of the PARR formula would produce an equitable allocation amongst the Boards, but that a cautious approach should be taken to its implementation to avoid the potential for disruption of services to patients and clients.

**Cautious approach to the implementation of PARR**

John Hunter held senior posts in the DHSS in the period 1979 to 1996, culminating in his appointment as Chief Executive of the Management Executive for the Health and Personal Social Services in 1990. He confirmed that the recommended cautious approach to the introduction of PARR was adopted. He explained that the agreed policy was to adjust the Boards’ historical allocations over time through the differential allocation of growth funds to reflect their relative needs, but avoid any disruption to the health and social services currently being provided.  

This meant that the existing actual allocations to the Boards continued and were not affected by the PARR calculations. Mr Hunter explained that the speed of adjustment of the Boards’ historic allocations to the outcome of the formula was dependent on the size of any additional resources available to the DHSS, together with the capacity of Boards themselves to redeploy resources through efficiency savings.

Mr Hunter recalled that all Boards expressed dissatisfaction about the allocation they received and complained about underfunding for service provision. He described these responses as “a perennial problem affecting the Health and Personal Social Services in Northern Ireland and elsewhere”. Dr McCoy also told us that all the Boards argued for more funding on an annual basis, and in a response to a question from Senior Counsel indicated that the WHSSB was not necessarily shouting louder or more frequently than the other Boards for funding.

Mr Hunter recalled that the EHSSB considered it was under-resourced in regard to its provision of most regional medical services, and also that the WHSSB raised its relative underfunding, arguing that the PARR formula did not adequately take account of the higher levels of social disadvantage in the Western area, which resulted in higher levels of morbidity and social need.

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149 GOV 628.  
150 GOV 629.  
151 Day 126 pp.121 to 122.
He told us that as far as he recalled the WHSSB Board never argued through its area and operational planning process that it was under-funded for a particular service. He explained that if the Board had done so he was confident:

“the Department would have expected the Board to reallocate resources from within, given its responsibility for allocating its budget to best meet the needs of its local population. Had the Department intervened with additional money it would have undermined the Board’s responsibility for service provision and management. This would have been contrary to the principle of subsidiarity on which the respective roles of the Department and Boards were based.”

The WHSSB clearly considered that its overall funding situation, as opposed to its funding for a particular service area, was deficient, and additional core funding from Government was necessary to address the problem. In its Strategic Plan for 1987 to 1992 it included the following as one of its ten major issues:

“This Board’s acknowledged underfunding position, which according to the PARR formulae amounts to almost £6.5 millions limits the scope for achieving cost improvement targets. To secure equity in the geographical distribution of resources continues to be a major issue for the Board.”

A Fair Share

In order to address this major issue, the WHSSB prepared and submitted a document entitled A Fair Share to the DHSS in February 1987 and asked it to urgently review the method of resource allocation between the four Boards. It made the case that the WHSSB’s underfunded revenue baseline resulted in very serious understaffing levels, across all of its Programmes of Care, in comparison with the other Boards. There were few references in the report to childcare, but it did highlight a shortfall of 25 field social workers as of 1 October 1986 compared with DHSS recommended guidelines of one social worker per 5000 of the population. It contrasted its position in relation to numbers of social workers with the other Boards, and showed that while it was in deficit the EHSSB had 54...
more social workers than the recommended levels. Although pressures on residential childcare were not specifically mentioned, it was stated that the shortage of qualified social workers meant that services such as fostering, alternative care for disturbed children and boarding-out arrangements were underprovided. It was clear during our consideration of Fort James and Harberton House children’s homes that the lack of availability of these wider childcare services adversely affected the operation of these homes.

Review of PARR

229 We saw no evidence of a response from the DHSS to the Fair Share report, but in response to growing criticisms of the PARR methodology, in particular that it did not take account of relative need in the Board areas, the DHSS initiated a review of the methodology in 1987. The Review Group comprised officers from the DHSS and each of the four Boards. It was asked to consider the operation of the PARR formula in terms of how well it measured the relative need for health and social care and also to reflect on related developments in Great Britain. The final report of the review group was published in February 1989.156

230 The Review Group carried out a comparison of the actual allocations to the Boards against notional PARR allocations. As referred to above, the initial PARR calculations for 1978-79 had produced a notional distribution of revenue resources that was not markedly different to the actual allocations at that time. The Review Group found that in the intervening years the actual allocations to Boards, which had continued to be made largely on an incremental basis with Boards receiving shares of growth money broadly pro rata to their existing allocations, had increasingly deviated from the notional PARR allocations. It found that the WHSSB and the NHSSB in particular were receiving less than their PARR allocations.

231 The Review Group concluded that these deviations were mainly due to population changes not being reflected in the actual allocations. It identified that while the EHSSB’s share of the Northern Ireland population had shrunk from 43.9% in 1978 to 1979 to less than 41% in 1987 to 1988, and its PARR notional share had therefore reduced from 54.4% to 51.3%, its share of actual allocated revenue resources had only declined from 54.4% to 53.9%. The report also showed the disparity between the WHSSB’s PARR notional allocation of £96.5m and its actual allocation of

156 GOV 5290-5316.
£87.5m. The Review Group commented that it was evident that even with some skewing of available growth in recent years towards the WHSSB, the gap between actual and notional allocations was unlikely to lessen.\textsuperscript{157} While the report identified that the EHSSB had received more than its PARR allocation it also made clear that the EHSSB’s view was that its regional responsibilities were not adequately reflected in the PARR formula.

It also recognised that a number of developments in the intervening period from 1978 had impacted on the PARR process, including that the resource climate had changed and the DHSS had more limited resources available to it. This meant that the original Working Group’s expectations that equity of distribution of resources between the Boards could be achieved through differential allocation of growth funds and not redistribution of existing funds, (i.e. baseline cuts), could not be realised. Instead the DHSS was in the situation of trying both to ensure baseline services were adequately funded while keeping pace with demographic changes and medical advances.\textsuperscript{158}

The Review Group was unable to reach agreement about how the discrepancies between the actual and PARR notional allocations should be addressed, or to resolve the more fundamental issue that the PARR formula served to reinforce existing spending patterns and was influenced by past spending decisions as well as need. To move things forward the DHSS proposed an approach of continued use of the PARR formula but on the basis that broad equalisation, as in moving each Board to its PARR notional funding level, would be pursued without reducing any individual Board’s baseline in any year. In order to achieve equalisation on that basis the DHSS proposed that the allocation process should provide for:

(a) uprating of baselines by GDP [Gross Domestic Product] factors;

(b) the identification of earmarked sums for regional and national priorities; and

(c) the allocation of the balance between Boards deployed through operational plans.

However, the caveats attached to this approach, which were that the target for equalisation should be to get each Board receiving within plus or minus 2\% of its PARR target, and that achieving that target without adjusting current allocations could take up to ten years, were not acceptable to the Boards. The Review Group acknowledged that the positions adopted by

\textsuperscript{157} GOV 544/5.
\textsuperscript{158} GOV 554.
the Boards would be unlikely to be resolved through further discussion. Therefore, the members formally noted that they had been unable to reach a consensus on the role of the PARR formula in the future and that this issue would remain to be resolved by the DHSS alone.\footnote{159}

235 While agreeing that a Social Deprivation Factor should be included in the PARR formula the Review Group could not identify what it should be and recommended that further work and possibly research should be carried out to determine it.\footnote{160} This further work was completed, but was unsuccessful because of a lack of consensus about what social deprivation factor should be used, and how it should interact with the Standardised Mortality Rates and PSS social elements which were already included in the formula.\footnote{161}

236 Despite these difficulties, as the DHSPPS pointed out to us, the Review Group concluded that the PARR formula, with identified refinements and amendments, remained a sound and valuable model for identifying the relative needs of the population of each Board. However, we noted that the Review Group added a qualifier that the implications of a new comprehensive planning system would have to be considered. We took this to refer to the new planning system heralded by the DHSS in 1980 in its circular \textit{Planning and Monitoring of the Health and Personal Social Services}. This circular announced the DHSS’s decision to introduce a new and comprehensive planning system that would incorporate both the Boards’ views on their areas of need and priorities and the Department’s responsibilities for regional policies and priorities. Boards were required, in accordance with DHSS regional policies, guidelines and priorities, to prepare five-year Area Strategic Plans and annual operational planning statements. Each Board was responsible for reviewing services within its area, assessing its needs and determining its priorities in order of importance and developing plans to meet its priorities. The Boards’ five-year Area Strategic Plans were to be reviewed by the Department and extended every third year of the planning cycle.

237 Accountability Reviews were introduced in 1980 as a mechanism for reviewing Boards’ progress in achieving targets set by Government in its regional strategy and agreed through the Board’s own area and operational plans. Mr Hunter could not recall whether the Child Care

\footnotesize{\begin{tabular}{l}
159 GOV 557. \\
160 GOV 548. \\
161 GOV 423. 
\end{tabular}}
Branch was specifically involved in reviewing progress on achieving the childcare objectives set by the DHSS.\textsuperscript{162}

An Accountability Review of the WHSSB’s 1989 Action Plan was held in June 1989 between Mr Elliott, Permanent Secretary of the DHSS, and Mr Frawley.\textsuperscript{163} This was four months after the publication of the report of the review of PARR. The record of the review, which was produced by DHSS officials, included commendation for the Board’s financial management and ability to meet cost improvement targets, but stressed that the measures to achieve this needed to be carefully monitored to ensure that “targets are achieved without any reduction overall in the level or quality of services available to patients and clients.” There was no recorded mention of the Board’s position that it was underfunded. While we appreciated that the purpose of the meeting was to review how the WHSSB was meeting its strategic and operational plans within available resources, the total lack of reference to the accepted underfunded position of the WHSSB in relation to its nominal PARR allowance suggested an unhelpful lack of connection between related processes. We considered that the Review Group’s question of what the relationships should be between the comprehensive planning system, the PARR formula and resource allocation in general was a pertinent one, unfortunately it appears not to have been addressed.\textsuperscript{164}

The position of child care services within integrated services

We also noted that apart from an agreement that the Board would review and report on the availability of a Physiotherapy Service for Handicapped Children\textsuperscript{165} the only other specific comment recorded on childcare services in the Accountability Review was a reference that the Board would be able to benefit from access to funds reserved by the DHSS to improve child abuse training.\textsuperscript{166} The recorded priorities, areas of pressure and of growth related to health services and adult social care. This suggested that, at this time at least, residential childcare was not the highest priority for the Board.

Two former officers in charge of Fort James shared their views that social services in general and childcare in particular struggled to get the priority

162 GOV 630-631.
163 GOV 622 -626.
164 GOV 553.
165 GOV 625.
166 GOV 624.
they required within integrated services. Dominic Burke disagreed with these views when they were put to him and he told us that priority was always given to meeting statutory responsibilities. While we accepted that may have been the case within the social services department we considered that, given the range of responsibilities the Board carried, there may have been times when the weight of the health agenda left less focus on the social services agenda. We asked Dr McCoy about this when he gave evidence and he commented:

“I think it would be a reasonable statement to make that childcare was a bit of a Cinderella within the integrated services that we had so that was in itself a risk. It was a risk for childcare services and the funding of childcare services, yes.”167

We concluded from this that the risks for the funding of childcare services were even greater within the context of a Board which was underfunded in relation to the agreed funding formula being used at that time.

A Second Review of PARR

241 The WHSSB’s dissatisfaction with its actual allocation against its notional PARR allocation continued to grow, and was evident in the minutes of the Board meeting held in May 1991 which recorded the opening remarks of the Chairman of as follows:

“.He said despite the Board’s progress and achievements to date he still had one major continuing disappointment and that was the Board’s underfunded situation. In spite of well reasoned arguments put forward by the Board and which in fact had been accepted by the Department, the issue had not been addressed to his satisfaction. He emphasised that the resolution of this issue will be a major priority over the next 12-18 months.”168

242 In the face of continuing criticism of the PARR methodology, and particularly its ability to identify relative need, and following on from a review of the RAWP methodology in England, a further attempt to identify factors which would allow weightings to be allocated to different needs variables was made in 1994.

167 Day 126, p.147.
168 FJH 19367.
243 A Capitation Review Group was established, which included representatives from the Boards. In the report of its work\textsuperscript{169} it recognised that to provide a fair and equitable means of allocating resources in response to the need for health and social care, a good formula should take account of the additional needs of certain disadvantaged sections of the population, for example those on low incomes, single parents and those from lower socio-economic groups.

244 The Capitation Review Group recommended that a new formula should be devised based on Programmes of Care rather than service areas to take account of the integration of health and social services and to align better with the DHSS strategic planning process. It proposed a new formula that applied relevant populations to each Programme of Care and weighted them by age/cost relationships, and in some areas adjusted by needs variables.

245 However, although it considered and allowed for the higher prevalence of morbidity amongst certain groups in the acute, elderly, maternity and mental health Programmes of Care, it concluded that it:

“had to accept that it has no quantifiable evidence of the relationship between population characteristics (other than age and/or sex) and variations in intensity of care need.”\textsuperscript{170}

246 In relation to the Family and Child Care Programme of Care in particular it concluded:

“There is no empirically available evidence which could be used to substantiate any particular weighting for any specific needs variable within this programme. Consequently the Review Group cannot make any recommendation in this area at this point in time.”\textsuperscript{171}

Once again it was identified that the actual allocation to the WHSSB fell below its PARR notional allocation, but the variance had reduced from the 1.5% variance found by the Review Group in 1989 to a 0.2% variance.

247 The final report of the Capitation Review Group was issued in September 1995. It reached agreement to recommend a capitation formula which was an aggregation of the estimate requirements for each Programme of Care, taking account of relevant populations weighted by age/cost relationships and/or needs variables. However, it had to conclude in relation to Family

\textsuperscript{169} FJH 21766-21814.
\textsuperscript{170} FJH 21806.
\textsuperscript{171} FJH 21788.
and Child Care that further work was needed to examine how service utilisation by age band is distributed throughout Northern Ireland\textsuperscript{172} and to assess what impact if any, potential needs variables have on resource consumption.\textsuperscript{173} Mr Hunter recalled that the WHSSB was unhappy with the outcome of the review and that after further representations from it a small adjustment was made to the outcome in the Board’s favour.\textsuperscript{174}

**DHSSPS’s views on whether the WHSSB was underfunded**

248 In its written evidence the DHSSPS acknowledged the limitations of the PARR formula and the lack of success in identifying and agreeing social deprivation factors that could be applied in the formula to enable account to be taken of relative levels of deprivation. It pointed out that England experienced similar difficulties with its funding formula and that the uniqueness of Northern Ireland in respect of its integrated health and social services meant there was no GB modelling which could be used directly in the Northern Ireland context. Therefore, it suggested that PARR was as robust as possible given the availability and sophistication of data available to the DHSS from 1978 to 1995.

249 The DHSSPS also made the point that whilst PARR was a useful measurement tool it was never 100\% accurate, therefore it should not be seen as the sole basis for measuring actual allocations during this period to determine if each Board received its ‘fair’ share of resources. However, presumably in acknowledgement that PARR was the only measurement tool used and therefore the one that Boards measured their allocations against, the DHSSPS addressed the issue of the WHSSB receiving less than its nominal PARR allocation.

250 It concluded that since the WHSSB was receiving slightly more than its PARR allocation in 1978, that meant that up to that point the WHSSB was not underfunded.\textsuperscript{175} In their joint statement for the Governance and Finance module Tom Frawley and Dominic Burke specifically addressed this conclusion. They pointed out that the use of the PARR formula in 1978-79 “was not a conclusion rather it was a starting point”\textsuperscript{176} and
that the formula was reviewed, critiqued and refined with each iteration building on the preceding analysis. They pointed to the fact that the review of the formula in 1989 identified that a funding gap of £9 million had built up for the WHSSB as an illustration of this continuous refinement.\(^{177}\)

251 We are also of the view that the limitations of the PARR formula were such that it would be wrong to make definitive conclusions on the basis of the initial use of the formula to make notional allocations. However, it is equally the case that given the continuing limitations with the formula the conclusions from the 1989 review also have to be treated with caution.

252 The DHSSPS accepted that over a period of time the WHSSB’s actual allocations, like a number of other Boards, was less than the notional PARR allocation.\(^{178}\) However, it told us that the DHSS constantly strove to ensure all Boards received their fair share of the limited funding available and that it was recognised in the report of the 1989 review of the PARR formula that “the Department pushed any available money towards the Western Board.”\(^{179}\) The DHSSPS pointed out that the DHSS’s efforts to better align its allocations to the WHSSB resulted in the 1.5% deficit in the actual allocations to the WHSSB received in 1989, compared to its notional PARR allocation, being reduced to a 0.2% deficit by 1995.

253 The DHSSPS added that there was no indication from the WHSSB’s Area Strategic Plans or Operational Plans that it was failing to discharge its statutory childcare duties as a consequence of the funding provided to it, or that it had to re-channel resources from non-statutory obligations to discharge its statutory childcare duties. While that may be the case, it is clear in response to the recommendations in the report of the review of co-ordinated peer sexual abuse in Harberton House that the WHSSB made specific requests to the DHSS for additional funding to strengthen its childcare services.

**WHSSB seeking funding to improve its childcare services**

254 At its meeting in February 1991 the WHSSB’s Community Care Committee agreed that the Board’s concerns about the need for additional funding for childcare should be communicated to the DHSS. Mr Frawley confirmed

\(^{177}\) GOV 720.
\(^{178}\) GOV 427.
\(^{179}\) GOV 425.
that he would:

“...put forward the case again for the Board’s uniquely underfunded situation and ask the Department to consider the matter in the knowledge of the analysis they have sight of and consider making some exceptional arrangement for the Board.”

Mr Frawley wrote to Mr Hunter setting out the Board’s concerns and then met with civil servants to discuss the matter. A civil servant, Mr Green, produced a minute of the meeting in which he recorded that Mr Frawley made clear the Board’s continued grievance about its funding deficit and that the DHSS was not doing enough to address it. He recorded that he explained to Mr Frawley that the funding allocations for 1991-92 had been discussed fully with the Boards and could not be unstitched, that there was no reserve held by the Department that could be used to increase the WHSSB’s share and that in spite of the limited room to manoeuvre the DHSS had already skewed a further £300,000 to the WHSSB. He also assured Mr Frawley that the DHSS remained fully committed to moving towards a full capitation based funding position. Mr Frawley was not satisfied with these explanations and asked for a meeting with Mr Hunter. This meeting duly took place on 6 March 1991, and Mr Hunter sent a memo to Mr Green about it in which he stated that he provided the same explanations to Mr Frawley as Mr Green had about why the WHSSB’s funding allocation for 1991-92 could not be increased. He also explained to Mr Frawley that deliberations on 1992-93 funding allocations would take account of the WHSSB’s target allocation and that the Board would be free to use any additional sum to develop childcare services in 1992-93. However, he stated that he made clear:

“...it was the Board’s responsibility to manage any problems which currently exist in respect of the delivery of these services.”

Mr Frawley subsequently wrote to Mr Hunter on 20 March 1991 to record the WHSSB’s Resource Allocation Committee’s displeasure at what it perceived as “positive discrimination by the Department against this Board in properly addressing the issue of equity in resource allocation”. He went on to state that “Board members felt that their position and that of the Board in relation to both staff and children was becoming untenable”.

180 FJH 10437.
181 FJH 50740-507401.
182 GOV 35009.
183 FJH 50742-50743.
He concluded his letter:

“I write this letter not in any way to challenge or threaten the authority of the Department. I merely feel it is essential at this point in a Financial year your Executive and also the Minister should be aware that the Board and its staff will not be able to contain the political dimensions of the failure to address an issue which has now been with us for nearly 20 years.”\(^{184}\)

257 Mr Frawley sent a second letter to Mr Hunter on the same day, in which he reported that the anger and frustration of the WHSSB’s Resource Allocation Committee at the failure of the Department to address the PARR issue was particularly felt in relation to childcare “in light of our recent difficulties”.\(^{185}\) He went on to contrast the WHSSB’s position with that of the EHSSB, pointing out the number of assessment units and residential childcare facilities available in Belfast. He concluded the letter by putting on record to the Executive the Committee’s “deep dismay at the failure to recognise our deficiencies in child care staffing which we believe are directly related to the historically [sic] underfunding of the Board.”\(^{186}\)

258 Just prior to this correspondence Dominic Burke wrote to the Chief Social Work Inspector, Dr McCoy, to make what was to prove an unsuccessful bid for additional funding of £130,000 to develop an assessment and treatment unit at Harberton House. Mr Burke made clear in his letter that the WHSSB was still experiencing sustained pressure within its childcare services.\(^{187}\)

259 Mr Hunter’s view that it was up to the WHSSB to reprioritise the allocation of its funding if it was experiencing pressure in a particular area was reiterated by the DHSSPS in its written evidence to us. When Dr Harrison, representing the DHSSPS, was asked to comment on HSCB’s position that the WHSSB was underfunded she responded that all Boards argued that they did not get sufficient money. She pointed out that the comparisons in the Bunting report between the staffing levels in North and West Belfast in comparison to the Foyle Unit of Management\(^{188}\) were based on allocated funding rather than the overall level of funding provided to the respective Boards, i.e. it was for the WHSSB to decide how to prioritise its funding.

\(^{184}\) FJH 50743.
\(^{185}\) FJH 50744.
\(^{186}\) FJH 50744.
\(^{187}\) FJH 588.
\(^{188}\) FJH 20301.
and how much money to spend on its children’s services and social work services.

260 Whilst we accept that it was the responsibility of the WHSSSB to manage its resources to best effect in order to meet its statutory responsibilities, we considered that it argued well in the *Fair Share* report that it was pressed across all of its Programmes of Care and had very limited ability to reprioritise and reallocate funding.

**DHSS’s attempts to adjust actual allocations**

261 However, we also considered that the DHSS was in a similar position in that it had limited growth money to use to adjust actual allocations and it experienced considerable resistance when it attempted to redistribute funding from one Board to another. For example, when the DHSS informed the EHSSB in August 1988 that circa £240,000 of funding previously allocated to it was going to be redistributed to the other Boards, it resisted strongly and made the matter politically sensitive by stating that the reduction would mean it could not honour agreements it had reached with the providers of voluntary children’s homes, or make planned improvements to its own residential child services. The EHSSB informed the providers of voluntary children’s homes about the planned reduction in funding and the implications for them and they in turn wrote to the DHSS to make clear the impact any reduction in funding would have on their services.

262 The same difficulties arose when the DHSS tried to redistribute core funding from the EHSSB to the other Boards as part of implementing a move towards full capitation funding. There was a cross boundary adjustment made in the financial year 1992-93 where funds were taken from the EHSSB and reallocated to the other Boards. This adjustment meant that the WHSSSB received recurring additional funding of £3million in its baseline budget. However, in a letter of September 1992 to Mr Frawley, Mr Hunter expressed the DHSS Management Executive’s concern about the speed of the move towards full capitation funding. The move towards this new funding regime had been part of the assurances that Mr Hunter and Mr Green had given to Mr Frawley when they met with him in spring of 1991 to explain why the WHSSSB’s request for additional funding to address childcare concerns could not be met.

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189 HIA 5384-5386.
190 HIA 5377.
191 GOV 732.
Mr Hunter explained in his letter to Mr Frawley that the Minister had asked the Chairman of the EHSSB to undertake an assessment of the implications of moving towards full capitation funding over a three-year period, through the redistribution of resources. It was estimated that this would entail a baseline reduction of around £7 million each year for the EHSSB, which would then be redistributed to the other three Boards. Mr Hunter asked for an indication of how the WHSSB would deploy additional resources of £2 million to £3 million each year. He finished his letter by stressing the importance of this forecasting exercise to be completed with the strictest confidentiality until the DHSS was in the position to make a clear statement about the way forward.

It was clear from the resource allocation letters for the financial year 1993-94 that were sent to the Boards that this redistribution of funding did not occur, presumably because of successful representations by the EHSSB. The allocation letter sent to the EHSSB made no mention of a reduction in its core funding, but rather confirmed that its revenue allocation would be increased by £469,000. Although the WHSSB was also allocated increases of £342,000 in its revenue budget and £275,000 in its capital allowance, in total that was only £208,000 more of an increase than the EHSSB received and no way near the potential £2 million to £3 million increase indicated in Mr Hunter’s letter to Mr Frawley. The DoH pointed out in its response to the Warning Letter process that in the financial year 1995-96 a further £4.5 million was taken from the EHSSB and redistributed to other Boards and this resulted in the WHSSB receiving an additional recurring £1.5 million in its baseline budget. The DoH accepted that it may be that representations by the EHSSB delayed and reduced the proposed reduction referred to in Mr Hunter’s letter but pointed out that achieving the reallocation of funds in 1995-96 was a substantial result.

We noted that these tensions were not limited to core funding of Boards. They were also experienced in relation to the allocation of additional funding for work in relation to child abuse. In August 1993 the DHSS sent supplementary letters to the Boards about funding for 1993-94 in which it stated that it had found it impossible to agree a formula for distribution of funding of child abuse monies that would reflect relative need. The letter to the WHSSB stated that it would receive an additional £144,000 for this work but explained that in respect of recurring “funding for child abuse” it has not been possible to achieve a method for allocation which would be sufficiently robust and defensible and which would command respect by all the Boards, despite the involvement of the Assistant Directors from the
Boards working with officials to achieve a more refined formula. In the absence of a more refined formula that could reflect relative deprivation, the DHSS decided to base the allocations on distribution of the child population aged 0-17 years in each of the Board areas, which was the same approach that had been used for the 1992-93 allocation.

Paul Cummings, Director of Finance for the HSCB, told us that it took until the financial year 1995-96 for resources from the EHSSB to be redistributed to the other Boards. He explained that at that time the main driver for resource allocation was population size, therefore the NHSSB as the second of the most populous of the four Board areas received the highest uplift.

Competing interests of Boards

Mr Frawley and Mr Burke commented to us in relation to redistribution of funding between Boards:

“It appears to us, however the Department was unwilling to make the difficult choices involved in achieving equity...We would contend that there was little discretion ever exercised by the Department to reallocate funds.”

While we understand this view, and have some sympathy with it, there is no doubt that the DHSS was hampered by limited funds for growth, a funding bias towards the protection of existing services and its inability to reach agreement with the Boards about a more equitable means of distributing funding on the basis of relative need. The PARR formula clearly had its limitations, but even a more sophisticated formula, able to take account of relative need, would have had limited success if the starting point continued to be the maintenance of existing levels of service.

Given that starting point, we understood the difficulties the DHSS faced in trying to cut funding to the EHSSB. The EHSSB was providing a wide range of health and social services in a deprived inner city area to a community dealing with the serious social unrest caused by the Troubles. It was also strongly arguing that the PARR formula did not adequately take account of its regional medical services and medical training.

192 SPT 80425.
193 SPT 80425-80426.
194 GOV 750.
195 GOV 724.
Balancing the competing interests of Boards, given the challenging circumstances they were all dealing with, would have made appearing to favour one Board at the expense of another complicated and unappealing, particularly given the political response at local level such shifts would have been sure to prompt. We noted that even now in retrospect, when commenting on the situation, the HSCB balanced the views of the WHSSB and the EHSSB. In its closing written submission to Module 5, the HSCB stated its position that while the WHSSB received a percentage of the available resources for growth from 1973 to 1975, that percentage was never sufficiently weighted in its favour to achieve a narrowing of the gap between its actual allocation and the sum that would have reflected its demographic profile, its levels of deprivation and the levels of health and social care need it was being required to respond to. However, it also stated in its submission for Module 14, Governance and Finance, that the EHSSB had a valid argument at the time that it required recompense for factors such as regional medical services and cross-boundary flows for acute hospital treatment, and that this should be reflected in the allocation of resources by the Department. Therefore, now as then, the competing interests of both Boards are acknowledged.

In the absence of the type of reallocation of funding that was required, it appeared that the PARR formula actually added to the frustration of the WHSSB; PARR provided recognition that it was underfunded but the status quo was largely maintained and the recognition did not translate into the additional funding at the level required.

While we recognised and accepted the difficulties the DHSS faced in reallocating core funding, we considered that it should have engaged more with the WHSSB about the practical and financial implications of implementing the recommendations of the Bunting Review into the circumstances surrounding the peer sexual abuse in Harberton House. As we have explained in greater detail in Chapter 23, Dr McCoy told us in a written statement that he thought the WHSSB’s focus on resources when it was drawing up the Terms of Reference for what was to become the Bunting review was opportunistic. When he gave evidence in person he confirmed that continued to be his view. We agreed with Dr McCoy that the focus in the Bunting review should have been on the circumstances

196 FJH 40912.
197 GOV 642.
198 FJH 40886.
and factors that enabled the peer sexual abuse to go on for so long undetected. However, lack of resources was a very relevant matter and the Bunting report assessed the WHSSB’s childcare services in general, and its residential services in particular, to be under so much pressure that there continued to be risks for the children depending on them and the staff providing them.

Bidding for additional funds

273 Given that a radical redistribution of core funding was not found possible, the other means open to the DHSS to redress the balance was to bid for additional funds to address priority issues. Dr Hilary Harrison explained in her written evidence for Module 5 that the DHSS and its predecessors traditionally made bids for additional funding from the block grant in advance of the financial year, or as part of the in-year monitoring round, to address priority issues. She explained:

“Funding so obtained was then allocated to Boards in a proportionate way or in a manner aimed at addressing specific or regional needs.”199

274 It seemed reasonable to assume that in order to make decisions about allocating funds on a priority basis the DHSS would have to know how the Boards had allocated funding to Programmes of Care and in particular to meeting the Strategic Objectives it set for these Programmes. However, when he gave evidence in person Dr McCoy explained that that it was difficult for the Department to ascertain how the Boards actually spent their funding:

“...we wouldn’t have had good information about when they received their block grant, how it was allocated between Health Services and Personal Social Services, and even within that within the various programmes of care within Social Services, whether it be child care mental health or whatever.”200

275 Dr Harrison explained in her oral evidence in this Module that although Boards were expected to provide financial returns known as FR22s to the DHSS it was not straightforward to compare and contrast expenditure, as the Boards accounted for their spend under different headings and it was difficult to disentangle, for example, the amounts each Board spent on fostering. Dr Harrison explained that around 1993-94 the Department

199 FJH 40388-40389.
200 Day 126, p.137.
improved the guidance about how the FR22 forms should be completed and held meetings with the Boards about their completion in order to obtain clearer, and therefore more comparable, information about expenditure to inform planning for the Children Order.201

276 This evidence suggested to us that monitoring arrangements that should have provided the Department with information to analyse and compare and contrast each Board’s spend on family and childcare services and explore the relationship between expenditure and quality of services were not adequate up until at least 1993-94.

**Reports about the impact of lack of resources on services**

277 As indicated above, the evidence from former DHSS and SSI officials was that all Boards argued for more funding. Even within that context we would have expected that matters coming to the attention of inspectors about how resource difficulties were affecting a Board’s ability to meet its statutory childcare duties would have triggered a significant response. Marian Reynolds, a SSI inspector, received such a report when she met with senior WHSSB childcare managers in April 1995.

278 Ms Reynolds subsequently wrote to C F Stewart of the DHSS, to report that these managers had informed her that the level of funding was such that at times decisions had to be made:

"relating to discharge of statutory duties and/or compliance with procedural guidance".202

Ms Reynolds suggested to Mr Stewart that this might indicate the need for an assessment of the adequacy of funding to the WHSSB’s Family and Child Care Programme of Care. Mr Stewart’s response to the memo was to reassure Ms Reynolds that the allocation of funding was equitable, and that other Trusts and Boards were funded in a similar way, and that it was up to the Board to decide how to allocate money to childcare services.203 Ms Reynolds told us that on the basis of this advice from Mr Stewart she considered there was no need to take further action. In response to questions about this matter, Ms Reynolds stressed that if a Board was saying it could not meet or was at risk of not meeting its statutory

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201 Day 129, p.19.
202 FJH 40372.
203 Day 128, p.49.
functions it was for the Board to reallocate funding to ensure that the statutory functions it was responsible for providing were delivered.

279 In its closing submission to Module 5, the HSCB questioned this approach and suggested that on the basis of Ms Reynolds’s report of the concerns expressed by the WHSSB managers the DHSS should have undertaken an “accountability review at a high level”. The HSCB observed that this lack of action by the DHSS was in the context of the findings of a review into the death of a child in the care of the WHSSB, the review of peer sexual abuse in Harberton House, and the “‘mantra’ down the years about being underfunded in the West”, all of which were known by the Department.

280 While an accountability review may not have been necessary we consider that further engagement with the WHSSB childcare managers about the pressures they were under and how they might be managed was necessary. We accept that it was for the Board to manage its resources. Nevertheless, senior managers telling a member of the inspectorate that they were struggling to meet statutory childcare responsibilities merited a more considered and proactive response and we are critical of the DHSS’s complacent response to this serious matter.

281 The DoH responded to this criticism through the Warning Letter process. It told us that Ms Reynolds had confirmed to the best of her recollection, that after her exchange with Mr Stewart, she met with senior WHSSB managers specifically to discuss the discharge of statutory functions, to provide advice and to seek assurance that the Board was continuing to discharge these functions in accordance with the requirements. It also stated that Dr McCoy had confirmed that such an approach would have been his standard practice in the light of such concerns and he had no reason to doubt the accuracy of Miss Reynolds’ recollection. In addition, the DoH stated that Dr McCoy confirmed that he met with Mr Burke on at least a monthly basis and that, far from being one of inactivity or complacence, the SSI’s relationship with the WHSSB was much closer than that which existed with any of the three other Boards and contact was on a more frequent basis. It is not possible for us to reach a conclusion on this additional evidence at this stage since we do not have the opportunity to question it and the HSCB has not had the opportunity to comment on it. However, we decided that since it provided such a different perspective about an important matter that it was appropriate to note it.
Conclusions about the funding of the WHSSB

282 Mr Frawley and Mr Burke noted Mr Hunter’s statement that it was for a Board to reallocate funding if a particular service was under pressure and if the DHSS had intervened in such circumstances it would have been contrary to the principle of subsidiarity on which the respective roles of the DHSS and the Boards were based. They commented:

“An alternative view might be that 280k people living in the WHSSB were not being provided with a level of service equivalent to that available to people living in the rest of Northern Ireland, this situation having persisted over an extended period of time. This was a circumstance that surely warranted an intervention by the Department as the principal Authority within the Northern Ireland Health and Social Care system.”

283 We concluded that the WHSSB was historically underfunded, that this was known by the DHSS, and that the adverse implications this funding shortage had on the provision of the WHSSB’s childcare services was also known to the DHSS. However, we accepted why the commitment to protecting funding for existing services, the lack of growth funding and the understandable unwillingness of the Boards to accept any reduction in their funding, meant that the DHSS did not implement the PARR formula. Given the social unrest at the time, the pressures on all Boards, and the EHSSB’s argument that it was being insufficiently funded for providing province-wide specialist medical care, we understood why the DHSS decided to maintain historical funding allocations for so long. We also recognised that eventually the DHSS did make cross-boundary adjustments in the allocation of funding to the Boards which resulted in the WHSSB receiving additional recurrent base line funding.

284 However, we were critical of the DHSS’s failure to fully engage with the WHSSB about the specific resource difficulties which the Bunting report detailed it was facing in meeting its statutory childcare responsibilities. The DHSS accepted at that time that the WHSSB was receiving less funding than its PARR notional allocation and Mr Frawley made very clear to Mr Hunter the Board’s view that historic underfunding was adversely affecting its provision of childcare services. We understood why the immediate allocation of additional funding was not possible; however, we considered the DHSS, or the SSI on its behalf, should have engaged more formally with the WHSSB to ensure it was taking whatever action was necessary

205 GOV 629.
to secure its childcare services. We were also critical that the DHSS did not respond appropriately to a report from an SSI inspector that senior WHSSB managers had informed her that they were struggling to meet statutory childcare responsibilities. We noted that through the Warning Letter process the DoH informed us that Ms Reynolds recalled that she did follow up these matters with WHSSB managers. We recognised the appropriateness of the DHSS preserving the boundaries between its roles and responsibilities and those of the Boards. However, it was the case according to the DHSS circular Monitoring of Residential Child Care Services issued in October 1983 that the Boards were accountable to the DHSS for the way in which they discharged their responsibilities in terms of the quality, range and availability of childcare services.\textsuperscript{206} We therefore considered a more proactive response by the DHSS and/or the SSI on its behalf would have been appropriate to ensure that the WHSSB was effectively addressing the serious difficulties it was experiencing in the provision of its childcare services.

\textsuperscript{206} KIN 75357.
Appendix 1: The Children and Young Persons (Voluntary Homes) Regulations (Northern Ireland) 1952

HIA 287

CHILDREN AND YOUNG PERSONS

which the child has attended, or, if the child has not attended a school, from the last teacher of the child;

(d) a certificate in such form as the local education authority may require from the school medical officer of the health authority for the area in which the parent of the child resides to the effect that the child may, in his opinion, be employed in the manner proposed without prejudice to his or her physical development and that the employment will not, in his opinion, render the child unfit to obtain proper benefit from his or her education.

4.—(1) A licence for the purpose of these Regulations shall be in a form approved by the Ministry and shall specify the name of the person to whom the licence is granted, the name of the child to be employed, the period of employment and such reasonable restrictions and conditions as to the employment of the child as the authority considers desirable;

(2) a local education authority shall not grant a licence for a period in excess of six months.

5. The holder of a licence shall, at least seven days before the child takes part in any entertainment, notify the local education authority within whose area the entertainment is to take place of the forthcoming employment of the child and where the licence was not granted by that local education authority shall present the licence to that local education authority for inspection.

Sealed with the Official Seal of the Ministry of Education for Northern Ireland this 6th day of November, 1952, in the presence of

(L.S.)

R. S. Brownell,
Secretary.

Voluntary Homes

Regulations, dated 25th July, 1952, made by the Ministry of Home Affairs under sub-section (1) of Section 101 of the Children and Young Persons Act (Northern Ireland), 1950.

1952. No. 131

The Ministry of Home Affairs, in pursuance of the powers conferred upon it by sub-section (1) of Section 101 of the Children and Young Persons Act (Northern Ireland), 1950, and of all other powers enabling it in that behalf, hereby makes the following Regulations:—

1. These Regulations may be cited as the Children and Young Persons (Voluntary Homes) Regulations (Northern Ireland), 1952.

2. These Regulations shall come into force on 1st October, 1952.
3. —(1) In these Regulations the following expressions have the meanings hereby respectively assigned to them, that is to say:—

the Act” means the Children and Young Persons Act (Northern Ireland), 1960;
“administering authority” means the person or persons carrying on the voluntary home;
“child” means a person under the age of eighteen;
“Fire Service” means in the area of the County Borough of Belfast the Belfast Fire Brigade and elsewhere in Northern Ireland the Northern Ireland Fire Authority;
“home” means a voluntary home as defined by Section 98 of the Act;
“primary school” has the same meaning as in the Education Act (Northern Ireland), 1947;
“the Ministry” means the Ministry of Home Affairs for Northern Ireland;
“training school” has the same meaning as in the Act.

(2) The Interpretation Act, 1889, shall apply to the interpretation of these Regulations as it applies to the interpretation of an Act of the Parliament of Northern Ireland.

4. (1) The administering authority shall ensure that each home in its charge, is conducted in such a manner and on such principles as will further the well-being of the children in the home.

(2) The administering authority shall make arrangements for the home to be visited at least once in every month by a person who shall satisfy himself whether the home is conducted in the interests of the well-being of the children, and shall report to the administering authority upon his visit and shall enter in the record book referred to in the Schedule hereto his name and the date of his visit.

5. (1) The administering authority shall appoint a person to be in charge of the home:—

Provided that any person in charge of the home immediately before these Regulations come into force shall be deemed to have been appointed to be in charge of the home under this paragraph.

(2) The person in charge of the home shall compile the records referred to in the Schedule to these Regulations and shall keep them at all times available for inspection by any inspector appointed by the Ministry.

(3) The person in charge of the home shall be responsible for the custody of the medical records of each child and shall keep them at all times available to the medical officer or to any inspector appointed by the Ministry.
6. The administering authority shall secure that so far as is practicable each child in the home attends such religious services and receives such religious instruction as are appropriate to the religious persuasion to which he belongs.

7.—(1) The administering authority shall appoint a medical officer for each home in its charge.

(2) The duties of the medical officer shall include —

(i) the general supervision of the health of the children (excluding their dental health);

(ii) the general supervision of the hygienic condition of the premises;

(iii) attendance at the home at regular intervals with sufficient frequency to ensure that he is closely acquainted with the health of the children;

(iv) the examination of the children at regular intervals;

(v) the provision of such medical attention as may be necessary, other than dental treatment;

(vi) the giving of advice to the person in charge of the home on matters affecting the health of any of the children or the hygienic condition of the premises;

(vii) the supervision of the compilation of a medical record for each child in the home containing particulars of the medical history of the child before admission, so far as it is known, of his physical and mental condition on admission, of his medical history while accommodated in the home and of his condition on discharge from the home.

(3) Notwithstanding anything in the preceding provisions of this Regulation, the administering authority may appoint more than one medical officer and may divide the preceding duties among them as it sees fit.

8. The administering authority shall make suitable arrangements for the dental care of the children in the home.

9.—(1) The administering authority shall notify the Ministry forthwith —

(i) of the death of any child in the home and of the relevant circumstances;

(ii) of any accident in the home resulting in serious injury to a child or a member of the staff;

(iii) if known to the administering authority, of the death of any child who dies within two months of ceasing to be in the home and of the relevant circumstances so far as they can by reasonable enquiry be ascertained;

(iv) of any outbreak among the children in the home under five years of age of infective gastro-enteritis, and of any
Voluntary Homes

Section 10

(1) The administering authority shall obtain the advice of the Fire Service before opening a new home or making any structural alterations to an existing home, and shall arrange for the periodic inspection of each home in its charge by the Fire Service.

(2) The administering authority shall ensure that periodic fire drills and practice are carried out in each home in its charge, so that the staff, and so far as possible the children, are well versed in the procedure for saving life in case of fire.

(3) The administering authority shall report to the Ministry forthwith any outbreaks of fire in any home in its charge.

Section 11

(1) The person in charge of a home shall ensure that generally order is maintained by his personal influence and understanding and that of his staff, and resort to corporal punishment shall be avoided as far as possible.

(2) Where correction is needed for minor acts of misbehaviour, the punishment shall take the form of forfeiture of rewards or privileges (including pocket money) or temporary loss of recreation; provided that a light tap of the hand may occasionally be applied to the hand of a child with the object of indicating urgent disapproval rather than that of inflicting pain.

(3) Other forms of corporal punishment shall be subject to the following conditions:

(a) It shall be inflicted only on the hands or posterior with a light cane and shall not exceed six strokes in the case of a child over 10 years of age, and 2 strokes in the case of a child over 8 and under 10 years of age. No child under 8 years of age shall be so punished.

(b) It shall not be administered by any person other than the person in charge of the home or in his absence his duly authorised deputy...

(c) A second member of staff shall invariably be present to witness the proceedings.

(d) No caning shall be administered in the presence of another child.

(e) Any child known to have a physical or mental disability shall not be subjected to corporal punishment without the sanction of the medical officer.

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(4) Particulars of the administration of corporal punishment under paragraph (3) of this Regulation (giving the name and age of the child concerned, the offence and the number of strokes of the cane awarded him) shall be entered in the record book referred to in the Schedule to these Regulations.

(5) At the commencement of each quarter the administering authority shall furnish to the Ministry a return giving particulars of corporal punishment imposed during the preceding three months.

12.—(1) The Ministry may give directions limiting the number of children who may at any one time be accommodated in a home.

(2) The Ministry may give directions limiting the period during which any child may be accommodated in a home.

(3) The Ministry may direct any child to be removed from a home and to be placed in another home or in a welfare authority home or to be boarded out, or to be otherwise dealt with.

(4) The Ministry may require the administering authority to furnish returns of the children in a home or boarded out from the home in such form as the Ministry may from time to time direct.

13. The Ministry may give directions to the administering authority prohibiting the provision for the children in any home in its charge of clothing specified in the directions.

14. The administering authority shall furnish to the Ministry on demand such information as the Ministry may from time to time require as to the facilities provided for the parents or guardians or relatives of children in the home to visit and communicate with the children, and shall comply with any directions given by the Ministry as to the provision of such facilities.

15. The administering authority shall forthwith give notice to the Ministry when a person in charge of a home ceases to be in charge of that home, and of any new appointment to the position.

16. Where a primary school or a training school is established or maintained within a home, these Regulations shall not apply to any child during that part of the day in which he is attending the primary school or to any child who has been committed to the training school.

17. Where in the opinion of the administering authority it is desirable in the special circumstances of any situation that the provisions of one or more of the foregoing Regulations should not apply, a special arrangement may be made with the prior consent of the Ministry.

Sealed with the Official Seal of the Ministry of Home Affairs for Northern Ireland this twenty-fifth day of July Nineteen Hundred and Fifty-two in the presence of

(L.S.)

(Sgd.) J. B. O'Neill,
Assistant Secretary.
Appendix 2: Miss Kathleen Forrest’s Memorandum, Ministry of Home Affairs, 28 April 1953

Here are some brief summary impressions of the different Voluntary Children’s Homes.

1. Dr. Barnardo’s National organisation
   Macedon—Well-staffed, well-equipped; excellent care and training. Children attend outside schools.
   Manor House—The same. For babies and toddlers.

2. Glenavy—Local Volunteer Committee
   Very high ratio of staff to children, very good quality staff. Many voluntary helpers in addition. Excellent care for all ages of children, boys up to about 9 years, girls up to school-leaving age. Equipment and activities excellent. Whole atmosphere warm and homely.

3. Johnston Memorial—Presbyterian Volunteer Committee
   Very good care by good quality staff. Children go to ordinary day schools and Technical schools. Natural, happy atmosphere. House a bit shabby, but homely.

4. Moyallan—Charitable trust. Really a private charity of Richardson family, Quakers.
   Will probably wind up as soon as present few teen-age girls are on their own feet. Very good care as in an ordinary family. Girls go to Grammar or Technical schools.

5. Manor House—Lisburn—Voluntary Committee
   Has been poverty-stricken both in money and ideas for some time past. Insufficient staff or poor quality in recent times. Equipment and maintenance very poor. Some improvement in recent weeks, but needs a large amount of money spent on, e.g., floor-coverings, heating, beds, tables, chairs and play equipment. Attend outside schools.

6. Childhaven—Methodist Voluntary Committee
   Lively energetic young Matron is just in process of introducing a homelier atmosphere to this somewhat bare and Spartan Home. Is not helped by the other 3 members of staff, who are little more than domestics. Would need more, better-quality staff and more equipment. Committee would be willing, I think, if helped. Have football field, swings and large playground. Attend outside schools.

   Combines a voluntary Home and Shamrock Lodge Training School.
   Insufficient staff, and not of highest quality. Equipment and maintenance good, but one room full of lovely toys never seems to be entered or used by children. Happy enough atmosphere, however, and children lively. Attend outside schools.

8. Thornsden—

HIA 1462
9. Thordale:  
Salvation Army mother-and-baby Home. Takes some children and teen-age girls. Well run by adequate trained staff. Could do with more play equipment for toddlers. Otherwise standards of care and training excellent. Get grants from W.A.S. for mother-and-baby work and payment for them and other children and girls, who are, as a rule, placed there by W.A.S.

10. Hopedene:  
Mother-and-baby Home. Only registered in case they should ever have to keep an unaccompanied child temporarily.

11. Kennedy House:  
Only a few teen-age girls, the rest are older women.

12. Good Shepherd Convent:  
Derry.  
Material conditions and equipment very good. Girls and women work in laundry, have all amusements laid on inside Home. Quite happy atmosphere in both places.

13. Good Shepherd Convent:  
Newry.  
Good material conditions. Could perhaps do without more play equipment, but would, I think, buy anything suggested to them. Have singing, elocution, dancing classes and girls go out to ordinary schools and to do shopping for Home. Not short of money, I think.

14. Sacred Heart Home:  
Good Shepherd Convent, Belfast.  
Good care and training by trained staff of Brothers – plus one woman cook. Is still in process of development, but on well organized lines.

15. Babane House:  
Children go to outside school. This is also a Home for old ladies. The children look quite well cared for, and the babies very well cared, but I feel there are insufficient staff, and the bigger children’s activities could be improved.

16. Our Mother of Mercy Convent:  
Newry.  
Mainly a cheap boarding-school, on Spartan lines, but affectionate care is given. Take a few voluntary children only. Said to have none when Dr. Simpson visited recently. Adequate care and training. Short of play equipment.

17. Convent of Mercy:  
Bessbrook.  
Poverty-stricken. Short of staff and play equipment. Very institutional for older children, and babies in desperate plight. Rev. mother very anxious to improve and hopes to have Nursery School started. Getting equipment already. Try to make holiday arrangements.

18. Nazareth Lodge:  
Belfast.  
Very institutional, but material conditions better than Nazareth Lodge. Short of play equipment. Short of staff.

19. Nazareth House:  
Belfast.
Very institutional, but boys do get out to school, younger ones to Nazareth House, older ones to Christian Brothers. Short of staff; short of play equipment.

Best play equipment of any of the 4 Nazareth Homes, at any rate for toddlers. Still very institutional.

The children in these 4 Homes have nothing like a normal upbringing. They must feel unloved as it is just not possible for the number of staff to show affection to such large numbers of children. They can know little or nothing of the world outside, as with one exception school is on the premises, and must be completely unprepared for it, either in character or knowledge. I find these Homes utterly depressing and it appals me to think that these hundreds of children are being reared in bleak, dreariness. This is not meant entirely as criticism of the staff, but their task is impossible. Some of them have, however, little idea of what a child’s life should be. They have got used to their own institutional set-up. For example, when asked about the children going out, one replied “Oh yes, they go to the Circus at Christmas”. If this is their sole contact with the world, they must have a distorted idea of it! Even their “god-parent” scheme is unreal, as instead of getting ordinary folk somewhere near the children’s own level to be “uncles and aunts” they have looked for business men who will give the boys jobs on leaving – regardless of whether the business is likely to suit the boy!

In short, I think we must press for complete overhaul of the whole set-up of these Homes, and end this by any means possible.

[Signature] 
Katherine O’Reilly
26th April, 1953.
Appendix 3: Home Office Memorandum on the Conduct of Children’s Homes, 1952

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GOVERNMENT OF NORTHERN IRELAND

Ministry of Home Affairs,
Stormont,
Belfast.

File No. Z.8
Circular No. 70, 25/1952

24th September, 1952

Sir/Madam,

With reference to the Children and Young Persons (Voluntary Homes) Regulations (Northern Ireland), 1952, (S.I. & O. 1952, No. 131), of which a copy was sent to you on 1st September, I am directed by the Minister of Home Affairs to forward, for your information, a copy of a Memorandum issued by the Home Office in September, 1951, on the Conduct of Children’s Homes.

Although this Memorandum has been prepared mainly with reference to Children’s Homes in England, it contains various suggestions and advice which should prove of considerable assistance to managers of staff of Children’s Homes in Northern Ireland, and also to those who have responsibilities for the general management and maintenance of such Homes. The Ministry would, therefore, be glad if you would arrange to supply a copy of the Memorandum to everyone concerned.

Copies of the Home Office Memorandum (D.O. Code No. 34 - 349), may be obtained from Her Majesty’s Stationery Office, 80 Chichester Street, Belfast, price 5d.

I am, Sir/Madam,
Your obedient Servant,

[Signature]

for SECRETARY.

The Secretary of each Voluntary Home in Northern Ireland

21/9/52

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Memorandum by the Home Office on the Conduct of Children’s Homes

INTRODUCTION

1. This memorandum on the conduct of children’s homes has been prepared for the guidance of local authorities and voluntary organisations, and is intended to be read with the Administration of Children’s Homes Regulations, 1951. The contents are based on experience gained by Home Office inspectors in visiting children’s homes and on advice tendered to the Secretary of State by the Advisory Council on Child Care. It deals with the needs of children who, for one reason or another, cannot be looked after and are brought up as children’s homes, and it is written in the main with direct reference to children living as members of small groups of mixed ages and both sexes who are in care for an indefinite period and who look to the local authority or voluntary organisation for their upbringing. But most of what is said is applicable to all children’s homes; and recommendations relating specifically to large homes are contained in Appendix I.

2. In paragraph 477 of their Report the Curtis Committee stated the main requirements for the substitute home in the following words:—

"If the substitute home is to give the child what he gets from a good normal home it must supply:

(i) Affection and personal interest; understanding of his defects; care for his future; respect for his personality and regard for his self-esteem.
(ii) Stability, the feeling that he can expect to remain with those who will continue to care for him till he goes out into the world on his own feet.
(iii) Opportunity of making the best of his ability and aptitudes whatever they may be, as such opportunity is made available to the child in the normal home.
(iv) A share in the common life of a small group of people in a homely environment."

TYPE AND SIZE OF CHILDREN’S HOMES

3. The aim when providing new homes for children in long-term care is to enable each child to live as a member of a small group. The number of children in a home of this kind (referred to in this memorandum as a family group home) may vary from eight to twelve. If the home is a house in a street (perhaps a villa type home or two semi-detached houses, suitably adapted) the children may live as members of the local community and by taking a full part in its social activities so do children living with their own parents. Many local authorities are setting up small homes of this kind. Rather larger homes, taking up to about twenty children, are also being established. It is important that homes should be so situated that the children will be able, out of school hours, to mix with their school friends. While every children’s home should have a garden, the children should be encouraged to join with others in outside play.

4. In the family group home, the age range should be wide, say from three to fifteen years, with boys and girls growing up together. It will be desirable sometimes to include children under the age of three in the group for example, where they have older brothers or sisters in the home, or on occasion to keep
children beyond the age of fifteen. The conditions of normal family life can most nearly be reproduced in this way, and the children will not require to be moved at a specified age to some other children's home and so lose contact with those whom they are fond of and trust. In homes accommodating children of a wide age range and both sexes, the special problems arising in adolescence call for sympathetic guidance and wise, unobtrusive supervision. It will not generally be right to place in a mixed family group home older children coming into care, but this may not apply where several children from the same family are received into care and should be kept together.

STAFF

5. The standard of care provided in a home will be determined by the success with which the staff are able to take the place of parents and to meet the children's individual need for interest and affection. It is essential that the conditions offered to staff should be such as to attract and keep men and women of the high quality needed for this work.

6. It is on the understanding and devotion of the staff, more than on anything else, that the happiness of the children depends. The housemother and members of staff, besides being familiar with the stages of development throughout childhood, should be temperamentally fitted for the difficult task of maintaining the balance between giving the children the affection that they need and being too possessive in their attitude towards them. The housemother in charge of a family group home should be given the fullest possible responsibility, and should not be subordinate to the person in charge of some other children's home.

7. The staffing should be sufficient to allow the housemothers time to join in the children's activities and to talk with them, and thus to provide the children with the adult companionship which is necessary to their normal development. It is undesirable for one housemother to live alone with the children; she needs adult companionship, and a housemother living alone may sometimes be subject to undue strain. In family group homes taking from eight to ten children, a resident housemother and assistant, or two housemothers, should be sufficient, with adequate domestic help. In homes taking eleven or twelve children, it will be an advantage to have in addition one full-time domestic assistant, preferably resident, and in those where the employment of a married woman as housemother, with the husband going to outside work, is a good way of securing a man's influence and interest in the household.

8. It is considered that the staff required for a home taking about twenty children of a wide age range and both sexes might be a married couple, (the husband usually going to outside work), one resident housemother, one resident housemother/cook, daily domestic assistance, and part-time help with the garden where required.

9. If a home is to be well run it is essential that the conditions should be such as to enable the staff to retain pleasure and freshness in their work. Adequate time off and holidays, giving opportunity for outside interests, and provision for seeing their own friends in the home (see also paragraph 34), contribute to the well-being of the staff and consequently of the children; at the same time there should be sufficient flexibility in the arrangements to ensure continuity of care. Where relief staff are employed, it should be arranged, whenever possible, for the same people to go to the same homes.

10. It is hoped that local authorities and voluntary organisations will release suitable members of their staff to take a full course in child care provided through the Central Training Council in Child Care, and will encourage others to attend refresher courses. A valuable feature of the refresher courses is the opportunity they afford to the staff of different homes to meet and discuss their work.

FURNISHING AND EQUIPMENT

11. The aim should be to create an environment, not luxurious but of a reasonable standard of comfort, in which both staff and children will feel at home and which will help the children to develop a proper pride in their surroundings.
Decoration and furnishing which are good in design and bright and attractive in colour will encourage the children to take an interest in their home, and to enjoy taking care of it. This applies equally to chair and bed-covers, curtains and rugs, which should be in attractive colours but easily cleaned. There should be a room for play and a quiet room for reading and other such occupations; one of these rooms may serve also as the dining room. It will do much to produce the atmosphere of a normal home if staff and children share most of the rooms in the house, though the need of the staff for some privacy should not be overlooked. If there is not room in the house for a workshop for hobbies and crafts, the possibility of converting an outhouse or garage into a workshop should be considered.

12. The bedrooms should be furnished as far as possible as they would be in an ordinary household without uniformity, and there should be opportunity for the exercise of individual taste in the arrangement of furniture, the choice of colour schemes and the display of personal possessions. Sufficient chest of drawers and wardrobes should be provided to give each child space to keep his own clothes, and there should be bedroom rugs and a chair for each child. The need for bedroom mirrors for older boys and girls should not be overlooked. At least one of the rooms used by children should be furnished as a comfortable sitting room with easy chairs. Every child should have an individual place in which to keep his personal possessions; he should be entitled to regard this as a private place which should not be disturbed by the staff without his knowledge.

RECEPTION OF CHILDREN

13. As reception centres are established (see the memorandum which accompanied Home Office Circular No. 128/1949 of 4th July, 1949), the need for initial assessment in long-stay homes will diminish. It will be necessary however, for some time to place direct in long-stay homes children whose needs have not been assessed. Children may arrive at the home still subject to the strain and bewilderment of leaving familiar people and surroundings, and some may be suffering from the effects of ill-treatment or under-nourishment. Many of the recommendations contained in the memorandum on reception centres are applicable to the reception of children direct into long-stay homes. Children who have been in a reception centre will come to the long-stay home with a known history, and will have had time to get over the first effect of separation from their homes.

14. Where a child is to be admitted to a home, whether on coming into care or subsequently, it is of the greatest importance that he should be treated considerately; the need to put the child at ease and to gain his confidence should be reflected in the arrangements for the journey, and the escort should, if possible, be known to him. The housemother should have full information about the child before he comes, so that he can be greeted by name and made to feel that he is not a stranger. This kind of friendly welcome will be all the easier if it has been possible for him to visit the home once or twice beforehand. On arrival, he should be shown round the home and, if he has a brother or sister or friend there, he should see him at once. Children should be allowed to bring with them any personal possessions to which they are attached and these should be treated with respect. Children leaving a reception centre to go to a children’s home should take with them clothes that they have become used to. Staff should not be discouraged if a newly admitted child does not respond to kindly approaches for a time, as this may be due to his distress at leaving home or to previous unhappiness or neglect.

RELIGIOUS UPBRINGING (REGULATION 4)

15. A child who has to grow up away from his own parents needs even more than any other the comfort and help of a religious faith and the inspiration to right thinking and right doing which it gives. A religious upbringing must be founded on the example of the people with whom a child lives: if they are sincere in their convictions, even though of a different denomination, the teaching
and guidance that he receives will have added significance. Their influence will be seen in the development of his personal faith and of his sense of service to others.

16. A child's understanding of religion is quickened by the attitude and example of those about him; he will learn from them to say prayers suited to his age, and become familiar with Bible stories and with the lives of people whose faith has inspired them to serve their fellows. Unless it is impracticable, every child should attend the services and the Sunday school of his own denomination so that he may take his part in its observances and activities, and be prepared to become a full member of a corporate religious body. The housemother should be ready to discuss with any child religious or other questions which he may raise, and where desirable to arrange for him to talk with a minister of religion or other adviser of his own persuasion with whom it is hoped that she will maintain friendly contact. The teaching which a child receives at his church, his Sunday school and at his day school will be strengthened in daily life by the sympathy and understanding of those around him in the home.

DAILY LIFE IN THE HOME

17. It is the practice in some homes, particularly large homes, for the staff to be known by names suggestive of institutional life, such as master or superintendent. Names like these are alien to the idea of family life, and their use by the children is to be discouraged. If a home is run in the right spirit, this will be reflected in the easy manners and the bearing of the children.

18. The aim of any routine should be to create for the children the feeling of security and well-being which is found in a happy family. Regular times for meals and for bed help to create a pattern of security in the child's mind. Within this framework there should be variety and sometimes the unexpected event or excursion. It may be unavoidable in the larger homes to announce some events of the day, such as meal times, by a gong or bell, but the children should be accustomed to telling the time by the clock, and should be expected to practise punctuality as a way of showing consideration for others.

19. Much of the children's happiness as they grow up will depend on the ease and confidence with which they mix with other young people. Mealtimes in the home provide a valuable opportunity for social training as well as an occasion on which the group comes together as a family. The staff should have meals with the children, and should expect them to talk freely. Tables should be attractively laid, with flowers on the table whenever possible. The children should become accustomed at an early age to the use of knives, forks, spoons, tumblers and cups and saucers, and should be expected to pass plates to each other and to help themselves. If meals are regarded as social occasions, it follows that ample time should be allowed for them. The older children should be encouraged to help the younger at meals, keeping in mind the need to teach the younger ones to look after themselves. It is unreasonable to expect the other children always to wait until the slowest has finished.

20. Each child should feel at bedtime that he is specially wanted and cared for. In many homes a bedtime story is told to the group; whether or not this is done, it is important that the housemother should find time to talk with each child as she says goodnight to him. In this way she will often hear the worries of the older children and will be able to give to each child the individual interest which he needs.

21. It is important that each child should have the hours of rest he requires; he should not go to bed unduly early or too late. As a general guide, the following hours of sleep are considered to be desirable:

<table>
<thead>
<tr>
<th>Age in years</th>
<th>Hours of sleep</th>
</tr>
</thead>
<tbody>
<tr>
<td>1—2</td>
<td>14—16 hours</td>
</tr>
<tr>
<td>2—4</td>
<td>13—14</td>
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<tr>
<td>5—7</td>
<td>12—13</td>
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<td>8—10</td>
<td>11—12</td>
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<td>11—13</td>
<td>10—11</td>
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<tr>
<td>14+</td>
<td>9—10</td>
</tr>
</tbody>
</table>

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22. Care should be taken to see that children are warm in bed at all seasons of the year; underblankets should always be provided. A feeling of warmth and comfort will play a part in preventing such happenings as night terrors and bed wetting.

23. Bed wetting cannot be attributed to any one cause; if effective help is to be given, the child must be studied as an individual. The trouble may be due to an organic cause, to delay in learning bladder control, or to emotional disturbance due to loneliness, a sense of being left in strange surroundings, or of not being wanted. A feeling of hopelessness about the habit may cause it to persist. A child who persistently wets the bed should be seen by the medical officer so that he can advise on treatment or, if necessary, refer the case to a hospital or child guidance clinic.

24. Understanding and consideration on the part of the staff are of the first importance. Bed wetters should not be separated from other children, and members of the staff dealing with the child or with the wet bed should proceed in a matter of fact way, and should never exhibit impatience, disgust or anxiety. Mackintosh sheets should be used only when necessary; when they have to be used, a thin blanket should be placed between the mackintosh and the bed sheet. Sheets should always be changed after being wet. Bed wetters should not be required to wash their sheets. There is nothing to be gained by restricting drinks unreasonably, but it is undesirable that any child should drink large quantities late in the evening. There should be easy and lighted access at night to a lavatory, and where necessary the children should have their own chamber pots.

**RECREATION**

25. Play is as necessary to children as food and sleep; through it they develop in mind, body and personality. Play should not be thought of only in terms of organised activities. The children should be given ample opportunity to play and amuse themselves in their own way, and should be encouraged in initiative, resource and self-reliance. They should be taught to use the facilities of the neighbourhood, for instance, the public library, and allowed a reasonable choice of their own books.

26. Indoors, the children should have a varied supply of play material, including materials for dressing up; hobbies should be encouraged, and opportunity given to look at picture books, to read newspapers and periodicals suited to their age, and to listen to the gramophone and wireless. Children should be encouraged to choose their programmes, and not have the wireless on continuously. There should be small tables at which the children may play games or pursue hobbies, and arrangements should be made, if possible, for a child to have some place where a half-finished model or other cherished piece of work can be left with safety.

27. Fresh air, sunshine and activity are essential to the health and the full physical and mental development of children. Much of their time should be spent out-of-doors. Where the garden is large enough, part of it should be set aside for the free use of the children. Sand-pits in suitable conditions and if properly looked after, provide happy occupation for small children. The keeping of pets gives children the experience of caring for living things and develops a sense of responsibility. Bicycles, besides being popular, provide training for the older children in independence and road sense. The children should be taught to look after the bicycles as well as to enjoy their use. Outings and treats should be arranged. As opportunity offers, the children should be helped in the observation of growing and living things and in the life of the countryside.

**PERSONAL HYGIENE**

28. Children need training in how to use and look after their toilet articles, which they should regard as their own property and be able to identify easily. Individual towels, face cloths, tooth brushes (with individual tooth paste or powder) and brushes and combs should be provided and clearly marked by name or initials, or, in the case of children too young to read, by symbols which they can
recognise. Towels should be hung so that they dry and are not in contact. Supervision may be necessary in the use and care of these articles, but the aim should be to train the children as quickly as possible in habits of personal cleanliness and independence. Baths, with clean water for each child, should be taken at least twice a week, just before bed, and the children should be trained to bath themselves. Bedtimes naturally vary with the ages of the children, and it should be possible to plan some bathing each night without interfering with evening activities. The children's hair should be washed regularly, and attention given to the cleanliness of their heads. Children should be trained in regular habits and encouraged to report constipation; an aperient should never be given as a matter of routine, but only where it is required in the individual case. The needs of the adolescent girl should be provided for.

DRESS AND FOOTWEAR

29. Uniformity of dress is to be avoided. The disadvantages of central purchasing should be weighed against its advantages. There should be variety, and opportunity for individual choice. Children attending school or a youth organisation should wear the kind of clothes that are required. From an early age, children should accompany the housemother when she is buying their clothes. Older children should be taught something of the prices and suitability of clothes and materials, and the girls should be encouraged to make attractive clothes for themselves. Uniformity should be avoided also in such matters as the dressing and cutting of hair.

30. Great care should be taken to provide children with correctly fitting boots and shoes. They must be of adequate length with flexible soles to allow proper use of the foot muscles, and the heels should fit comfortably. The passing of part-worn footwear from one child to another carries with it the risk of injury and possibly infection to the feet; where it is done, only well-fitting boots or shoes which are in good condition and not in any way mishapen should be passed on. It is important also to see that the feet of socks or stockings are of sufficient length after laundering as well as when new.

MONEY AND PERSONAL POSSESSIONS

31. Learning to handle money is an essential part of a child's training in everyday matters. Children should have a reasonable and known amount of pocket money. While pocket money will usually be given weekly, it may be helpful on occasion to give a larger sum for a longer period so that the experience of weighing the usual limited expenditure against the making of some special purchase may be possible. Older children should be allowed whenever possible to undertake shopping for the home, and to buy things for their own use. Younger children should be allowed to accompany the older children or housemother on shopping expeditions, and themselves be trusted to make simple purchases such as small birthday presents. Those nearing school-leaving age might be given an allowance to cover the purchase of clothes and personal necessities and so learn to take a greater pride in their own things. Unless some arrangement of this kind is made, a child may start work without knowing how to lay out money on personal needs.

HELP IN THE HOME

32. Boys and girls should be expected to take a moderate share in the daily running of the home, but not at the expense of sleep, meals, education or reasonable recreation. Young children should not be discouraged from trying to help in the house. Older children, in assisting members of staff, should progress from light routine tasks, such as dusting, bed-making and washing up, to skilled work, such as cooking, bottling, ironing and making things for the home. It is sometimes forgotten that a share in the running of the house means a share in the interesting as well as in the dull occupations. Older children could be given some responsibility for planning meals, purchasing household goods and checking the laundry, and should have opportunity of attending demonstrations or exhibitions of domestic interest in the neighbourhood.
33. The child’s link with his own family and relatives should be preserved wherever possible, and the staff of the home can help to strengthen the link by getting to know visiting parents. Visits by relatives and friends should be encouraged, and there should be no undue restriction as to times. Normally, the letters sent and received by a child should not be read by the staff of the home; exceptionally, the head of the home, after consultation with the children’s officer in the case of homes provided by a local authority, may find it necessary to supervise correspondence.

34. It is essential that children should learn to make friends outside the home and should be used to meeting other young people and to visiting ordinary homes. Both children and staff should be encouraged to invite their friends to the home; the children may thus experience the pleasure of giving as well as receiving hospitality. It is important that a child who has no parents or other relatives who visit him, or whom he visits, should be befriended individually by local people who are on friendly terms with the staff of the home. Women’s Voluntary Services, Youth Organisations, Rotary Clubs and other bodies are ready to make arrangements of this kind for children in home.

35. The summer holiday is an important event in the lives of children, and it is specially desirable that children who are being brought up in children’s homes should have an annual holiday of the kind best suited to their needs. In a family group home, there is something to be said for the group going away together for the children’s holiday, the children sharing their experiences with those who look after them in the home. Children who lead a community life in larger homes will be likely to benefit by a complete change of surroundings, such as may be found with suitable relatives or in private foster-homes where they may see something of normal family life. Members of youth organisations, such as cadets and guides should be given opportunity to go to camp or to take part in other holiday arrangements. There will be scope to arrange for older children to join others in using youth hostels. Organised camps or holiday homes, catering for large numbers, should be used with discrimination; younger children are likely to find such places exhausting. The aim should be to arrange as far as possible for each child to have the kind of holiday which, beside giving him pleasure at the time, will widen his interests and provide him with those experiences and memories which are so important in the pattern of young lives.

36. Menus should be varied and well-balanced. Contact should be maintained with the local Food Office so that ration permits may be altered as circumstances change. Breakfast should be served always within one hour of rising and should include a main dish. Mid-day dinner will often be taken at school. Where this is not done, application should be made for the additional food allowed for five main meals a week based on “school meals” rations, and dinner should generally consist of meat or fish and two vegetables (green leafy vegetables being served about three times a week) followed by a suitable pudding. The children should have a light tea (including, whenever possible, meat, fish, cheese or egg) and a light supper; alternatively, if preferred for the older children, a light tea and a substantial supper should be provided. Children should be encouraged to drink sufficient water, which should be readily available between meals and at meals.

37. Protein should be given twice daily, and can with advantage be included in all three main meals. Adequate quantities of salads and fresh fruit should be given. Milk should be tuberculin tested or pasteurised, and each child should have not less than a pint a day, including school milk. Children under five should have the special allowance of cod liver oil and orange juice available for them. Regulation 3 and the Schedule, item 5, require records to be kept of the food provided. The records should be examined from time to time by persons visiting the home on behalf of the local authority or voluntary organisation.
The Ministry of Health have published a booklet, "Feeding the One to Fives," obtainable from H.M. Stationery Office (Sales Offices), price 6d. (post free, 7½d.), or from any bookseller.

**MEDICAL ARRANGEMENTS**

39. Regulation 5 requires the appointment of a medical officer for each local authority and voluntary home. His duties include regular attendance at the home and, as far as practicable, the periodic routine examination of the children, the provision of suitable medical attention as required, the supervision of medical records, and general supervision of the health of the children and hygiene of the premises. He should take an interest in the progress of the children and in their general welfare. It is, therefore, desirable that he should visit frequently, and get to know the children and the staff. Regular visits will enable the staff to keep him informed of matters which are not of sufficient consequence to justify a special call. The fullest possible information as to the previous medical history of each child and his family should be available to the medical officer. It is particularly important that this should include details of any immunisations. Regulation 6 requires arrangements to be made for dental care of the children.

40. Sick children can be provided with treatment under the National Health Service, but payment will have to be made for the general supervision and the routine examinations which are outside its scope. Although it is desirable that one doctor should undertake all the duties of medical officer, a local authority may have to make special arrangements for their homes by employing their own medical staff.

41. The advice of their Medical Officer of Health could be sought with advantage on all medical matters affecting homes provided by a local authority, including the appointment of the medical officer for the home, matters concerned with the health of the staff, precautions against the spread of infectious disease, and, where appropriate, the medical aspects of the planning of accommodation. Voluntary organisations may also find it an advantage to seek the advice of the appropriate Medical Officer of Health on such matters. It is desirable for the local Medical Officer of Health to be informed of the outbreak of any non-notifiable disease, such as gastro-enteritis, in any children’s home.

42. It is recommended that the frequency of medical examinations, of dental inspections, and of other routine arrangements should be as follows:

(a) **Medical examination**—
   - On admission.
   - At least monthly for children aged 0—1 year.
   - At least quarterly for children aged 1—5 years.
   - At least yearly for children over the age of 5.
   - On discharge.

(b) **Weight (in a single garment)**—
   - On admission.
   - Weekly—for children aged 0—6 months.
   - Monthly—for children aged 6 months to 2 years.
   - Quarterly—for children aged 2 years and over.
   - On discharge.

(c) **Height (for children aged 2 years and over)**—
   - On admission.
   - Quarterly.

(d) **Dental inspection**—
   - This is very desirable for children over the age of 2 and, if possible, should be arranged shortly after admission and at intervals of not more than six months.
(e) Medical records—

Individual records should be kept showing condition on admission, 
and progress, and should include a record of sickness. Dates of 
immunisations should be noted. Condition on discharge should be 
recorded.

Suitable medical record cards for children aged five and over, and similar 
cards for children under the age of five, can be obtained from H.M. Stationery Office 
(Sales Offices), price 15s. 2d. per hundred for the cards, and 10s. 2d. per 
hundred for the continuation cards including purchase tax in each case. The 
cards should be ordered under the references "Home Office RHM" for children 
aged five and over, and "Home Office RN M" for children under five, and the 
continuation cards under references "Home Office RHM (C)" for children 
five and over, and "Home Office RN M (C)" for children under five. The cost 
of the carriage is 1s. 2d. per hundred for the cards and 10d. per hundred for the 
continuation cards. (See Home Office circular 18/51 of 23rd January, 1951.)

43. Children attending local education authority schools will be examined by 
the school medical service at intervals. A member of the staff of the home should 
endeavour to be present, and should tell the doctor anything of note about the 
child just as a parent would.

44. While a good standard of cleanliness should be maintained in the home, 
this need not be carried so far as to produce an institutional atmosphere. 
Personal cleanliness among those employed in the kitchen is essential, and kitchen 
waist should always be stored in covered bins pending removal. The larder 
window should be efficiently fly-proofed, but should allow adequate ventilation.

45. When numbers of children live together there is a risk of epidemics and 
precautions must be taken to prevent the spread of infection. One of the most 
important methods (too often neglected) of preventing epidemics is the early 
diagnosis and isolation of the first case. The sick room, which should be a 
bright room and within call of a member of staff, should be ready for immediate 
use. In homes for fewer than about twelve children, arrangements should be 
made to enable a suitable room to be brought into use as a sick room at any 
time. If a sick child has to be kept apart from the others he should be provided 
with toys or books or suitable interests, and will need extra attention and 
mothering. If a child has to be admitted to hospital, the staff of the home 
should keep in frequent touch with him both by letters and visits, and there 
should be no delay in taking him back when he is ready for discharge.

46. In view of the close contact between staff and children, it is desirable to 
safeguard the well-being of the children by ensuring, as far as is possible, that 
the staff are free from any disorder likely to harm the children. A medical 
examination, including an X-ray of the chest, before appointment, and an X-ray 
of the chest subsequently at yearly intervals, is advisable, and local authorities 
and voluntary organisations are recommended to consider what measures should 
be taken to this end, and to consult the Regional Hospital Board as to ways and 
means of arranging for X-ray examinations.

SAFETY PRECAUTIONS (REGULATIONS 8 AND 9)

47. The advice of the Chief Officer of the Fire Brigade should always be 
obtained on fire precautions and on fire drills. The subject is dealt with in full 
in Appendix II. Open coal, electric or gas fires should be provided with fixed 
fireguards, and in rooms used by young children, radiators and hot pipes should 
be suitably guarded. Medicines and disinfectants should be kept in locked 
cupboards to which children cannot get access. Where windows, verandahs or 
staircases are potentially dangerous, or where there are main roads, ponds, rivers, 
etc., in the vicinity, the risks should be assessed, and suitable safety measures 
taken.
DISCIPLINE

48. Some form of discipline is necessary in every community, if the general well-being is to be maintained. Most children are difficult at times, and those coming into care may be specially difficult at first. Many will be disturbed by removal from their homes, and some will never have had a chance of learning to consider the interests of others. Measures taken to preserve discipline should not be such as would be likely to undermine the self-respect of children or to lessen their sense of responsibility for their actions. In general, the consideration and courtesy shown by members of the staff to each other and to the children will provide the example which is likely to influence in the right way all members of the group.

49. The difference in the relationship existing between staff and children and between parents and their own children calls for a careful approach to discipline in a children’s home. Children who have lacked a teaching previously and who have become possessive and jealous about persons or things will need considerate treatment; it would be useless, and often harmful, to punish for this kind of behaviour. Where, on the other hand, correction is needed, it should aim at helping the child towards self-discipline and a developing sense of responsibility towards the people with whom he lives. It is by patience and interest, and the understanding of each child’s problems and needs that the staff will win respect and loyalty from the children.

50. Appendix III deals with the subject of discipline and the effect of the relevant Regulation.

EDUCATION AND THE HOME

51. Local authorities and voluntary organisations should do all that interested parents would do to enable a child to obtain and take advantage of opportunities of education and training suited to his ability. In the children’s interests, the staff of the home should keep in close touch with the school and watch each child’s progress there. The children should be given every facility to enable them to take part in handwork, sewing and cookery classes, and, if they wish, to buy the things they have made. They should be free to join in out-of-school activities. Children should always have a quiet place at home where they can do their homework undisturbed.

52. Training in health and hygiene is one of the responsibilities of the housemother, and in this she will be helped by the teaching given in most schools. Children are interested in their physical development, and want factual information about it as they grow up. The housemother should be ready to answer questions in a way appropriate to the age and intelligence of the child.

53. The staff of the homes should take advantage of the opportunities offered by many schools through parent-teacher associations and open days to acquaint themselves with the life of the school. Children’s enjoyment of prize-giving, sports day and school functions may be greatly increased by having present someone belonging to them.

CHOICE OF EMPLOYMENT

54. When children are ready to leave school and go out to work advantage should be taken of the facilities provided by the Youth Employment Service for advising them on their choice of a suitable occupation and helping them to find satisfactory employment. Children usually come into contact with the Service through the schools they are attending. Youth Employment Officers visit schools and give preparatory talks on the choice of employment to groups of boys and girls in their last year at school, and at a later stage arrangements are
made for school leavers to be interviewed by a Youth Employment Officer and to receive personal advice about the type of work best suited to their individual capacities. It is important that children in homes should attend for interview, and that a member of the staff of the home who knows the child’s aptitudes and particular interests should be present. The placing facilities of the Youth Employment Service are available not only to young people on leaving school but at any time up to the age of eighteen. The Service has also certain responsibilities for keeping in touch with the boy or girl after he has been found work and until he reaches the age of eighteen. The objects of this procedure (called “review of progress”) are to ensure as far as possible that the placement has been satisfactory, and to provide young workers with opportunities for discussing their progress and their problems with a Youth Employment Officer and for receiving such further vocational advice and assistance as may be necessary. The Youth Employment Service administers a scheme of training and maintenance grants under which young workers with special aptitude for a particular skilled industrial occupation (for which training facilities are not available within daily travelling distance of their homes) can receive financial assistance to enable them to take up training in that occupation with employers in other areas. Youth Employment Officers welcome the co-operation of those concerned with the care of the children. Those responsible for homes in which education is provided within the premises should ensure that full use is made of the facilities provided by the Youth Employment Service.

PROVISION FOR CHILDREN ON LEAVING CHILDREN’S HOMES

55. It is recognised that the transition to life outside cannot always be easy for those who have been brought up in a children’s home. It is accordingly important that the older children should be prepared for this and should be given every opportunity to become self-reliant. For example, it will be helpful if they can have for a time before they leave a room of their own to accustom them to the conditions of increasing independence. It will usually be desirable for children to leave the home on reaching school-leaving age, or soon afterwards, although there can be no hard and fast rule and it may be right in exceptional cases for children to remain in the home beyond that age. The retention of girls in homes to do domestic work is deprecated. While children should leave the home well-equipped, they should retain some familiar articles of clothing as well as taking with them their personal possessions.

56. Section 19 of the Children Act, 1948, empowers local authorities, with the consent of the Secretary of State, to provide hostels for young people who are or have been in care and have reached school-leaving age. Where hostels are provided, local authorities should make use of their power to accommodate in them young people who have not been in the care of a local authority, and thus to enable those who are, or have been, in care to meet and live with others from ordinary homes.

AFTER-CARE

57. Where a child has left the care of a local authority or voluntary organisation since reaching school-leaving age, the local authority in whose area he is living, unless satisfied that the welfare of the child does not require it, have a duty to advise and befriended him until he reaches the age of eighteen. This task will normally be undertaken by the children’s officer and staff, but the local authority, if satisfied in the case of a child who has left the care of a voluntary organisation that the organisation have the necessary facilities, may arrange for the voluntary organisation to undertake his after-care. The housemother or housefather should have a close link with the child, and co-operation between them and those responsible for after-care will often be of value.
58. It is hardly practicable to confine consideration of this subject to the
records which should be maintained in respect of children who are in children's
homes. For this reason, what follows is related to the maintenance of records
in respect of all children in the care of local authorities and voluntary
organisations.

59. It is essential that a comprehensive record should be kept of every child
in care. These records will provide the material on which informed decisions
about a child's future can be taken, and will form a continuing account of a
child's progress including his progress at school. They will serve also as a
means of checking whether action that should be taken has been taken, for
example, whether a child should be restored to his parents, whether a child
should be boarded out, and whether, if he is boarded out, the requisite visits
have been paid to the child in his foster home. The building up of reliable
records is not easy, and the staff should be given a full allowance of time for
this work, which will be of value not only in relation to the individual child
but also in the wider field of improving the knowledge of the treatment of
children in care.

60. There should be a personal case history for every child in care. This
might consist of a folder containing:

(a) The basic record of all relevant information about the child and his
family, including reports completed at the reception centre;
(b) history sheets with a continuing record of matters of consequence in
the child's life, including relevant information about his health;
(c) copies of all reports, including school reports, court orders or corre-
spondence concerning the child; and
(d) certificates, including birth certificate, photographs and other papers
which the child may like to have later.

61. It will be wise to keep the entries in the history sheets factual and as
simple as possible. Opinions about a child change and may vary from worker
to worker; over-elaboration should be avoided, as records can quickly become
the master and not the servant of those who use them.

62. It may not always be easy for the local authority or voluntary organisation
to decide to whom the full records of the children should be made available.
In the case of a local authority, it is to be expected that they will be seen by the
children's officer, and the boarding out or other field staff concerned with the
child's supervision. It is considered that the person in charge of a children's
home should ordinarily have full information about the children. When a
child is boarded out, sufficient information (including information about his
health) should be given to the foster parent. In general, it is to be expected
that it will be to the child's advantage if those immediately responsible for his
care are informed about his background.

63. When a child is placed in a children's home, it will be for the responsible
officers of the local authority or of the voluntary organisation to decide in what
form information is to be given to the person in charge of the home. It is
suggested that a copy of the basic record, a summary of relevant information
contained in the history sheets, and copies of reports of interest should usually
be given.

64. A central register of children in care is no doubt maintained by all local
authorities and large voluntary organisations, and this would serve as an index
to the personal case history folders. The records to be maintained by children's
homes may be summarised as follows:

(a) record of children admitted to the home, showing name, date of birth,
religious persuasion, dates of admission and of leaving, and a record
of absences;
(b) daily register of children in the home;
(c) personal case history for each child in the home, with a continuing record of matters of consequence in the child’s life;
(d) log book of events of importance in the life of the home;
(e) records of the food provided;
(f) record of weight and height (see paragraph 42 above);
(g) punishment book.

It is intended that the log book mentioned at (d) above should contain not a list of occurrences of everyday interest, but a record of events of importance such as affect materially the running of the home, that is, matters of which an official visitor to the home should take account. (See Regulation 3 (2) and the Schedule as to the records required to be kept.)

CONCLUSION

65. The success of family life within a children’s home will be seen in the degree to which a child who has been brought up there feels himself to be an individual with rights and responsibilities, equipped to take his place in the world. Every aspect of life within the home should contribute to this end, since the aim of all that is done is to produce stable, happy and self-reliant citizens.

HOME OFFICE.
July, 1951.

APPENDIX I

(See paragraph 1 of the memorandum)

RECOMMENDATIONS RELATING SPECIFICALLY TO LARGE HOMES

1. This appendix contains recommendations relating specifically to large homes, and particularly to those which are organised neither as grouped cottage homes nor as boarding schools. The appendix is to be read in conjunction with the memorandum which, though written in the main with direct reference to children in care for an indefinite period who are being brought up in family groups, applies for the most part to all long-stay children’s homes and, with necessary modifications, to short-stay homes.

2. The size of some homes, and the nature of their premises and organisation, are such as to make them in greater or lesser degree institutional in character and thus particularly unsuitable for young children. It is of the first importance that all possible steps should be taken to lessen the disadvantages of the large home.

3. Where the children do not go out to school, the home should be run as far as possible as a boarding-school with arrangements for the children to spend the school holidays with parents, relatives or foster-parents. It will be all to the good if some of those attending such a school are children living in their own homes. In other cases, the home might be organised, after suitable adaptation of the premises, in family groups, each under the charge of a house-mother, so that the conditions of a family group home are reproduced as nearly as possible. Where the nature of the premises makes this impracticable, it may be possible to adopt a house system. Whatever the method of organisation, the aim should be to secure that certain members of the staff have continuing responsibility for the care of certain children, so that constant change is avoided.

4. A defect of some large homes is that there is insufficient recognition of a child’s need of occasional privacy, and that the children may never know what it is to be alone. Some small rooms, comfortably furnished and provided with small tables for study and quiet occupation, should always be available. There will be need for rooms with equipment for games and physical exercise, and for play in bad weather.
5. Reference is made in paragraph 17 of the memorandum to the undesirability of the children’s using names suggestive of institutional life, such as master or superintendent, which are alien to the idea of family life.

6. The serving of all meals for the whole home in a central dining room is not conducive to a family atmosphere or to social training, and should be avoided where possible. As far as practicable, the staff should take their meals with the children who should usually be kept within their own family or house group of two, with their own housemother or housefather. Wherever possible, the housemother should give her children at least one meal a day (perhaps tea) in a room set aside for the use of the group.

APPENDIX II

(See paragraph 47 of the memorandum)

ON FIRE PRECAUTIONS

1. All children’s homes must have adequate fire precautions and means of escape, but the measures to be adopted will vary widely with the age and number of the children and the type of building; the extensive precautions necessary in a large nursery, for example, will have no place in a family group home. The aim should be to provide for the safety of the children without adopting measures which are over elaborate or which might tend to differentiate the home too much from neighbouring premises.

2. The Chief Officer of the Fire Brigade should be asked to arrange for visits to all children’s homes, and to advise on the suitability of the measures already adopted; he should be consulted also at the planning stage when premises are to be adapted to provide a home or when a new home is to be built. He should be asked to advise on fire drills, and, if there is no standing on fire drills, and, if there is no standing on fire drills, and, if there is no standing on fire drills, if there is no standing on fire drills, if there is no standing on fire drills, then the manufacturers for maintenance, to inspect patent fire extinguishers and other apparatus which may deteriorate.

3. Although the necessary fire precautions will vary widely, some features are common to most homes. The provision of adequate alternative means of escape, a simple but efficient warning system, and a method of rapid communication with the fire brigade are essential; fire drills should be held at frequent but irregular intervals to accustom the children to a routine that they may have to carry out in emergency. A good time for surprise drills is shortly before normal waking time. The need to hold fire drills more frequently in short-stay homes than in long-stay homes should be borne in mind.

4. While fire precautions and means of escape must be adequate, care should be taken to see that as far as possible they do not interfere with the running of the home or mar the internal or external appearance. This is particularly important with family group homes which, for example, will often be given an institutional appearance by an external steel fire escape; where an external escape must be provided, it should be sited, if possible, at the side or rear of the house. Similarly, internal escape ladders should be sited so that they do not restrict unduly the use of the rooms or spoil the appearance of living rooms. Escape hatches should be placed so as to interfere as little as possible with the normal life of the home.

5. Means of escape such as patent lowering lines, transportable ladders, chutes and similar equipment have various disadvantages and cannot usually be recommended with any degree of confidence for use in children’s homes.
APPENDIX III

(See paragraphs 48 to 50 of the memorandum)

ON DISCIPLINE

1. Reasonable compliance with a code of conduct devised in the interests of the group is necessary, and this can be secured as children become socially adjusted. There may be special difficulty in the case of adolescent children who come into care and who have not learned to live as members of a group. Children can be helped most effectively by staff who understand their needs and can exercise imagination in their relations with them; an important factor is that children should be confident of, and secure in, the immediate and continuing interest of the staff.

2. Speaking broadly, happy children are good children. All children are naughty sometimes; their growing sense of personality leads them to trials of strength with authority and with each other. But if a child misbehaves persistently, there is need to discover what is wrong. Misbehaviour may be only naughtiness which can be dealt with by simple corrective measures, or it may be irrational conduct due to some underlying emotional disturbance, or a mixture of both. In the second case, punishment is not likely to eradicate it; those in charge of the child should direct their efforts to seeing that his difficulties are resolved. A child may, for instance, behave aggressively, sometimes because of an emotional disturbance such as jealousy, or a sense of inferiority, sometimes because he has found that it pays in getting his own way. In the one case, the feeling of jealousy or inferiority must be cleared away; in the other, the child has to be educated to control his desires and harmonise them with the interests of other individuals and of the group.

3. When correction is needed it should aim (as is suggested in paragraph 49 of the memorandum), at helping a child to develop self-discipline and a sense of responsibility towards the people with whom he lives. It should follow the fault as quickly as possible and, once over, the matter should not be brought up again. The aim should be to correct the child in such a way as to bring home to him the effect of his action on the group. Measures which are purely punitive in intention and effect make no contribution to a child’s education.

4. As long as correction does not take a form which is likely to damage a child’s self-respect, it is usually to his advantage to feel that he has paid for his fault and that the account is closed. Some deprivation of treats or of special kinds of food (for example, ices or a portion of his sweets) may be justified on occasion. At the same time, the privileges and treats which children enjoy should be regarded as a normal part of the life of the home and not as things which are given or withdrawn by way of reward or correction. The withholding of normal meals is open to objection, as is the practice of keeping a child in bed during the day. Regular meal times and bed times help to convey a sense of security, and interference with them as a punishment should be avoided. An early bedtime may be the right course to take with a child who has become irritable through tiredness.

5. It may be right sometimes to make a child help someone whom he has hindered by bad behaviour (taking care that help in the home is not degraded to the level of a punishment), or to give up some part of his pocket money towards the cost of making good something that he has spoilt wilfully or through disobedience or wanton carelessness. It is important that children should not be left with a sense of resentment. For this reason, mass punishment for the offences of individuals cannot be justified.

6. The effect of Regulation 11 is to prohibit corporal punishment of any kind, except:

(a) smacking the hands of boys and girls under the age of ten; and
(b) caning (applied by the person in charge of the home), in the manner and to the extent permitted by the Regulation, boys who have reached the age of ten but not school-leaving age.
7. The provision for corporal punishment as referred to in the preceding paragraph has been included in the Regulations for use as a last resort. While it might seem natural to smack the hand of a small child in need of correction, to practise this indiscriminately would be to risk aggravating the condition of some children, who are troublesome because they are emotionally disturbed as a result of past experience. Although provision for corporal punishment has been made in the Regulations, it is open to any local authority or voluntary organisation to instruct their staffs that it is not to be used.

8. The Regulations do not attempt to prohibit specified punishments (other than corporal punishment of a kind not provided for in Regulation 11), because there would be inevitable omissions from any list of objectionable punishments. For example, no person with understanding of children could think a punishment suitable which had the effect of frightening a child, of isolating him from his fellows, or of leaving him unoccupied for long periods. Children should never be shut in dark places, or "sent to Coventry," or made to wear distinctive dress or left for long in an empty room. If it is necessary to remove a child from companions because he is hysterical or for some other good reason, one of the staff should be with him or within reach so that he cannot feel himself deserted. The setting aside of a quiet room may in itself provide a refuge for a child who needs to be alone.

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