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HISTORICAL INSTITUTIONAL ABUSE INQUIRY

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being heard before:

SIR ANTHONY HART (Chairman)

MR DAVID LANE

MS GERALDINE DOHERTY

held at

Banbridge Court House

Banbridge

on Wednesday, 10th June 2015

commencing at 10.00 am

(Day 124)

MS CHRISTINE SMITH, QC and MR JOSEPH AIKEN appeared as Counsel to the Inquiry.

1 Wednesday, 10th June 2015
2 (10.00 am)
3 WITNESS FJ 33
4 CHAIRMAN: Good morning, ladies and gentlemen. Can I just
5 remind everyone that mobile phones should be turned off
6 or at the very least placed on "Silent"/"Vibrate", and
7 that no photography or indeed recording is permitted
8 either in the Inquiry chamber or anywhere on the Inquiry
9 premises.
10 Yes, Ms Smith?
11 Questions from COUNSEL TO THE INQUIRY
12 MS SMITH: Good morning, Chairman, Panel Members, ladies and
13 gentlemen. Our first witness today is FJ 33 FJ 33
14 previously given evidence in Module 2 on 8th December
15 2014. So there is no need for him to be sworn again.
16 He has given statements relevant to this module,
17 which can be found at FJH043 to 052 and FJH311 to 313.
18 Now if we can call up the first of those statements,
19 please, at 043.
20 CHAIRMAN: Yes. Just before we do that, I take FJ 33
21 wishes to maintain his anonymity?
22 **A. Yes, please.**
23 CHAIRMAN: Thank you.
24 MS SMITH: FJ 33 the first statement, it has not been
25 redacted and obviously that will be done before it is

1 put on the website to protect your identity, given that
2 you do wish to maintain your anonymity, but this is the
3 first statement you provided for this module of the
4 Inquiry, and your qualifications and experience are set
5 out there in paragraph 1 of that statement.
6 Essentially your involvement with Fort James came
7 when you were
8 and you were there from 1984 to 1990.
9 A. **That's correct, yes.**
10 Q. In paragraph 2, if we can scroll down to that, please,
11 you describe taking up the post in May 1984 and you say
12 the home was adapted --
13 "It was an adapted three-storey building originally
14 constructed as a private residence and located three
15 miles from Derry city centre and set within spacious
16 grounds with mature trees and shrubbery, connected to
17 the entrance by a driveway, a 2-metre high wall
18 surrounding the property, and it was situated between
19 two housing estates, Tullyally and Currynierin, about
20 a quarter of a mile from the main Derry-Belfast road."
21 One of the things, as I was discussing with you
22 earlier, FJ 33 is that from departmental inspections
23 there was a comment made that the actual structure of
24 the building itself made it difficult to supervise
25 children within the home.

1 Would you accept that that was the position?
2 A. **Well, there were difficulties from time to time because**
3 **it's a rambling house, you know, so -- but there were**
4 **times in the home when it wasn't an issue, you know,**
5 **when the residents were settled, but when you got some**
6 **individuals that you had to observe, it could cause**
7 **difficulties.**
8 **The grounds are quite spacious as well, but they**
9 **were useful for children to play around in. At the same**
10 **time they would be out of view I suppose occasionally,**
11 **but striking a balance between allowing children freedom**
12 **and play time and providing strict supervision was**
13 **always an issue, you know.**
14 Q. Well, one of the things that you said was also -- one of
15 the things they said was that at different times it
16 would have been difficult to segregate the genders, for
17 example, on separate floors, because of the numbers
18 imbalance between genders, and that would have been
19 a problem also I presume?
20 A. **Yes. Just the shared rooms, you would have to get the**
21 **balance right, you know, but we had a number of family**
22 **groups of two or three children from the one family. So**
23 **it tended to work out okay, you know. If you had those**
24 **children on a long-term basis, they were fairly settled,**
25 **you know.**

1 Q. One of the issues that you highlight here is the
2 location of the home. When we were talking earlier, you
3 said that that was a major issue at times.
4 A. **Yes. The home was located between two working class**
5 **estates. As I said, one is predominantly**
6 **Protestant/Loyalist and the other one was**
7 **Catholic/Nationalist. At that time there was a lot of**
8 **community unrest. In both estates there were a lot of**
9 **young people around the same age group as our young**
10 **people. So there could be tensions and friction from**
11 **time to time.**
12 **Sometimes our young people would become friends with**
13 **people from their opposite religion, if you like, and**
14 **got to know each other and shared a lot of information,**
15 **but when relationships broke down, then this information**
16 **was used to -- in a negative sense. So you'd -- you had**
17 **a lot of tensions from that point of view.**
18 Q. In paragraph 3 of your statement here, FJ 33 you set out
19 to your knowledge the timeline of Fort James. I was
20 asking you that was obviously compiled from information
21 that you received from some other people as well?
22 A. **That's correct, yes.**
23 Q. One of the inaccuracies in it is when FJ5 was
, he actually started in 1980 rather than 1981, as
25 you record, but he was there before your time.

1 I just wanted to come on to ask a little bit
2 about -- before -- sorry. Before I move on to that
3 I just wanted to ask about your appointment and how that
4 came about and how you actually were appointed. If
5 could you give us a little bit of details about that,
6 please.
7 A. **Okay. I had previously been in Rubane and I decided**
8 **some six months earlier that I was leaving Rubane and**
9 **I was looking for employment. So I was watching**
10 **advertisements, and I saw one for Fort James advertised**
11 **in the local press or in the main press I suppose, and**
12 **applied for the post and completed the application form**
13 **and was called for interview and was successful at the**
14 **interview.**
15 Q. You think there was a panel of at least three people who
16 interviewed you?
17 A. **There were at least three people, yes.**
18 Q. And Tom Haverty would have been on that panel?
19 A. **He was, yes.**
20 Q. Once you were appointed, was there any training in
21 advance of your taking up the post?
22 A. **Yes. The first four or five weeks of my appointment was**
23 **purely to do with induction. So I spent a lot of time**
24 **with** TL 4 **just going through various policies**
25 **and procedures. He had set up a range of places for me**

1 **to visit and people to meet to find out about the Trust**
2 **and about my role within that.**
3 Q. When we were talking earlier, you said you would have
4 met with various team leaders and field work staff and
5 you would have visited Harberton House at that time.
6 A. **That's correct, yes.**
7 Q. Did you actually have a meeting with the staff of Fort
8 James itself before you

10 A. **I didn't, no. I think I had maybe -- well, probably**
11 **just the day before I arrived or the day I arrived maybe**
12 **I just met them for the first time, you know.**
13 Q. When we spoke the last time, you said you had never
14 worked in the statutory sector before, and you were
15 somewhat surprised and shocked by the level of
16 bureaucracy that was attendant upon the job that you had
17 received?
18 A. **Yes. It was a big change from what I'd been used to,**
19 **you know. In the voluntary sector you had much more**
20 **freedom to do things, you know, whereas in the statutory**
21 **sector everything is legislated for and there was**
22 **policies and procedures, and sometimes they can get in**
23 **the way of spontaneity in the way you work.**
24 Q. It was somewhat frustrating I'm sure at times?
25 A. **It could be, yes, yes.**

1 Q. FJ5, he had been -- there
2 had been -- you are aware now obviously of the
3 allegations that were made about him.
4 **A. Uh-huh.**
5 Q. When you took up your post, what was your level of
6 knowledge about what was happening in relation to him?
7 **A. I just knew that there had been allegations made and**
8 **I didn't know the detail of those. I knew he had -- he**
9 **had left Fort James before these had happened, and there**
10 **was an ongoing -- I think the investigation had been**
11 **complete by the time I arrived there. So it was**
12 **a series of court appearances for the next year, year**
13 **and a half.**
14 Q. Now you took up your post in May 1984 and the matters
15 had come to light the preceding October.
16 **A. Uh-huh.**
17 Q. There were, as the Inquiry has seen, documents about
18 a review that was carried out about the matter and staff
19 were interviewed, the staff in Fort James, about their
20 knowledge and so forth at the time.
21 You said when you came -- I was asking whether there
22 was any discussion between about the
23 matter.
24 **A. Uh-huh.**
25 Q. You said that you felt that the staff felt that they had

1 been grilled about what had happened at the time and
2 felt a degree of guilt that they might have missed
3 something?
4 A. **Yes. I think they did feel that they had been through**
5 **the mill, you know, in the sense of dealing with the**
6 **issues, you know, and I suppose just being questioned**
7 **about what went on there, and maybe felt guilty because**
8 **they hadn't noticed anything, you know.**
9 Q. In fact, they -- you felt particularly the person
10 affected most might have been FJ 7 , who was
11 acting up before you came into post?
12 A. **Yes, yes.**
13 Q. We will hear from FJ 7 in due course, but you
14 were certainly not aware of any of the details
15 surrounding the allegations?
16 A. **No, no.**
17 Q. You say that other staff weren't aware of the detail of
18 what is being alleged either. Is that correct?
19 A. **They didn't know the detail. They just knew generally**
20 **there was a sexual allegation made against FJ5.**
21 Q. Do you -- when we were talking, you thought it was
22 surprising that they weren't told about the details of
23 the allegation. I was asking why you thought that was.
24 A. **Well, I thought they might have known more about it, but**
25 **I think I understand, having thought about it, you know,**

1 **for legal reasons they wouldn't have been told, you**
2 **know, but I thought they might have known some more**
3 **detail about it. I actually didn't find out about it**
4 **myself until just a few weeks ago. I actually saw the**
5 **statement for the first time.**
6 Q. You say that the staff were left wondering whether this
7 had happened or not effectively.
8 **A. Yes. The staff -- the impression I got when I arrived,**
9 **you know, that FJ5 had made a big impression on the**
10 **place, you know, that he was very professional in his**
11 **approach. I think he was the first professional --**
12 **professionally qualified staff member there, and I think**
13 **the staff looked up to him, you know.**
14 **So from that point of view I suppose they found it**
15 **difficult to know what to believe, and then when the**
16 **case collapsed, you know, there were -- it still hadn't**
17 **been resolved one way or another. So I think there was**
18 **mixed loyalties about what to believe, you know.**
19 Q. Certainly there was no feedback from the interviews that
20 the staff had had with the management to inform them of
21 any views of management about the matter that you're
22 aware of?
23 **A. Not aware of, no. It may have happened before**
24 **I~arrived, you know, but ...**
25 Q. But presumably when you arrived and this was the sense

1 that you were getting from the staff, that they weren't
2 aware of -- I suppose I'm not particularly putting this
3 very clearly, FJ 33 but there was no closure, as it were,
4 for the staff within the home about what had happened or
5 what they should have done or what -- what might be
6 learned from the circumstances. Would that be a fair
7 comment?
8 **A. Well, I think there was a general -- I mean, there was**
9 **a lot of other stuff going on, you know, in Kincora, all**
10 **the other inquiries that happened, you know. So there**
11 **was a lot of publicity and a lot of guidance in terms of**
12 **procedures about dealing with sexual issues, you know.**
13 **So I think staff were more aware of that and there**
14 **was -- staff were encouraged to be careful and to be**
15 **prudent in the way they worked with young people.**
16 Q. You said that they certainly never said anything
17 negative to you about him that you got the impression --
18 **A. No, I never heard any negative statement about him.**
19 Q. You put it to me that you felt
20
21 **A. Well, that was the impression I had when I arrived, yes.**
22 Q. I was asking you about how he had contributed or how you
23 learned that he had contributed to work within the home
24 and you say the staff towards working
25 more with the children and young people as individuals.

1 **A. Uh-huh.**
2 Q. addressed concerns that they had, seeing
3 that they were working very long hours, and the overtime
4 system was then recorded by him so that it could be
5 brought to the notice of the Board just how -- the kind
6 of hours th people were putting in in the home.
7 **A. That's correct, yes.**
8 Q. I think you used the words became their
9 champion -- or maybe those were my words -- as a result
10 of that?
11 **A. Yes. Well, they were beginning to see the importance of**
12 **doing that in terms of making the point that there was a**
13 **need for more staff, you know, and that they were**
14 **entitled to, you know, decent working hours, you know,**
15 **for their own sake to refresh themselves, you know, when**
16 **they came back on duty again.**
17 Q. We have heard worked very long hours, 24
18 hour days and things, and that someone has recorded that
19 he, in fact, fainted in the course of his work, because
20 he was working such long hours.
21 When you arrived, had conditions improved for staff?
22 **A. I'm not sure. There may have been more staff.**
23
24

. We

1 **covered the night shift. There was always a senior**
2 **member of staff on duty. So possibly there were more**
3 **people to cover the rota than there had been.**
4 **Later on in my statement there was**
5 **person appointed. So it made it more manageable, you**
6 **know, but I can imagine if you had lesser people**
7 **covering the night shift -- you know, it's a long shift**
8 **from I think it was 2 o'clock in the afternoon until**
9 **3 o'clock the next day. It's quite exhausting, and if**
10 **and somebody went sick, you**
11 **could possibly be landed with another shift to cover.**
12 Q. When you arrived, was there still waking night duty in
13 place in the home?
14 **A. No, there was sleeping in.**
15 Q. Just sleeping in duty?
16 **A. Sleeping in. There was two people slept in, one senior**
17 **and one houseparent.**
18 Q. Just one further matter about the FJ5 issue. Was there
19 ever anything said to you by any of the children or were
20 you aware of them discussing the matter at all?
21 **A. No, I never heard any comment from any of the children**
22 **in relation to him.**
23 Q. Going back to your statement here that's on the screen,
24 paragraph 4 I think we have dealt with. You describe
25 the home as it was in 1984.

1 Paragraph 5, you talked about the use of the home.
2 If I can just pause there, you say that:
3 "It was described as a long-stay unit in theory, but
4 in practice it actually had to accommodate all types of
5 admissions when there were emergencies or when other
6 options were not available to social workers."
7 You say:
8 " did not have the right to
9 refuse admissions and that was decided by his
10 line manager", who in your case was TL 4 , "who had
11 responsibility for oversight of all the Board's
12 children's homes.
13 Planned admissions to the home normally took place
14 after the young person had been assessed at Harberton
15 House and found to be in need of medium to long-stay
16 care."
17 Harberton you describe as:
18 "The first residential assessment unit in the
19 Western Board area. Prior to that emergencies would be
20 admitted directly to the children's home, following
21 consultation between the responsible field social worker
22 and their senior. Planned admissions would take place
23 after discussion at a case conference, taking into
24 account reports and assessments by various agencies and
25 social workers."

1 Now that was what was supposed to happen, FJ 33
2 **A. Uh-huh.**
3 Q. -- but the reality was far from that.
4 **A. It was, yes. At the end of the day, you know, the Trust**
5 **or the Board was responsible for accommodating young**
6 **people. That was kind of what we were told. If there**
7 **wasn't a place elsewhere, you know, even though we**
8 **weren't geared up for a short stay, we still had to take**
9 **emergencies, you know. They had to be accommodated.**
10 Q. Did that present problems for you
11 and the children that you had?
12 **A. It did, yes, because you could not -- you know, it came**
13 **to light for myself. I was doing a course**
14 **and part of my practice element of that was establishing**
15 **a for staff, you know. To do that**
16 **the first thing I did was to try to get the aims and**
17 **objectives of the home, you know.**
18 **I began to analyse what we were actually catering**
19 **for. So this was everything from 5 or 6 years up to**
20 **18-year-old, and you were talking about short stay,**
21 **medium stay, long stay, and you were talking about**
22 **working with children with learning disabilities,**
23 **children with all kinds of other conditions.**
24 **So it was very complex, and to try and get a**
25 **system in place that accommodated that was**

1 **quite a challenge.**
2 Q. Just in respect of that in trying to the home
3 what kind of level of support did you have

TL 4 **,**

6 **who was the visiting social worker according to the**
7 **legislation. He was very supportive. He visited at**
8 **least -- at least twice a week I would think. I had**
9 **with him on a monthly basis and he**
10 **also completed a monthly report. So any -- any**
11 **issues -- I mean, he was . Any**
12 **problems, any issues, he was available. So that was**
13 **good.**
14 **his manager then was**
15 TL 20 **, Principal Social Worker, and he would have**
16 **visited once a month, and again he was available to talk**
17 **if there was any issues that there were. Quite often**
18 **they didn't have solutions, but at least you had**
19 **a listening ear.**
20 **So I felt their support was generally good, you**
21 **know,**
22 Q. One of the points that you made when we were talking
23 earlier was that the problem that you found was that
24 even though they were supportive things didn't
25 get done as quickly as you might have liked.

1 **A. Yes. Again the bureaucracy. When you needed something,**
2 **you had to make a case for it in writing, you know, in**
3 **memos. At that time we didn't have any admin support.**
4 **Well, we never had admin support in Fort James even when**
5 **I left.**
6 **So Harberton House had recently opened and that**
7 **was -- it had got everything from our point of view.**
8 **They were --**
9 Q. They were well resourced in comparison?
10 **A. Well resourced, yes. They had secretaries and that. So**
11 **the idea was that we would bring our stuff up there for**
12 **photocopying or for typing. You know, it wasn't very**
13 **sensible.**
14 **So I tried to get a typewriter. I think it took me**
15 **two years to actually get a second-hand electric**
16 **typewriter.**
17 **That was the way the system worked. You had to put**
18 **memos in and it went through various scrutinies and you**
19 **eventually made your case and got it, you know.**
20 Q. That certainly was a difficulty that you encountered
21 then
22 **A. That's right, yes.**
23 Q. You talk -- I am not going to go through your statement
24 here word for word, but you talk in paragraphs 11 and
25 12, in fact, about the arrangements for the

1 home.

2 In paragraphs 13 through to 19 you talk about the

3 staffing structure, the rotas, the duties, the training.

4 One thing that you do mention there is that there

5 was no separation of the roles between qualified and

6 non-qualified staff. I was wondering if that had

7 an effect in the home in any way?

8 A. **Well, historically residential staff was kind of seen as**

9 **a lower status, you know. There wouldn't have been very**

10 **many qualified staff working in residential care. It**

11 **was only over time that it became recognised that this**

12 **was a professional job, you know, and people needed**

13 **training. So we -- I think it was after the Hughes**

14 **Inquiry there was recommendation that all staff be**

15 **qualified, but the conditions were generally better for**

16 **fieldworkers. The hours were better. At least you had**

17 **regular hours whereas residential workers worked shift**

18 **hours and they were dealing with very difficult**

19 **situations.**

20 **So what tended to happen was that you lost your**

21 **staff, your qualified staff. As soon as other**

22 **opportunities came up they applied for them. So even**

23 **though you tried to keep getting new qualified people**

24 **in, you were losing them at the other end. So that was**

25 **an ongoing problem.**

1 **But I think we were one of the better staffed -- one**
2 **of the better homes with a higher ratio of qualified**
3 **staff than many others, you know. I think all of our**
4 **senior staff were qualified, and we always had, as**
5 **I say, two or three of the houseparents were qualified.**
6 Q. You made the point to me also that the non-qualified
7 staff could in some ways be better than the qualified
8 staff in that they could be more practical rather than
9 expecting things to work according to theories that they
10 had learned?
11 **A. Well, the unqualified staff, you know, they learned from**
12 **experience, but they also -- they had a lot of**
13 **in-service training went on. It wasn't -- they weren't**
14 **just totally raw. You know what I mean? They had**
15 **ongoing in-service training that developed their skills,**
16 **and if they had the right qualities, you know, that**
17 **counted for a lot in working in residential care, you**
18 **know, whereas qualified people coming in, they didn't**
19 **have that experience. They had to start again to**
20 **establish themselves with young people. It's not**
21 **automatic because you have a qualification that you are**
22 **able to manage difficult situations. So experience does**
23 **count for a lot, you know.**
24 Q. Can I just ask in respect of the turnover of staff

able to keep the non-qualified staff rather than the

1 qualified people?
2 **A. a number of people I suppose that were**
3 **later on in years. They weren't going to be going**
4 **anywhere. So they tended to stay there, you know.**
5 **During my time I think each year we had -- there was**
6 **at least one person in the process of getting qualified.**
7 **So younger people I think, you know, we were getting**
8 **them qualified, but you had a number of people who**
9 **were -- who weren't maybe academically bright enough for**
10 **some of the courses, you know, but they did a lot of**
11 **in-service training and we kind of built on their skills**
12 **at ground level, you know.**
13 Q. Just one other matter you talk about. Well, you talk
14 about discipline in the home.
15 about
16 record-keeping and the complaints books and so forth
17 that were kept in the home. I was just asking where
18 records were kept in the home and who would have had
19 access to those records.
20 **A. The records were kept in the -- there were two offices**
21 **at the back in the new buildings that were converted.**
22
23 **They were kept**
24 **between those two offices, but all senior staff had**
25 **access to those offices. So whoever was on duty had**

1 **access to those offices, and through the senior all the**
2 **staff had access to the files, particularly their -- you**
3 **know, whoever they were key worker for, they had access**
4 **to those files.**
5 Q. Just to be clear, in the home you would have had regular
6 staff meetings and discussions about the children?
7 **A. Yes.**
8 Q. Each member of staff would have been informed if there
9 was a particular difficulty with any child and been
10 aware of that?
11 **A. Yes. We had -- there was a handover meeting every day,**
12 **you know, when the staff changed around lunchtime.**
13 **There was a detailed handover about what had happened**
14 **and what people needed to be aware of for the next**
15 **session.**
16 **We had a staff meeting every month. arranged**
17 **the rota so that there was a lap -- and overlap from**
18 **staff from 1 o'clock to 3 o'clock every Wednesday**
19 **I think it was. So one of those Wednesdays we would**
20 **have a staff meeting, and one of the other Wednesdays we**
21 **would have had an update on each young person, so that**
22 **everybody in the home, not just the key workers,**
23 **everybody was aware of what the issues were with**
24 **individual children.**
25 Q. You talk then about controlled and disciplined

1 the young people . say that:
2 "It was a constant challenge for staff working in
3 the home managing a relatively large group of boys and
4 girls with complex needs and social problems, and it was
5 important to have a daily routine in the home. In
6 consultation with staff, management and the children
7 themselves house rules were put in place governing
8 things like rising times, bedtimes, weekend routine,
9 visitors, respect for others, vandalism, alcohol use,
10 absence from the home, etc."
11 I just wondered did you actually have children's
12 meetings in Fort James? We have heard they took place
13 in Harberton.
14 A. **Yes, we did have children's meetings. I can't remember**
15 **how often they were held. They were successful or**
16 **otherwise depending on the nature of the group you had**
17 **at a particular time. Sometimes they could be very**
18 **disruptive and young people weren't constructive about**
19 **it I suppose. Other times they were very useful, and**
20 **particularly if there was an issue that affected the**
21 **young people, you know, if it was bedtimes or things**
22 **like that, you know.**
23 Q. They wanted their voice to be heard?
24 A. **Yes. It was an avenue for them.**
25 Q. You say:

1 "The staff attempted to influence behaviour through
2 positive relationships with the young people and through
3 positive reinforcement for good behaviour. Sanctions
4 used were withdrawal of privileges, confinement to the
5 unit for a period (known as 'grounding'), reduction of
6 pocket money, etc. Physical punishment of any kind was
7 not permitted and was not used."
8 Now we learned from documentation that corporal
9 punishment was barred from the Board's homes from 1978,
10 which was well before you arrived in Fort James.
11 **A. That's correct, yes.**
12 Q. We also saw an extract from a Harberton House sanction
13 book. Did you keep such a book in Fort James, do you
14 recall?
15 **A. I don't recall that we did, to be honest.**
16 Q. It just was recorded what the child had done, what the
17 behaviour was and what sanction was imposed --
18 **A. Yes.**
19 Q. -- and whether the child accepted it or not.
20 **A. Yes. It would have been recorded in the daily log, you**
21 **know, and if it was a serious incident, there would have**
22 **been an untoward incident report written up and then the**
23 **action taken as a result of that would have been**
24 **recorded there.**
25 Q. Yes. I think we have seen some of those documents in

1 the course of looking at what we have in the bundle.

2 **A. Right.**

3 Q. Just you are saying here:

4 "The staff attempted to influence behaviour through

5 their positive relationships and through positive

6 reinforcement of good behaviour."

7 So a reward system rather than punishment. Would

8 that be the ethos?

9 **A. We tried -- we tried to enforce that, you know, because**

10 **sometimes people get a very negative approach to**

11 **behaviour, you know. They get hung up on the bad**

12 **behaviour and try to punish, but really when you are**

13 **working with young people, the only thing you have going**

14 **for you is your relationship with them and encouraging**

15 **good behaviour and, you know, small treats that you can**

16 **offer them to encourage good behaviour. So that's what**

17 **we did try and do.**

18 Q. I mean, I think we learned, for example, from this

19 extract from the sanction book yesterday, which I should

20 say was relevant to Harberton House, and it might have

21 been at a later date than your time frame in the

22 residential home, but that one child, while he was

23 grounded and prevented going on a trip, was nonetheless

24 given some cigarettes and the Derry Journal to read to

25 keep him occupied.

1 Was that sort of --
2 A. **No, we didn't -- we didn't go down that line.**
3 Q. Okay. Did you find -- you had experience, as you
4 described the last time you gave evidence, of how things
5 operated in Rubane and how there was more an emphasis on
6 punishment for bad behaviour.
7 In Fort James, when you came, was that an emphasis
8 or was the emphasis more towards rewarding good
9 behaviour? Can you say?
10 A. **I think there was generally -- I think in society**
11 **generally we have come from a background of punishing**
12 **behaviour, you know, of being punitive and trying to**
13 **enforce our thinking. As we have come to understand**
14 **behaviour and the reasons for behaviour, the way we have**
15 **approached it has changed, you know, and become more**
16 **constructive.**
17 **I think the -- sometimes the staff in Fort James,**
18 **they were -- they were strict with good intentions.**
19 **I mean, their idea was to try and prepare these young**
20 **people for being independent. So they would have rules**
21 **like, for example, they weren't allowed in the house**
22 **car. You get public transport wherever possible, but**
23 **sometimes I think they were too rigid in that approach.**
24 **You know, their intention was good, but I think there**
25 **needed to be a bit of flexibility.**

1 .

2 Q. Monitoring and inspections here are covered in
3 paragraphs 26 to 28. You have already indicated the
4 role that TL 4 played in respect of that.
5 You say:
6 "The Principal Social Worker visited the home
7 monthly, sometimes accompanied by the senior social
8 worker. The Board -- a member of the Board's Personal
9 Social Services Committee visited the home."
10 We have seen some of the documentation relevant to
11 that also when we were looking at documents over the
12 last two days.
13 If we can just scroll down, please, you are saying
14 that that certainly gave you the time to discuss matters
15 with , and you also recall the
16 inspections that were carried out by the Department,
17 particularly Mr Dennis O'Brien, who was the Inspector
18 from the Social Work Advisory Group, first of all, and
19 then Social Services Inspectorate of the DHSS.
20 Whenever there was an inspection, a departmental
21 inspection, were you asked for your comments on the
22 report by within the Board?
23 A. **Yes. We would -- I think the procedure normally was**
24 **there would have been a draft of the report sent, you**
25 **know, for comment, you know, just for correction of any**

1 **factual errors that were in it and any other issues**
2 **had with it. would have had that opportunity,**
3 **yes.**
4 Q. On a different note, we were talking about donations
5 that were given to the home from Desmonds, for example,
6 and the Man United Supporters Club.
7
8 A. **I don't. I am not a Man United fan. That's maybe**
9 **something to do with it.**
10 Q. wrote thanking Desmonds and the Man United
11 Supporters Club for their donations.
12 I was just asking there was this level of
13 bureaucracy. couldn't just use that money yourself
14 as you wanted or bank it. had to hand it over to
15 the Board into what I think is an endowments and gifts
16 fund.
17 A. **That's right, yes.**
18 Q. That again was I am sure a degree of bureaucracy that
19 could have maybe done without.
20 A. **Yes, yes.**
21 Q. Although again it was money that was actually then
22 allocated for the use of the home?
23 A. **Yes. You could see -- you could understand the reasons**
24 **for it after a while, you know, that it was money that**
25 **had to be accounted for, you know, and that was**

1 **a protection I suppose.**
2 Q. FJ 33 if I can move on to your second statement and
3 that's at 311, please, page FJ311.
4 I should have asked you to confirm that that was the
5 statement you had prepared for the Inquiry, FJ 33 but
6 I take it that it is?
7 **A. It is, yes.**
8 Q. This is the second statement you prepared just last
9 week.
10 **A. Uh-huh.**
11 Q. This was specifically to address the issue of sexual
12 activity within Fort James as you remember it.
13 **A. Uh-huh.**
14 Q. Now you are aware and in your statement you talk about
15 the Harberton House incident, if I can call it that way,
16 of late 1989/1990.
17 Just by way of general background to that, you were
18 working in Fort James during that period of time?
19 **A. Uh-huh.**
20 Q. And we learned yesterday that it was quite a difficult
21 period for Harberton and Fort James with regard to the
22 type of children and the numbers of children who were
23 being admitted to the home around that time. Is that
24 your memory of that period?
25 **A. It is, yes. For some reason we had a number of**

1 **difficult young people in that time who didn't gel well**
2 **together either, you know. Between them they caused**
3 **a lot of difficult problems, you know.**
4 **I think the home was full at the time. I think**
5 **Harberton was full at the time, overflowing maybe.**
6 Q. Yes. I think there was perhaps a level of
7 over-occupancy as well?
8 **A. Yes.**
9 Q. And a lot of emergency admissions, which, as you've
10 described before, caused difficulties with the mix
11 within the home?
12 **A. Yes, yes.**
13 Q. You say in this statement that:
14 "Staff were alert to the possibility of sexual
15 activity taking place between young people living in the
16 home."
17 You say:
18 "The potential is that wherever children and
19 adolescents are in a communal living setting."
20 **A. Uh-huh.**
21 Q. You were aware that some of the children were victims of
22 sexual abuse, whether confirmed or unconfirmed. So you
23 were witnessing sexualised conversation and behaviour
24 from these children, and those behaviours were being
25 noted in the daily log book at the time and in their

1 files and referred to in review meetings and, where
2 appropriate, key workers would address some of the
3 behaviours with the children.
4 **A. Uh-huh.**
5 Q. Now you describe that during the six years that you were
6 there in 1984 to 1990 you only experienced graphic
7 incidents of a sexual nature involving children in the
8 home and you dealt with those as and when they arose?
9 **A. Uh-huh.**
10 Q. That was very different from what happened in 1989/1990
11 in Harberton, where over a period of time there was what
12 you describe as orchestrated episodes and a pattern of
13 peer abuse during that period of time.
14 That wasn't your experience of your time in Fort
15 James?
16 **A. No, it wasn't, no.**
17 Q. TL 4 though, did draw attention to the fact
18 that this had happened in Harberton. Did he ask you,
19 "Look, have you ever experienced anything like that
20 here? Is there anything -- you know, have you
21 investigated ...?"
22 Did you carry out any investigations around that
23 time just to check?
24 **A. No. There would have been, as I say, sporadic incidents**
25 **all the time and there were -- even at that stage there**

1 **were some young people that we were conscious of were**
2 **sexualised and we had to -- so it wasn't as if it was**
3 **something new that he had to bring to our attention. It**
4 **was an ongoing issue that we were aware of.**
5 **I suppose what you're -- you're asking is was I --**
6 **was I aware of any orchestrated -- was there any danger**
7 **of an orchestrated abuse happening here?**
8 Q. Episode.
9 **A. We were just very alert I suppose and aware. We hadn't**
10 **the detail at that stage of what had happened in**
11 **Harberton, but we knew there were serious issues. So**
12 **I think staff were maybe just made even more -- asked to**
13 **be more alert about supervision.**
14 Q. There was a greater -- an increase in vigilance really
15 --
16 **A. Yes.**
17 Q. -- around that time?
18 By way of example you cite some instances here of
19 the kind of incidents that you recall arising in Fort
20 James.
21 One of those was a 15-year-old boy and a 14-year-old
22 girl who were engaged in a number of incidents of
23 a sexual nature over a period in July and August 1989.
24 The child herself had been sexually abused over
25 a lengthy period in her own home, but the boy -- but she

1 was very sexually aware and no concept of appropriate
2 personal body space.
3 The houseparents were vigilant in trying to keep
4 an eye on her movements. You did report those incidents
5 in accordance with the standard Board procedures.
6 "Houseparents on duty spoke to both young people
7 about their behaviour and the need for constant
8 vigilance was emphasised at handover meetings and
9 subsequent team meetings.
10 asked an officer from the RUC CARE
11 Unit to speak with both young people to underline the
12 seriousness of their behaviour."
13
14
15
16 statement where
17
18
Yes.
20 Q. Can I just ask, FJ 33 why the police
21 might have more effect than the senior houseparents, for
22 example?
23 **A. it was just part of a procedure that you**
24 **report these kind of cases to the CARE Unit, you know.**
25 **They were kind of a support to us as well, you know.**

1 **They would make a judgment about whether there was**
2 **a need for formal action to be taken.**
3 **I think in our -- in discussion about it it was**
4 **agreed that there wasn't a need for a formal**
5 **investigation or action to be taken against any of the**
6 **young people, but just really to speak to them to**
7 **underline the seriousness of it.**
8 **Now the houseparents would have done the same thing,**
9 **but I think this is just to emphasise, you know, from**
10 **a police point of view that it was serious, you know,**
11 **because sometimes they didn't take us as serious as**
12 **outside agencies, you know.**
13 Q. You were saying there had a relationship with
14 the CARE Unit, were able to approach them and
15 get their help when needed it.
16 **A. We had, yes.**
17 Q. One of the things that we have noticed is that there
18 were quite a degree of matters that were reported to the
19 police. You are confirming that that's what you were
20 doing.
21 **A. Uh-huh.**
22 Q. We were discussing this earlier and why you were doing
23 that and you were saying that it was actually policy
24 that any sexual incidents you did have to report to
25 police.

1 **A. Yes.**
2 Q. You believe that that came about post-Kincora.
3 **A. I can't remember the exact date, but there was**
4 **a procedure that you were expected to involve the**
5 **police. They would have attended case conferences as**
6 **well in relation to the issues, you know.**
7 Q. Certainly that would appear to have taken place from the
8 mid-'80s.
9 **A. Yes.**
10 Q. We haven't got papers that precede 1980, for example,
11 from the police, but certainly from '82/'83 onwards
12 there's a lot of police files in relation to both Fort
13 James and to Harberton House, which would be consistent
14 with a change in approach maybe to reporting to police.
15 You think that that did happen around that time?
16 **A. I do think so, yes.**
17 Q. You -- I think I have dealt with the issues around --
18 just this. I am not going to go through these, but this
19 is another example. You are talking about a 13-year-old
20 girl and a 17-year-old male who was living in the
21 independent unit coming in and sitting in her bedroom.
22 If we can just scroll on down, please, then in July
23 '89 again another 17-year-old female resident confided
24 that she had had sexual intercourse with an 18-year-old
25 on the premises on three occasions.

1 Of course, the 17 and 18-year-old's sexual activity
2 would be in a different class --
3 **A. Uh-huh.**
4 Q. -- to the 17-year-old and the 13-year-old, or indeed, as
5 we know in Harberton House, incidents involving younger
6 children.
7 As you say, the incident was reported, and you say
8 that these were the issues that these examples raise
9 that were issues for staff in residential settings, that
10 there was consensual activity between older teenagers,
11 one just below the legal age of consent, and the
12 question for the carers of those children was: should
13 young people be criminalised in any way for such
14 behaviour and the issue of how much supervision was
15 appropriate for young people in the independent living
16 flats? The duty of care juxtaposes to the right of
17 these children to make their and learn their -- make
18 their own mistakes and learn from them.
19 You felt that after the discovery of the
20 orchestrated peer abuse in Harberton House there was
21 a realisation by the Board that there was a need to have
22 night waking staff on duty in addition to staff sleeping
23 in to guard against similar incidents recurring.
24 This afternoon I will be looking with HH 5
25 --

1 **A. yes.**

2 Q. Harberton House,

3 about just -- about the effects of the waking night duty

4 in a little more detail.

5 You were -- you had left essentially by the time the

6 waking night duty was introduced into the home. Is that

7 right?

8 **A. I had, yes.**

9 Q. So you couldn't say whether that had an effect or not --

10 **A. No.**

11 Q. -- on supervision and behaviour, but it was subsequently

12 implemented in both homes, and in relation to young

13 people living in the flats at Fort James there was

14 a growing realisation that they needed much greater

15 support and guidance than you were resourced to provide,

16 and over the next few years dedicated staff were

17 allocated just to look after those who were preparing

18 for leaving care.

19 **A. Uh-huh.**

20 Q. You say that today that's changed. There's now a fully

21 dedicated team of staff.

22 You again had left by the time the DL 518 report

23 came out giving recommendations. So you can't say how

24 those were implemented or what changes were brought

25 about in Fort James as a result of those.

1 **A. Uh-huh.**
2 Q. FJ 33 you will be glad to know that that covers all
3 the matters that I want to address with you, but I am
4 sure the Panel Members and Chairman may have some
5 questions for you. So just stay there, please.
6 **A. Okay. Thank you.**
7 **Questions from THE PANEL**
8 MS DOHERTY: Thanks very much, FJ 33 Can I just ask just
9 when you came straight from sort of Rubane to Fort James
10 --
11 **A. Uh-huh.**
12 Q. -- just the differences for you between the types of
13 regime in terms of the home itself. I understand the
14 whole thing about bureaucracy --
15 **A. Uh-huh.**
16 Q. -- but just the practices within the home, what
17 differences you found?
18 **A. I think -- well, just the environment. There was**
19 **a great sense of freedom in Rubane I think, you know.**
20 **The units were smaller, more homely. It varied**
21 **according to the homes, but the units in Rubane, some of**
22 **them had -- the initial idea was that it was a couple,**
23 **the houseparents, you know. It started off that way.**
24 **Some of those couples were very good and made a very**
25 **homely environment, you know. They got to know the kids**

1 **very personally and, you know, went out of their way to**
2 **have special treats for them and, you know, took their**
3 **individuality into account more, because they were**
4 **living with them I suppose, you know.**
5 **Some of the other units didn't have the same,**
6 **because people weren't actually living in the unit.**
7 **They were just coming in as staff. So that varied, you**
8 **know, between units, the atmosphere.**
9 Q. Did you find the atmosphere in Fort James less homely
10 and less individually focused?
11 **A. Just by the nature of having a bigger group all in the**
12 **one building, you know, it didn't allow for that, and**
13 **I think just the structures, you know, the bureaucracy,**
14 **as I was saying, you didn't have the same freedom, you**
15 **know, to respond to a situation. You know, you had to**
16 **go through all kinds of procedures whereas in Kircubbin**
17 **you could -- you know, if you felt, you know, kids**
18 **wanted -- it was a nice day and you wanted to do**
19 **something, take them on a trip, you could just decide it**
20 **very quickly and organise it, you know.**
21 Q. I mean, one of the things I noticed in the monitoring
22 report looking at the breakdown of children is
23 children -- one of the categories being "respite care".
24 Could you just explain a bit more about what type of
25 child was being taken in for respite?

1 **A. Is that in relation to Fort James?**
2 Q. Fort James, yes.
3 **A. I would need to think about the individual. If I knew**
4 **the names, I might be able to help you more.**
5 Q. I mean, I don't have the names. During your period
6 there was one of the reports -- I think it was '88-'89
7 -- and there was six children down as "respite". I was
8 just wondering if that was -- because you referred
9 earlier to children with learning disabilities --
10 **A. Uh-huh.**
11 Q. -- and whether that mix of child was coming into Fort
12 James?
13 **A. I think -- I think we did have some people that came in**
14 **for that reason, now that you mention it. We had some**
15 **children in the home who had learning disabilities**
16 **anyway and attended special schools --**
17 Q. Right.
18 **A. -- but I think we did have some people ...**
19 Q. Who just came in to give the families respite?
20 **A. Yes.**
21 Q. I mean, I would agree with you it is quite a mixture of
22 children, and accepting that the Board had a need to
23 accommodate children as the need arose, did you have any
24 discussions about the impact on the
25 ability of the staff to work therapeutically with the

1 children if that mixture coming in?

2 **A. It was an ongoing debate, you know. You would try to --**

3 **but, I mean, at the end of the day you were told that,**

4 **"The Board has a responsibility to cater for these young**

5 **people. We have limited options", you know. People**

6 **apologised for encroaching, you know. You always got**

7 **the impression it was going to be short-term, but it**

8 **turned out to be a long-term situation, you know.**

9 Q. So there was an awareness

10 of the impact, but a lack of alternative --

11 **A. Yes.**

12 Q. -- meant that that had to be the situation?

13 **A. Yes. I think -- I was just thinking about that myself,**

14 **you know, in terms of the macro situation, you know,**

15 **that when the -- when you have health and social care**

16 **coming together, that there was always tension in terms**

17 **of funding. I am talking about at a higher level, you**

18 **know. The acute service seems to get -- seemed to get**

19 **the budget, and social care for a number of years had to**

20 **struggle.**

21 **So in terms of why -- why they weren't able to**

22 **respond quicker and provide more individual units,**

23 **I think that might have been part of the explanation,**

24 **you know. They weren't able to access the funding**

25 **because of the integrated service. Acute -- acute**

1 **tended to monopolise the budget, you know.**
2 Q. That's really helpful. I mean, we will probably have
3 that discussion more next week with some of the people
4 who were in the
5 **A. Yes.**
6 Q. Can I ask were staff trained in safe restraint methods?
7 **A. There wasn't training at that time. I know there is TCI**
8 **now, Therapeutic Crisis Intervention --**
9 Q. Yes.
10 **A. -- which -- there was no -- I mean, there were some**
11 **things like that that you had**
12 **I suppose about the issues you had to deal with. That**
13 **was one of them, because one of the incidents in my**
14 **statement, I actually had to restrain a 17-year-old for**
15 **20 minutes at 12 o'clock at night who was berserk until**
16 **the police arrived. That was the longest 20 minutes**
17 **I have ever had, but I was taking a risk at that time.**
18 **There was no guidance about how you deal with this, you**
19 **know.**
20 **But that's -- that's been, you know -- there's**
21 **a whole programme now that we use in terms of how that's**
22 **managed, you know, and it's all in place, but at that**
23 **time there were things like that that residential staff**
24 **were left to deal with, you know. That was the reality.**
25 Q. One of the things that I noticed was about the core

1 evaluation meetings. As I understand it, they happened
2 weekly at a time.
3 **A. Sorry?**
4 Q. The core eval... -- there seems to be core evaluation
5 meetings where --
6 **A. You're talking about Harberton now, are you not?**
7 Q. I was talking about Harberton, if I'm not, I stand --
8 I know that there was a three-monthly review,
9 had the three-monthly review of all the staff?
10 **A. Yes.**
11 Q. But you didn't have core evaluation meetings with TL 4
12 coming down on a weekly basis? No.
13 **A. No.**
14 Q. That's Harberton. I'm being informed that that's
15 Harberton.
16 **A. Yes.**
17 Q. But even -- in terms of the three-monthly review
18 meetings and TL 4 coming twice a week --
19 **A. Uh-huh.**
20 Q. -- and his senior coming once a month --
21 **A. Yes.**
22 Q. -- there's quite a lot of monitoring activity it seems.
23 Was that a surprise?
24 **A. Well, I suppose the senior** TL 4 **senior coming**
25 **wasn't really strictly a monitoring. It was really**

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1 **an opportunity for us on a Friday evening to chat about**
2 **how the month had gone and what were the issues. You**
3 **know, it wasn't a formal monitoring as such.** TL 4
4 **report was the monitoring one, where he went through the**
5 **various categories, you know, and checked them off.**
6 Q.

9 **A.**

12 Q. And when his manager came on the -- were those
13 discussions recorded? was there
14 a sense that there was a record kept of the issues
15 generally?
16 **A. Not the one -- the monthly one, no. It was more**
17 **an informal exchange.**
18 Q. So you could have had a situation where raised on a,
19 you know, quite frequent basis something about the mix
20 of children but that wasn't formally recorded?
21 **A. It would have been maybe in the monthly report, in**
22 TL 4 **report it would have been referenced, you know.**
23 **if there was**
24 **a constant feature, we would take it up with** TL 20 **you**
25 **know, that, "This is something that needs to be**

1 **addressed", you know.**
2 Q. Okay. Thanks very much.
3 **A. Okay.**
4 MR LANE: In relation to TL 4 do you know what his other
5 responsibilities were ?
6 **A. He was over all the children's homes.**
7 Q. So how many was he responsible for then?
8 **A. He was Harberton House and he had originally with**
9 **Nazareth I think as well.**
10 Q. Yes. So just the three establishments?
11 **A. Yes. Well, I think he did daycare as well, you know.**
12 Q. Right. So there would have been day nurseries or
13 something of that sort?
14 **A. Yes, and fostering I think when it started off. After**
15 **a while I think it was broken up, but his was limited.**
16 Q. Were there any staff resident actually in the home?
17 **A. No. There was a bungalow in the grounds**
18
19 **. It**
20 **was used for -- I think there was a community play group**
21 **out the back and they used that for parents I think.**
22 **Then we started using it for family support towards the**
23 **end of my time. We were trying to develop family**
24 **support ideas.**
25 Q. That means that at night there would have just been the

1 two staff sleeping in on call?
2 A. **That's right, two staff on duty, yes.**
3 Q. In terms of schooling did you use a variety of schools?
4 A. **We did, yes.**
5 Q. And did the children go by taxi or were they escorted to
6 school? What happened?
7 A. **It varied. There was -- some of them would have got the**
8 **bus to school, just the ordinary school bus. Younger**
9 **children maybe were taken by car. That would have been**
10 **it. I am not sure if taxi. Maybe occasionally a taxi**
11 **would have been used, but not standard, you know.**
12 Q. Presumably for the children with learning disabilities
13 would have been taken somewhere like that?
14 A. **They had their own transport I think, yes.**
15 Q. Right. You had both primary age children and secondary,
16 didn't you?
17 A. **We had, yes.**
18 Q. I think that's all that I want to ask. Thank you very
19 much.
20 A. **Okay. Thank you.**
21 CHAIRMAN: FJ 33 when you say children with learning
22 difficulties had their own transport, do you mean
23 transport laid on by the Western Education & Library
24 Board it would have been?
25 A. **Yes. That bus would have just called in to collect**

1 **them.**
2 Q. And then gone on to pick up other children elsewhere?
3 **A. That's right, yes.**
4 Q. Thank you very much, FJ 33 for coming to speak to us
5 again today. I know you have spoken to us in the past
6
7 I can't give you
8 an absolute guarantee we mightn't think of something
9 else we want to recall you about, but I think that is
10 likely to be the last time you will be asked to speak to
11 us. Thank you very much for coming today.
12 **A. All right. Thank you.**
13 **(Witness withdrew)**
14 MS SMITH: Thank you, Chairman.
15 There is to be a further witness today, but I know
16 we are going to take a break until we are ready to
17 proceed
18 CHAIRMAN: Yes. Well, we assume I take it that --
19 MS SMITH: due to attend here at 12 o'clock for me to
20 speak to So whether we take an early lunch and
21 start a little bit earlier.
22 CHAIRMAN: I think we may assume, ladies and gentlemen, we
23 won't start before 1.30 at the earliest.
24 (11.25 am)
25 (Short break)

1 (2.20 pm)

2 WITNESS HH5 (called)

3 Questions from COUNSEL TO THE INQUIRY

4 MS SMITH: Good afternoon, Chairman, Panel Members, ladies
5 and gentlemen. Our next witness today is HH5. He is
6 "HH5", and he does wish to maintain his anonymity that
7 has been afforded to the Inquiry
8 HH5 has previously given evidence to the Inquiry.
9 So there is no need for him to be sworn in. He has
10 given two statements to the Inquiry in respect of Module
11 1, which can be found at FJH053 to 054 and FJH055 to
12 056. He also gave evidence in that module, as I said,
13 in April 19... -- sorry -- 2014, and the transcript of
14 his evidence can be found at FJH6029 (sic) through to
15 6059 (sic) and I think there's an additional -- sorry.
16 I beg your pardon. That's not the last page. The last
17 page is 60074, but there was a page omitted and that can
18 be found at 60363.
19 His statement for this module can be found at FJH035
20 to 042. If that could be pulled up, please, 035.
21 HH5, can I just ask that this is the statement of
22 evidence that you prepared for the Inquiry about this
23 module that we are looking at in respect of Fort James
24 and Harberton House?
25 **A. It is, yes.**

1 Q. I am not going to go through it in full detail, but on
2 the last day that you came and spoke to us we fully
3 explored your professional qualifications and your
4 experience, but between 1978 and the end of 1979 you
5 were in Fort James. Isn't that so?
6 **A. Yes, I was.**
7

13
14 Q. You remained there for many years
15 until you -- in fact, until 2001. Isn't that right?
16 **A. That's right.**
17 Q. We talked on the last occasion about when you left in
18 '79, you and Peter Newman were involved in trying to set
19 up new procedures such as the review procedure and
20 I think we talked about key worker scheme that was being
21 introduced around that time for children in care.
22 **A. Yes.**
23 Q. This new home of Harberton House was giving you the
24 opportunity to devise such practices. Isn't that
25 correct?

1 **A. Yes, that's right.**
2 Q. I just wondered did your role in
3 Fort James differ in any way to your role in
4 Harberton, HH5?
5 **A. Yes. In ways -- Harberton as an assessment unit covered**
6 **the whole of the Western Board.**
7 **So the old legacy trusts, Londonderry,**
8 **Limavady, Strabane district, Omagh district and**
9 **Fermanagh, were all included in that catchment area. So**
10 **in first instance we covered that particular area.**
11 **Also in terms of the nature of the home. So the**
12 **function is different. Harberton was set up as**
13 **a short-stay assessment unit. So how we sort of went**
14 **about doing our business was different. There was**
15 **a group set up. The core evaluation team was set up.**
16

18 Q. If I can just ask you a little bit about the core
19 evaluation team, this was something new to Harberton.
20 It wasn't something that operated in any of the other
21 children's homes. Is that correct?
22 **A. No, it was something new within the Board area, and it**
23 **was a multi-disciplinary team which was set up to**
24 **actually look at referrals made to the unit for**
25 **assessment, and then to review and look at the final**

1 **report and make recommendations about where the most**
2 **appropriate placement for children would be after the**
3 **assessment period was complete.**
4 Q. Yes. You do talk about this in paragraph 6 of your
5 statement. I was asking you, when we were speaking
6 earlier today, about the kind of people who were on that
7 core evaluation team. You explained to me that it would
8 have been fieldworkers, the social worker, residential
9 social worker, an educational psychologist, a nursing
10 officer and a medical officer, who initially attended
11 those meetings on a regular basis.
12 **A. Yes.**
13 Q. Then after a period you said of about two or three years
14 those -- some of those people became less regular
15 attendees, because their services weren't necessarily
16 needed in respect of a particular child. Is that
17 correct?
18 **A. That's correct.**
19 Q. So they came on an as required basis?
20 **A. Yes. Whenever we had a situation where maybe you**
21 **required input from the medic or from the nursing**
22 **people, we would invite them into the review. The**
23 **educational psychologist remained in the group for**
24 **a much longer period of time, but again through time he**
25 **would only appear whenever there was a specific need.**

1 Q. Well, I am not going to go through your statement. You
2 can take it, HH5, that the Panel have read the entirety
3 of your statement, but if we can look at paragraphs 11
4 and 12, you talk there about the staffing structure.
5 You talked in -- about the fact that there was a change.
6 In '86 two additional senior houseparents added
7 to the staff team. Then there was a further change in
8 1990 and the staff establishment increased to 20. You
9 outline them there, although the shift pattern remained
10 the same for staff.
11 Can I just ask this change in the additional
12 staffing, how did that come about?
13 **A. Well, I think prior to that date there was always**
14 **an ongoing review of staffing arrangements within the**
15 **homes and within Harberton. and I think going back**
16 **a number of years still advocating for**
17 **an increase in staff simply to do with the nature of the**
18 **work that people were undertaking in the unit that put**
19 **greater demands on them and therefore there was a need**
20 **for -- you know, to increase the complement of the staff**
21 **in the establishment.**
22 Q. That -- when we were talking earlier, you were talking
23 about how the Castle Priory standard, which you believe
24 was set in the 1960s, was, as you saw it, the bare
25 minimum of staff needed.

1 **A. Yes. In order to sort of convince people, you know,**
2 **that there was a need for additional staff you had to**
3 **look at staff ratio -- staff to child ratio. So we went**
4 **back to look at Castle Priory as almost a baseline,**
5 **because, I mean, I recognised as did, you know, my boss,**
6 TL 4 **, who was my boss, recognised that**
7 **Castle Priory was done in a different time.**
8 Q. Yes.
9 **A. It was geared towards providing cover on the basis of**
10 **almost a primary care arrangement for children. As the**
11 **task and job became more complex, we recognised that**
12 **there was a need to increase the staffing level to**
13 **allow, like I said, the opportunity for people to do**
14 **more direct work with children and take on a greater**
15 **number of tasks that were suited to the residential**
16 **social work task.**
17 Q. I think we were talking earlier and you were just
18 talking about when you first came to Fort James, when it
19 opened, it opened with nursery nurses for the home and
20 the person in charge was known as matron.
21 **A. Yes. Even the terminology, I mean, reflected just how**
22 **people perceived the care arrangement for children away**
23 **from home at the time. When I first came to Fort James**
24 **-- and prior to my coming a number of years back the**
25 **home was set up. Even the designation of staff, they**

1 **were designated as nursery nurses and nursery nurse**
2 **assistants and there was a matron. So it was almost**
3 **a medical model, you know, a nursing model. It was only**
4 **subsequent to that -- I mean, when I first started Fort**
5 **James there was a nursery. So there were babies in the**
6 **nursery. During my first year, the time that I was**
7 **there, closed the nursery. Then, you know, the**
8 **designation changed then. They went to houseparents and**
9 **assistant houseparents. So it took on a more social**
10 **care model --**
11 Q. Yes.
12 **A. -- as opposed to like a nursing model.**
13 Q. I think we were talking earlier that the development was
14 from a focus on meeting the primary needs of a child who
15 was put into a children's home to working towards a more
16 therapeutic treatment of a child and its behaviours in
17 the course of the time you were working in residential
18 care. Is that fair?
19 **A. Yes. I mean, it moved from that primary care to looking**
20 **at a child more holistically, you know, in terms of**
21 **their social, educational, psychological needs.**
22 Q. That movement necessitated greater staff?
23 **A. Yes, because again the task changed, and to allow people**
24 **to take on that task you needed to increase the staff**
25 **level.**

1 Q. Just one thing here, going back to your statement there,
2 paragraph 12 you talked about supervision being on an
3 eight-weekly basis.

5

6 . So you would
7 have had, first of all, a meeting with them twice --
8 sorry -- once every two months and then that increased
9 to once a month as time went on?
10 **A. Yes, over time and latterly then it became a monthly**
11 **supervision.**
12 Q.
13
14
15 Q. Your supervisor was TL 4 , as you have said. How
16 often would he have supervised your work?
17 **A. Monthly.**
18 Q. And you would have seen him quite a lot. Isn't that
19 correct?
20 **A. Well, I would have seen him, you know** TL 4 **was**
21 **also -- chaired the core evaluation team group, and**
22 **apart from that he would have visited the unit a couple**
23 **of times a week. So I would have seen him quite**
24 **frequently.**
25 Q. You talk in paragraph 20 of your statement about his

1 role and his monthly -- he carried out a monthly
2 monitoring of the home as well as supervising your work.
3 Isn't that correct?
4 **A. That's correct, yes.**
5 Q. He also -- you also talk about the other people who came
6 to visit the home in this -- in paragraph 21 there. You
7 say:
8 "There were visits by the Principal Social Worker,
9 the Assistant Director of Social Services on a regular
10 basis. The Board carried out a monitoring role and a
11 designated member of Personal Social Services Committee
12 visited every quarter and prepared a report for the
13 committee."
14 You remember one of them, HH 30 .
15 **A. Yes, that's right.**
16 Q. We were discussing the make-up of the Personal Social
17 Services Committee. That was purely lay people. Isn't
18 that correct?
19 **A. Yes, it was primarily lay people.**
20 Q. So in effect this person was performing what was the
21 equivalent of the voluntary visitor's role in the
22 voluntary homes. Is that right?
23 **A. Something similar to that, yes.**
24 Q. Last time when we spoke, HH5, we dealt with complaints
25 that had been made by "HIA233", a girl called HIA233,

1 and again I am using names that are not to be used
2 outside of the chamber.
3 A. **Uh-huh.**
4 Q. She said that there was a member of staff in the home
5 who had beat her, and she said you knew about that and
6 you gave evidence to the effect that that was not the
7 case, that if anybody -- you had certainly no
8 recollection of her ever complaining to you, that you
9 had no reason to think that he had done anything
10 untoward towards her and -- I am paraphrasing now your
11 evidence, HH5 --
12 A. **Yes.**
13 Q. -- but certainly you felt that if such a complaint had
14 been made, it would have been recorded?
15 A. **Yes.**
16 Q. You also dealt on the last occasion with matters that
17 another child, , had talked to us about.
18 talked to us about the children's meetings and we
19 discussed those at that time.
20 A. **Yes.**
21 Q. They were set up to allow the children to have an input
22 into their care in Harberton. Isn't that correct?
23 A. **Yes, that's correct.**
24 Q. On the last occasion we spoke about this member of
25 staff, and again I am going use names, and that's

1 HH 15 . You told us that, as I said, HIA233 never
2 complained to you about him.
3 Since then the Inquiry has heard that there were, in
4 fact, complaints about him and his time in Harberton
5 House.
6 If we can just call up some documents, please.
7 15777. This is a complaint that was made. The date of
8 this is not clear from this, but it appears to have been
9 in 1993. It is a complaint made by a child called
10 against him. This is the record or the report
11 of the steps that were taken after the complaint was
12 made. At that stage he must have been an ex -- sorry.
13 It was another ex-resident:
14 "... who indicated that she had been told by a
15 couple of residents that they had overheard a new
16 resident ask a member of staff if he could remember when
17 he had tried to strangle the resident and when he had
18 put his head in the sink.
19 On the same evening I interviewed individually the
20 three girls resident in Harberton House who had either
21 passed the information to the ex-resident or who had
22 supposedly overheard the conversation.
23 One said then she had been told by the others that
24 they had overheard the conversation but only relating to
25 the sink.

1 One of the other girls indicated that in the
2 conversation she had overheard the boy said, "Wouldn't
3 it be wild if I went to HH5" -- that's you -- "about you
4 hurting me?"
5 The third girl recalled the conversation as the boy
6 asking the member of staff if he could remember leaving
7 marks on his neck.
8 As a result of this information I arranged to
9 interview the boy on 5th October 1993 and took
10 a statement written by himself in answer to the question
11 if any member of staff had done anything to him that he
12 wasn't happy with.
13 His statement was as follows:
14 'Just . He used to lift me by the collar and
15 throw me in my room. He did this because I was shouting
16 at or fighting with . He lifted me off the
17 ground and he bounced me along the ground. It happened
18 about four times. This hurt my neck. I had to put my
19 fingers in my collar to stop the pain. I told my mummy
20 this and she said, "There must have been a reason", but
21 he had no right to grab me by the collar.'
22 From information provided by a temporary social
23 worker, she recalled visiting Harberton House in
24 June 1993 with the child's mother. Her case records
25 note that she had received a telephone call from the

1 residential social worker stating that had been
2 very disruptive the previous night. Discussed this with
3 , who stated that had picked on him. Agreed
4 to meet with to discuss this.
5 The residential record noted that:
6 ' met with the social worker and mum this
7 evening. complained to the social worker that
8 was bullying him and had grabbed him by his collar
9 and taken him to his room. He claimed that was
10 always picking on him.'
11 Both the fieldworkers and residential records note
12 that a meeting was arranged for 30th June inviting
to discuss the comments made by
14 This meeting did not take place as the social
15 worker arrived late and had gone
16 out for a drive in the car.
17 There is no record of a complaint being referred to
18 the team leader or dealt with under the complaints
19 procedure.
20 The daily record in Harberton House noted three
21 occasions between May and June 1993 when recorded or
22 was recorded as being involved in removal to
23 his room."
24 Those are then outlined. I think that's ...
25 "I have found that:

1 1. There is frequent reference in records to
2 being asked to go to his room or to
3 removal to his room. There are also threats to report
4 staff to their managers or to get his father to deal
5 with them when he was confronted about his behaviour or
6 faced with a sanction which he did not like.
7 2. There is a statement from alleging that
8 he had been hurt while being removed to his room.
9 3. There is a response from denying the use of
10 a technique referred to by that is being lifted
11 from the ground by the collar.
12 In conclusion, I do not find it possible to find any
13 supporting evidence to substantiate
14 complaint."
15 That's signed by your line manager, TL 4
16 I know when we talked about this earlier, you had
17 not seen this document, HH5. You had no real
18 recollection of it.
19 **A. No.**
20 Q. As you sit here now, having seen it, has your memory
21 been jogged?
22 **A. Honestly I still don't recall it.**
23 Q. It would appear that you weren't informed about the
24 matter according to what's included in that?
25 **A. Yes. I don't understand that, but I don't have any --**

1 **honestly have any recollection of that.**
2 Q. Okay. We were told that there was an earlier complaint
3 in 1989 made against this staff member, again alleging
4 physical abuse. That was investigated by the Assistant
5 Principal Social Worker, TL 4 and the Principal
6 Social Worker. They determined that the complaint
7 wasn't founded.
8 Now I would not expect you to remember about that,
9 because at that time you were actually in Cork --
10 **A. That's right.**
11 Q. -- being qualified.
12 But there was another child complained that this
13 staff member was rude to her in 1994.

22

1

2 **A. in looking at the incident as it is**
3 **reported, I mean, there**
4 **were children who would make complaints all the time**
5 **about day-to-day things, about somebody calling them**
6 **names, name calling, things like that, and that was**
7 **something that normally you dealt with on a day-to-day**
8 **basis and you tried to get some sort of resolution to**
9 **it. If it was something more serious than that, you**
10 **know, then obviously there was a procedure to be**
11 **followed and I always attempted to follow that**
12 **procedure.**
13 Q. But certainly they must have -- you must have followed
14 some even, you know, internal procedure when it is being
15 recorded --
16 **A. Oh, yes.**
17 Q. -- against about being rude to the child. So --
18 **A. Yes. I mean, the complaint was made. In that case --**
--
20 **A. -- dealt with as would have with other complaints**
21 **of that nature and that would have been common practice.**
22 Q. I can take it that in the role of TL 4
would
24 have had to deal with more serious complaints maybe than
25 a child being --

1 **A. Yes.**

2 Q. -- someone being rude to a child?

3 **A. Yes.**

4 Q. Can I also just check when

also covered Fort James at

6 that time?

7 **A. Yes.**

8 Q. We were discussing earlier the split in responsibilities

9 that were recommended in the DL518 review only really

10 came about with regard to the introduction of the

11 Children's Order. Is that right?

12 **A. Yes. That's my recollection, yes.**

13 Q. Just about those responsibilities, at this time,

14 certainly late '80s/early '90s, TL 4

15 responsibilities included registered child minders --

16 **A. Yes.**

17 Q. -- and child day nurseries --

18 **A. Yes.**

19 Q. -- as well as fostering, family day centres and

20 residential children's homes?

21 **A. That's correct.**

22 Q. As I say, it was only after that review that that -- it

23 was pointed out in that review effectively that that was

24 really too much for one person to cover.

25 **A. I think that was recognised, you know, some time back**

1 **prior to that that** TL 4 **span of, you know,**
2 **responsibility was very, very wide.**
3 Q. You also made the point that there was -- the task of
4 the Assistant Principal Social Worker involved a series
5 of meetings. Nazareth House in Derry was drawn into
6 that, those meetings, about the area resident childcare
7 group. Is that right?
8 A. **Yes.** TL 4 **was actually responsible for**
9 **coordinating and setting up a series of meetings between**
10 **the voluntary children's home, which was Nazareth at the**
11 **time, and the statutory children's homes in Foyle, what**
12 **is now Foyle. would meet on a regular basis to look**
13 **at I suppose common themes, which were about sort of**
14 **management issues, training, practice.**
15 **There was also an area group set up at that time,**
16 **which was an area childcare group, and that incorporated**
17 **some of the children's homes outside the -- our**
18 **district. I think primarily Coneywarren in Omagh would**
19 **have been involved, and we met sort of on a quarterly**
20 **basis. Again it had a similar format.**
21 Q. That was something that happened rather late '80s/'90s.
22 Is that right?
23 A. **Yes.**
24 Q. In -- one of the things -- just to conclude this aspect
25 of talking about , the staff member, HIA233 had also

1 said that she thought he left employment because of
2 a number of complaints about him. On the last occasion
3 the Inquiry told you he had not been subject to any
4 disciplinary proceedings. You thought he had left as
5 part of a package and he retired after you did.
6 A. **Yes.**
7 Q. Just to be clear, HH5, it appears that we have since
8 learnt that he was, in fact, subject to formal
9 disciplinary proceedings in 2009. Have you any
10 knowledge of that at all?
11 A. **I have no knowledge of that. I had left the service by**
12 **that stage.**
13 Q. You had, in fact, retired in 2006. Isn't that right?
14 A. **Yes.**
15 Q. There is a body -- we were discussing this also earlier,
16 about the police material relevant to Harberton, and
17 there's a number of files which cover the time that you
18 were resident
19 Between 1981 and 1985 there is one or two
20 a year. We know -- we will come back to look at what
21 was happening in '89/'90 --
22 A. **Uh-huh.**
23 Q. -- but if I can just mention a couple of them, and
24 I don't think I necessarily need to call these up, but,
25 for example, at 30003 there was an incident came to

1 light about -- when a child was being interviewed by
2 police about abuse by a family member and at that stage
3 she said that in 1981 she and another child had been
4 engaged in sexual activity when the boy had put his
5 penis against her.
6 **A. Uh-huh.**
7 Q. She said to police at the time that she had told a staff
8 member. If such an incident was told to a staff member,
9 what would you expect to happen?
10 **A. Well, I mean, the protocol even at that stage was still**
11 **there that it would be recorded. The child's social**
12 **worker would have been informed. In terms of**
13 **line management would also have been informed**
14 **and it would have been followed up and investigated.**
15 Q. I am just going to look at an incident from 1985 now.
16 If we look at 30125, this is the police material. If we
17 look there just at paragraph 9, if we could scroll down
18 just to the summary, it says:
19 "This case involves two separate sexual incidences,
20 the first involving a 17-year-old boy and 16-year-old
21 girl, the second incident involving the same boy and
22 a 13-year-old girl. In both of these incidents the
23 girls appeared to consent to the activities and, in
24 fact, the matter -- the latter incident only came to
25 light when a young boy made a casual remark about the

1 incident and was subsequently questioned by staff. He
2 could only give sketchy details about the incident he
3 witnessed. When the child was questioned by staff, she
4 elaborated on the incident that the boy had witnessed."
5 Then another incident only came to light when the
6 boy in question was questioned by police.
7 Now have you a recollection -- I'm just not reading
8 out the names there, HH5 -- but have you a recollection
9 of the children involved in the case?
10 A. **The names? I am familiar with some of the names,**
11 **a couple of the names there, yes, that I can recall,**
12 **yes.**
13 Q. If we just scroll down to -- there is a statement from
14 HH 31 , at 30134. You
15 will see this is dated 14th September 1985. She says
16 she is:
17 "... a houseparent at present attached to the
18 Harberton House Assessment Centre. At the beginning of
19 June of this year I was sitting in the sitting room of
20 the house along with eight of the children from the
21 home. During the course of the conversation I overheard
22 a comment being passed between two of the children. The
23 two children involved were FJ 37 and FJ 2 . When
24 the children left the sitting room, I went to FJ 37
25 room to clarify what he meant by the remark he made. He

1 wouldn't explain what he meant, stating that he was
2 scared of what would happen to him. I then went to
3 FJ 2 and confronted her about what was going on.
4 She told me she had been going out with and the
5 fact that they had kissed, but that was all she would
6 say. I went back to speak to her a second time and this
7 time she informed me of the fact that he had touched her
8 and she had touched him. I immediately informed my
9 authorities of everything I had been told and a case
10 conference was arranged."
11 **A. Yes.**
12 Q. Now that would have been the appropriate step for FJ 2
13 HH 31 to take?
14 **A. Yes.**
15 Q. Does that ring any bells as you read that about the
16 matter about?
17 **A. About that particular incident? It doesn't, no.**
18 Q. I think the point that I'm using these to illustrate --
19 and just there is another example at 30715, which is
20 something that the police discovered happened in 1982,
21 but was only disclosed in 1984, and this involved again
22 some boys and a girl who was in Harberton House and it
23 was only after I think she had left.
24 If we can just scroll on down:
25 "It is alleged that shortly after she moved into

1 Harberton a boy approached her while she was in the
2 spare bedroom and proceeded to have sexual intercourse
3 with her against her wishes. She was left alone in the
4 bedroom. She left the bedroom a short time later and
5 went to the bathroom. Later the same evening she was in
6 her own bedroom and he came in. This time he pushed her
7 on to the bed before a different boy took over and had
8 sexual intercourse with her. This only came to light
9 ..."
10 This is obviously a very serious incident if it
11 occurred.
12 **A. Uh-huh.**
13 Q. "It only came to light some time later in 1984 and it is
14 alleged to have happened in 1982.
15 It was a few days later that he approached her
16 again, this time with who came into
17 the bedroom to borrow records. Told they didn't have
18 any, left the room, closely followed by another time.
19 Again that left him alone in the room and she said that
20 sexual intercourse took place again."
21 I am just pausing here to say do you recall these
22 children in the home?
23 **A. I recall the children in the home, yes.**
24 Q. This incident doesn't --
25 **A. No.**

1 Q. -- ring any bells with you? Now obviously it happened
2 two years before the disclosure was made, HH5, but I am
3 highlighting these just simply to show that certainly
4 before the events of 1989/1990 there were incidents such
5 as this occurring within Harberton House.
6 I wondered essentially what you remember about any
7 of the sexual activities between children in the home
8 prior to the incident when you were
9 A. **I am just -- I am trying to recall, but I know, I mean,**
10 **there were always a concern about sexual activity**
11 **between children. I mean, that has always been**
12 **an issue, as there was in terms of just overall**
13 **children's behaviour, how they behaved and interacted**
14 **with each over. I think staff always tried to respond**
15 **to that in the most appropriate way, but it was**
16 **sometimes extremely difficult, given the time, given**
17 **staffing arrangements and so on to try and monitor that**
18 **situation.**
19 Q. I think one of the things you mentioned was that there
20 was always a high turnover of children in Harberton
21 House?
22 A. **Well, I mean, this is one of the difficulties with**
23 **Harberton. I mean, because of the nature of the unit,**
24 **you could have had something like maybe 50, 60**
25 **admissions and 50, 60 discharges each year, you know,**

1 **throughout the time at Harberton, because of the nature**
2 **of the unit. So that was particularly difficult to**
3 **manage in terms of the population, children coming,**
4 **children going, and getting to the stage where you**
5 **became familiar enough with children to understand, you**
6 **know, how you might best respond to their particular**
7 **needs.**
8 Q. We know that Harberton was set up to be just
9 an assessment centre, but that never -- it never really
10 actually operated in that way. Is that correct?
11 **A. Well, it did for the first, you know, number of years,**
12 **but again part of the problem was in terms of**
13 **throughput. Once you completed what you were trying to**
14 **do, where did the children go after that? It was**
15 **looking at what resources were then available to move**
16 **them on.**
17 **That's why after a number of years the review had**
18 **taken place to recognise that children were being**
19 **blocked in the system. There was nowhere else for them**
20 **to move on to, and how could you actually create**
21 **an environment that responded to that, to their needs at**
22 **the time. That resulted in the unit being split into**
23 **two different units, although they were still on the**
24 **same site.**
25 Q. Still on the same site.

1
2
3
4
5 **A. Yes. That is the way it evolved, yes.**
6 Q. We know, HH5, that you left at the end of
7 December 1989 until January 1991.
8 We know and you know that there was an episode --
9 a series of episodes involving some children, a group of
10 initially eight and then it transpired to be nine
11 children, over that period of time between the end of
12 December -- between December 1989 and March 1990.
13 It has been described as orchestrated sexual
14 activity between children and it seems to have happened
15 in the early hours of the morning and then when the
16 children came home from school in the afternoon.
17 **A. Yes.**
18 Q. You yourself were not there at the time, but
19 were you made aware of it?
20 **A. Yes, I was and actually I came back to**
21 **actually meet with the review group.**
22 Q. That was DL 518 group?
23 **A.** DL 518 **group, yes, at that particular time. So**
24 **I was aware of the situation, yes.**
25 Q. And did you know the details of all that had happened?

1 We have seen, for example, HH 32 memo --

2 **A. Yes.**

3 Q. -- of how things unfolded. You were aware of that

4 I take it?

5 **A. Yes, I was.**

6 Q. You were involved in speaking to the review group about

7 the circumstances that were pertaining in the home just

8 before you left?

9 **A. Yes.**

10 Q. Now we have heard that there was a number factors

11 feeding into what was happening in care at that time in

12 Derry.

13 There were a number of children being brought in,

14 an exceptional number of admissions of children to care.

15 There was a crisis in fostering. So there were no

16 foster care places for them. The three homes in the

17 Derry area were essentially over-occupied at that time.

18 Is that your recollection?

19 **A. That's my recollection, yes.**

20 Q. There were, as there had been, ongoing staff shortages?

21 **A. Yes.**

22 Q. And can you remember -- I am trying to recall from all

23 of the documents we have been looking at, but were there

24 other factors at that time that you feel ought to have

25 been put into the context of what was happening?

1 I should have said that the children who were coming
2 in were presenting with very challenging behaviours, and
3 even though staff didn't know it --
4 **A. Yes.**
5 Q. -- many of them had been subject to sexual abuse
6 themselves.
7 **A. I think by the nature of the work that we were trying to**
8 **do, even in the community work with children, the type**
9 **of child coming into care was changing. So from a point**
10 **in time when you had children who were maybe just --**
11 **maybe neglected, maybe in need of respite care, that**
12 **changed and moved away from that to admitting children**
13 **who were presenting quite challenging behaviour, had**
14 **very complex needs and --**
15 Q. These were children whose parents couldn't look after
16 them?
17 **A. Who couldn't look after them or who would be deemed to**
18 **be at severe risk -- I think the term now is**
19 **"significant harm" -- if they had remained at home.**
20 **The issue for us at the time was we were already**
21 **working a system that was quite overloaded and yet we**
22 **had to respond to emergencies. If a child was in need**
23 **of a place, then they had to find a place, and usually**
24 **if it wasn't, it was in foster care. As you said,**
25 **within the whole programme, not necessarily within**

1 **residential childcare, the programme at that time, as**
2 **I recall, was under extreme pressure, as you said. So**
3 **it meant that we were bringing children in and they were**
4 **exceeding the numbers, you know, that were -- that we**
5 **should have been taking into a unit which was already**
6 **quite large.**
7 Q. One of the effects of that was that staff were not able
8 to carry out any of the therapeutic work that they were
9 designed to carry out with the children because they
10 just simply had to meet the primary needs of those
11 children. Is that correct?
12 **A. Yes, because I think up to that time -- I suppose it can**
13 **be checked -- staff were -- children coming into**
14 **Harberton -- there was part of an agreed plan where**
15 **people -- staff would sit down, key workers would sit**
16 **down and carry out work that was identified through**
17 **either the assessment or the regular review system, and**
18 **that was done usually in concert with the fieldworker.**
19 **That was the plan, but as the situation became more**
20 **critical in terms of admissions, then that became**
21 **compromised in some way.**
22 Q. I was just wondering -- we were talking about and I had
23 asked about what staff did to minimise and prevent this
24 type of behaviour. You were saying to me that really
25 staff were always vigilant to different types of

1 behaviours by children. Is that correct?

2 **A. Well, I think throughout that period of time, throughout**
3 **the '80s, staff were more and more aware of the problems**
4 **-- the problems that children did present, you know, in**
5 **terms of challenging behaviour, even in terms of**
6 **beginning to understand sexualised behaviour.**
7 **I don't think people were still clear on what we now**
8 **talk about as peer abuse, but certainly in terms of**
9 **presenting sexualised behaviour and challenging**
10 **behaviour. Staff, therefore, were always attempting to**
11 **be more vigilant, but also in recognising that in the**
12 **work that they were trying to do with children in terms**
13 **of therapeutic work to address some of these issues, but**
14 **again going back to that particular period in time,**
15 **I think that became almost impossible to do with the**
16 **demands that were being made on the unit.**

17 Q. One of the questions I was asking about is whenever
18 staff did become aware of such behaviours, what was the
19 protocol? What did you do?

20 **A. Well, again usually -- and that might be evident in some**
21 **of the statements that people have made or some of the**
22 **untoward -- I mean, there was always a need to actually**
23 **identify what was going on, who was involved. That**
24 **meant writing up an untoward incident, you know, in**
25 **terms of the reporting system, making**

1 **managers aware, and social workers had to be aware, and**
2 **you followed that protocol in terms of the investigation**
3 **of the incident.**
4 Q. You were saying to me that if there was any suggestion
5 of criminal activity, then that was immediately -- went
6 up the line to the Director or the District Social
7 Service Officer.
8 **A. Well, the protocol -- yes.**
9 Q. that was Tom Haverty. Then it was his call
10 whether or not to contact police.
11 **A. That was the protocol at the time. That responsibility**
12 **lay with the -- you know, the District Assistant**
13 **Director, yes.**
14 Q. I was going to ask you about one other matter that we
15 have discovered in the police material, HH5,
16 . Now it is technically
17 outside the terms of reference of the Inquiry, because
18 it dates, as we have now discovered, to 1998. If we can
19 just look at that, please. It is 31701. This is
20 an extract from a police occurrence book.
21 EPE OPERATOR: I don't have that.
22 MS SMITH: Apologies. We don't seem to have the actual
23 document. You and I have looked at it, though, HH5.
24 **A. Yes.**
25 Q. So if you bear with me, I will just read out what was

1 written in the police occurrence book and we can get it
2 added to the bundle in due course. It is 31071.
3 I might have given the wrong number. Did I say the
4 wrong number? 31071. Apologies. Numbers and I don't
5 live happily together, I am afraid. There it is.
6 You see that the date -- day, date and time is
7 21st I think of September 1998 and it's -- a report is
8 made to police from SND 500 , who is a social
9 worker. I just wanted to ask: you do recall SND 500
--
11 **A. Yes, I do.**
12 Q. -- from your work?
13 **A. Yes.**
14 Q. HH 33 whose date of birth is given there in
15 care of Harberton House, "has a large bruise on his back
16 and alleged that a member of staff, HH5, assaulted him
17 yesterday morning."
18 If we could just scroll down to the next -- first of
19 all, can I just pause there and ask: do you remember the
20 child?
21 **A. Yes.**
22 Q. I know from talking to you you do remember the incident,
23 but I will just go down and conclude what's written on
24 the other side of the book, and it says:
25 " HH 31 is carrying out a clarification

1 discussion with the boy. The following are on standby:
2 A doctor.
3 A paediatrician.
4 The forensics medical officer.
5 Photography."
6 Then there is another note at 4.30 pm from SND 500
7
"The boy does not wish to make a formal complaint,
9 but wishes to be medically examined."
10 Now, HH5, can I just say this is the only written
11 complaint that we can find in the bundle about you
12 personally, and I know that this -- you do have a very
13 clear memory of this whole incident. So perhaps you
14 would like to tell the Inquiry just what happened.
15 A. **Yes. It's my recollection in relation to that incident**
16 **that** HH 33 **was among a group of children who were**
17 **outside running around really out of control. I was on**
18 **on call at the time, and staff had called me**
19 **over, because they couldn't manage to get him settled.**
20 **I had gone over and found him outside the unit, and**
21 **I managed to talk -- you know, stop him long enough to**
22 **talk to him and I said -- told him he had to go inside**
23 **and settle down. So, as was the procedure at the time**
24 **when you were dealing with a kid who was difficult,**
25 **I put my arm around him and sort of steered him towards**

1 **the door.**

2 **As we were going towards the front door there are**

3 **two steps down, which were of -- like a paving.**

4 Q. Slabs?

5 **A. Yes, slabs, as we stepped down. Now there were other**

6 **people about, staff about and children at the time. As**

7 **I was walking down with** HH 33 **my arm round him, for**

8 **some unknown reason -- and he had done this a few times**

9 **before -- he dropped down. He just literally dropped,**

10 **you know, went a dead weight with my arm round him, and**

11 **I literally fell over him as he was going down and sort**

12 **of winded myself.**

13 **He jumped up straightaway and I said, "Are you all**

14 **right?" He said, "I'm okay" and he went on inside.**

15 **I sort of caught my breath and went back inside to check**

16 **out and see if he was -- he said he was okay. I said,**

17 **"Look, are you sure you're all right?" He said, "I'm**

18 **okay", and I left. I had asked the other staff to check**

19 **on him and see if he was okay.**

20 **But the next day I think he'd went to school and**

21 **someone in the school had asked him what had happened**

22 **and he had said he had a bruise on his back and that it**

23 **had happened when -- that I had done it.**

24 Q. Uh-huh.

25 **A. What happened after that was, you know,** HH 33 **was**

1 **interviewed, and the consultant paediatrician, who**
2 **I think was examined Robert at the time, and**
3 **what they found was the mark on his back was consistent**
4 **with the explanation that had been given about what had**
5 **happened in the incident, and that was the incident.**
6 Q. There was no further action taken against you as a
7 result of that, but you, in fact, were interviewed by
8 you think the Assistant Principal Social Worker and by
9 the Principal Social Worker.
10 **A. Yes, I was spoken to by my manager and by the Assistant**
11 **or the Principal -- Assistant Principal Social Worker at**
12 **the time, yes.**
13 Q. That was the only time that you were subject to any
14 investigation about any --
15 **A. Yes.**
16 Q. -- of a complaint by any child. Is that correct?
17 **A. That's it, yes.**
18 Q. I think we've probably dealt with the issue about --
19 yes. I just want -- coming back to the matter at
20 1989/'90, we know that one of the immediate things that
21 were put in place in Harberton following this coming to
22 light was that there was waking night staff introduced.
23 **A. Yes.**
24 Q. I am going to look at a memo on 17th
25 January 1991, which is at 10086. First of all, I know

1 when we talked about this earlier I didn't have the memo
2 to look at, but I know you have now seen it, HH5.
3 **A. Yes.**
4 Q. I'll just go through it. It says -- this is in January
5 when you come back from

7 "There has been considerable discussion about the
8 use of waking night staff in Harberton House and staff
9 recently recommended that it was not necessary to
10 continue to operate this system of night cover.
11 Given the situation as it existed within the unit
12 earlier last year and the incidents of peer abuse, it is
13 acknowledged that our response to these incidents and
14 staff's increasing feeling of vulnerability was to
15 provide waking cover at night.
16 It would be extremely difficult to accurately assess
17 whether this cover, in fact, provides extra protection
18 for children or reassures staff who may feel vulnerable.
19 The frequency of untoward incidents depends more on the
20 type of child in the unit at any one time than any other
21 factor. It has been the standard and professionally
22 accepted practice over the last number of years to share
23 out waking night staff duty in -- waking night staff in
24 children's homes and this has been reinforced by the
25 Department's Childcare Branch inspectors in their

1 inspection reports on a number of children's homes.
2 Waking night duty was seen as a carry-over from the
3 days when night nurses were employed to look after
4 babies and very young children who required attention
5 during the night. It was no longer seen as either
6 necessary or professionally acceptable within the
7 contemporary residential childcare.
8 The current use of waking night staff would in this
9 context be seen as a regressive step. It is a fact that
10 the ever-increasing number of sexually abused and
11 abusive children coming into care has created
12 difficulties in relation to the supervision and
13 protection of all children within a group -- group
14 living situation and by its nature may create
15 opportunities for abusers to take advantage of others.
16 This is part of the risk involved in bringing sexually
17 traumatised children together. The removal of waking
18 night staff involves the taking of a decision as to
19 whether the risk in doing so is acceptable.
20 Professionally we would feel that this is an acceptable
21 risk at this time. Management and organisational
22 considerations may dictate otherwise and circumstances
23 may arise in the future when circumstances would dictate
24 the reintroduction of waking night cover on a temporary
25 basis. In this event it would be important to have

1 an agreed procedure in place to quickly implement
2 a night duty rota. A decision to retain waking night
3 staff does have resource implications and this must also
4 include the cost of setting up a properly staffed and
5 recognised waking staff rota.
6 It would be important that a decision to revert to
7 sleeping in staff, if this is agreed, be seen as having
8 the full and informed consent and support of all the
9 managers involved in making such a decision."
10
11 **A.**
12 Q.
13 **A.**
14 Q.
15 **A.**
16 **I think, to clarify that, the arrangement**
17 **at the time was that after the peer abuse revelations in**
18 **Harberton waking night staff was introduced.**
19 Q. Yes.
20 **A. Waking night staff actually turned out to be the**
21 **residential social workers who were doing the waking**
22 **night duty.**
23

25 **A.**

1
2
3

5 **However, it wasn't about not having waking night**
6 **staff. It was actually --**
7 **and I think it came up subsequently in Gabriel Carey'**
8 **memo -- trying to advocate for a separate**
9 **category of staff who were basically a care assistant**
10 **grade who would be able to come in and take on some of**
11 **the duties if that need arose, you know.**
12 **So it wasn't about thinking that it was not**
13 **necessary forever, but it was looking at what had been**
14 **happening in response to the peer abuse situation, where**
15 **residential social workers had taken on that waking**
16 **night duty role.**
17
18
19
20 Q. Just talking about the memo then if we
21 look at 20085, you will see that there is a memo from
22 Gabriel Carey, who was the Acting Assistant Unit General
23 Manager to HH 34 , on
24 15th May.
25 It would appear from this memo that the waking night

1 duty,
2 didn't, in fact, end until October 1991.
3 It says:
4 "You will recall that at the end of October 1991 we
5 terminated waking night duty in Harberton House in view
6 of the fact that there had been no night-time incidents
7 for some considerable time at that stage. However,
8 I indicated to you that I would like to keep this matter
9 under review, because staff have considerable
10 reservations about the withdrawal of waking night duty
11 and were of the opinion that incidents had ceased
12 precisely because the children were aware that there was
13 waking night cover. In recent times there had been
14 incidents, about which I wrote to you recently, which
15 involved children awakening at 6.00 am in the morning
16 and becoming involved in some untoward incidents. More
17 recently there were incidents involving children being
18 about the unit at 2.00 am in the morning and obviously
19 this causes some concern because of the potential risk
20 to the children involved in this behaviour and
21 especially to the more vulnerable children in the unit.
22 I attach for your information a memo
23 concerning waking night duty, in which he indicates his
24 concern at the level of activity by a number of children
25 and young people who have been detected up and about the

1 unit during the night by sleeping in staff."
2 Now we don't have that memo, HH5, but this is
3 obviously something --
4 **A.**
5 Q. A different memo.
6 **A. Yes.**
7 Q. "This memo was written before recent incidents came to
8 light and attached to the memo is an extract of a record
9 kept of activity between 12.00 am and 7.00 am. This
10 record refers to the Assessment Unit in Harberton only
11 and relates to those incidents detected by staff.
12 In view of this situation I feel that we have to
13 review the future of waking night duty. Indeed, because
14 of the great concern I have for the safety of the
15 children, I have approved the employment of
16 an additional residential worker, unqualified, from the
17 night of Thursday, 14th May 1992 until Saturday --
18 sorry -- Sunday night, 17th May to undertake waking
19 night duty until this matter can be considered on
20 a longer term basis.
21 When waking night duty was terminated, I had a
22 discussion with Acting ..."
23 **A. "... Programme Manager ..."**
24 Q. "... Programme Manager" -- thank you -- " TL 4
25 Assistant Principal Social Worker, and HH5 about

1 this matter. HH5 had devised some proposals concerning
2 waking night cover which envisaged the employment of
3 someone equivalent to a care assistant rather than
4 a residential social worker. There were a number of
5 reasons for this proposal which were directly related to
6 the duties undertaken by waking night staff. Basically
7 these are:
8 1. Monitoring within the unit and ensuring that
9 children are not engaged in unacceptable behaviour.
10 2. Basic primary care tasks.
11 3. Household tasks, for example, helping sleeping
12 in staff prepare breakfast for children in the mornings.
13 The arguments against using residential social work
14 staff are very significant:
15 1. Residential social workers are an expensive
16 resource and employing them to provide waking night duty
17 is not the most cost-effective use of their skills and
18 expertise.
19 2. We have already changed the rotas in Harberton
20 House following the comments made by the Social Services
21 Inspectorate in their last inspection report. This was
22 to enable as many staff as possible to be available to
23 provide cover during times when children are actually in
24 the unit. The effect of this is that there is no room
25 for manoeuvre in redeploying residential social work

1 staff and any change in the existing rota would result
2 in a reduction of staff on duty during the day. This
3 would have the impact of transferring the risk from
4 night to day time.
5 3. The staff themselves acknowledge that to use
6 them to provide waking night duty would be inappropriate
7 for all the reasons outlined above.
8 The concern that I have at the present time and why
9 I believe it was necessary to take some action and to
10 review the future is that, apart from the fact that
11 there seems to be an increased level of night-time
12 activity, it would appear that much of this activity is
13 pre-planned. Younger children in the unit have had
14 their sleep disturbed and we have no real knowledge of
15 the real extent of this behaviour, as points out in
16 his memo. If reports of the most recent incidents are
17 indicative of what is going on, obviously this is
18 a cause for serious concern. I believe that our primary
19 responsibility in this matter is to take action to
20 protect the children and, secondly, you can imagine that
21 this sort of behaviour also causes great anxiety amongst
22 staff, especially given the previous episodes of peer
23 abuse. We know from our own experience and recent
24 research that peer abuse is a reality of life in
25 children's homes and I believe that it is necessary to

1 devise an appropriate strategy to protect the children
2 in our care. I acknowledge that providing weekly night
3 cover will lead to additional expense and clearly
4 I would wish to do this in the most cost-effective way
5 whilst at the same time safeguarding the high profession
6 standard I wish to maintain and develop in residential
7 homes for children.
8 Taking account of all the circumstances, I would
9 agree with proposal that an appropriate grade to
10 undertake waking night duty would be one similar to care
11 assistant grade, since this would encompass the tasks
12 I referred to earlier in this report. I calculate that
13 we would need two waking" --
14 A. **"... whole time equivalent ..."**
15 Q. Sorry.
16 "... whole time equivalents of care assistant grade
17 and the approximate yearly cost would be £20,000 plus
18 employer's costs. This figure is higher than the normal
19 care assistant salary because most of the hours worked
20 would be between the hours of 10.00 pm and 6.00 am and
21 apparently, according to the current regulations, this
22 would attract an additional payment.
23 It is possible that might have some
24 suggestions that could reduce costs, and I have asked
25 him to research this matter. How, the total costs

1 would, of course, be decreased by the fact that the
2 sleeping in staff would be reduced from three people to
3 two people and this would realise an annual saving of
4 £5,913 per annum.
5 Because of the additional burden that this would
6 place on the unit's resources, I believe that we should
7 raise this matter with the Board. Coincidentally HH5
8 was involved on 13th May in giving a presentation to
9 non-executive directors in the Board, who will be
10 carrying out the Board monitoring function in the
11 children's homes. I understand that in the
12 course of his presentation raised the issue of waking
13 night duty and expressed concern that it has been
14 withdrawn. I gather that the other executive directors
15 indicated that they believed that waking night duty
16 should be in operation in all the Board homes.
17 I checked this matter out with Mr Tom Haverty, Chief
18 Social Work Adviser, who had arranged this meeting and
19 he confirmed that this matter was discussed and informed
20 me that the consensus of opinion at the meeting was that
21 this matter should be raised at the Social Care
22 Committee in June. I indicated to Mr Haverty and
23 Mr Dominic Burke, Director ..."
24 Sorry.
25 **A. "... Director of Social Care ..."**

1 Q. Thank you.
2 "... Director of Social Care, who joined us whilst
3 we were having this con... -- who joined us whilst we
4 were having this conversation, that if the provision of
5 waking night duty was an expectation of the Board, then
6 we would be looking to them to provide the appropriate
7 resources.
8 The cost would be quite substantial in our case,
9 since this would entail introducing waking night cover
10 in both Harberton House and Fort James.
11 Given the ongoing difficulties in Harberton House at
12 the present time, I would be grateful for an opportunity
13 to discuss this matter with you at your earliest
14 convenience."
15 Now just for the sake of completeness there is
16 a memo from SND 425 to HH 34 at 15534. I am not
17 going to open it up, but it's mention of the fact
18 that -- it is attaching a memo, which we don't have,
19 concerning steps taken in relation to recent
20 events/incidents in Harberton House and a copy of
21 the minutes of the strategy meeting concerning these
22 incidents.
23 "You will recall that I wrote to inform you of these
24 incidents a few days ago. I have notified Mr Tom
25 Haverty."

1 These are the steps that were taken immediately with
2 regard to what appears to have been more untoward
3 incidents involving children up in the middle of the
4 night. It is not clear exactly what was entailed, but
5 from the previous memo that I have just looked at it
6 seems to suggest that those did involve some sexual
7 activity between the children and were being
8 orchestrated in a way that the incidents had been in
9 '89/'90 in that they were pre-planned by the children.
10 Do you have a recollection of the incidents around
11 this time at all, HH5?
12 **A. I honestly don't of the particular incidents, but I know**
13 **there was concern at the time. I mean, obviously it is**
14 **noted here, but the particular incidents, no, I don't**
15 **have any recollection.**
16 Q. Certainly you -- when you looked at those documents,
17 there was an issue --
18 **A. Yes.**
19 Q. -- with waking night staff, and it was clear from that
20 there were resource implications, but the cheaper option
21 really, and the better option was to
22 employ somebody just solely for that role who wouldn't
23 have other roles to play with the children.
24 **A. I think primarily it was to do with the fact that they**
25 **could actually support the residential staff at night,**

1 **you know, carrying out the roles that were already**
2 **identified previously there in the memo. concern was**
3 **that that supervision be reintroduced, but also that it**
4 **didn't impinge on the residential social workers' time,**
5 **because again, as I said earlier, we were basically**
6 **using residential social workers to cover waking night**
7 **duty saw that as being just not an appropriate use**
8 **of that resource.**
9 Q. There is one other matter that I wanted to ask you
10 about.
11
12 . That's -- I am going to use the name.
13 Again it is not to be used outside the chamber. That's
14 FJ5.
15 **A. Yes.**
16 Q. I just wondered were you aware or were you ever made
17 aware formally about the allegations that were made
18 about him in your role
19
20 **A. Yes, I was.**
21 Q. Can you remember how that came about or what happened?
22 **A. Again I'm working on recall, but I think that**
23 **information was passed on to me through the Director of**
24 **Social Services, you know -- the District Social**
25 **Services Officer -- that would be Tom Haverty -- through**

1 **him through**
2 Q. So other homes were informed this police investigation
3 was ongoing?
4 A. **That there was a police investigation. Now I didn't get**
5 **the specific details other than there were allegations**
6 **of serious sexual assault. That was it.**
7 Q. I wondered if there was any discussion within Harberton
8 House about this in terms of, "Well, is there anything
9 we need to do ourselves?"
10 A. **Yes, there was at the time. People were again -- there**
11 **was a heightened awareness of the need to sort of be**
12 **looking at our own practice and what was going on, but**
13 **also there was an awful lot of discussion about the Fort**
14 **James staff and how they might be feeling about this**
15 **whole situation, because we recognised that they were**
16 **quite vulnerable as well too, and it could happen -- you**
17 **know, in any situation staff would be very vulnerable.**
18 Q. When you say staff being vulnerable, you mean vulnerable
19 to accusations being made of behaviour. Is that right?
20 A. **Not necessarily that, but, you know, if a situation**
21 **arose where there were allegations made, everybody is**
22 **quite sensitive about that, you know. "Did we do**
23 **something wrong? Was there something lacking on our**
24 **part?" In that way staff probably felt -- you know,**
25 **that's what I mean by "vulnerable".**

1 Q. I think you mentioned to me that the community in which
2 you lived was a fairly tight-knit community --
3 **A. Yes.**
4 Q. -- not just the locality but the professional community.
5 So you and your staff would have been aware of the
6 effect that all of this was having on the staff in Fort
7 James presumably.
8 **A. Yes. I mean, because it was a small place and because**
9 **it is a small community, I mean, part of our remit in**
10 **terms of working with kids, we would attend what was**
11 **then the Juvenile Court on a regular basis where there**
12 **were care proceedings going on. As you know, at the**
13 **time it was an open court. People went in and sat in**
14 **an open area. So you could have a criminal case going**
15 **on at the same time as you might have the Juvenile**
16 **Court, you know, Children's Court going on. So people**
17 **were aware of what was going on at the time. Social**
18 **workers and staff were coming and going even during the**
19 **period of this trial.**
20 Q. Just in respect of your role can I just ask
21 you generally about how you felt the home was resourced
22 in terms of staff?
23 **A. I mean, there was always an ongoing issue about how you**
24 **actually, you know, kept that staff complement up to**
25 **what it should be and actually advocated to increase**

1 **that in response to all the things I have said before.**
2 Q. Yes.
3 **A. Part of that was trying to recruit and retain**
4 **professionally trained staff. I mean, again when**
5 **I~started my work, you had people who had primarily**
6 **a nursery nurse qualification who were working with**
7 **children. It then evolved into the qualification which**
8 **was awarded through Rupert Stanley, which was the**
9 **Certificate in the Residential Care of Children and**
10 **Young People, the CRCCYP. That was the baseline for**
11 **people coming into care. Then in the late '70s the**
12 **Certificate in Social Services was introduced, which was**
13 **employment-based training, alongside the Certificate of**
14 **Qualification in Social Work, you know, the CQSW.**
15 **The problem throughout the time was trying to**
16 **retain and hold on to qualified staff. It was easier**
17 **for those people who had the childcare qualification,**
18 **but for those people who went on to do professional**
19 **training, as it was then CQSW, it was difficult to**
20 **retain and hold on to staff, because terms and**
21 **conditions were very different. You know, you had to**
22 **work unsocial hours in terms of a rota system. Career**
23 **prospects were different. So it wasn't until**
24 **post-Hughes -- I think it was Hughes 6 came in, which**
25 **talked about parity, that we began to maybe -- because**

1 **qualified people coming in to work, you know,**
2 **but could not retain them.**
3 Q. The last -- the witness this morning, FJ 33 who spoke
4 about Fort James, he made the comment that sometimes the
5 non-qualified staff were not better than the qualified
6 staff but were certainly an excellent resource, because
7 they -- of the experience that they gathered. Was it
8 easier to maintain them in the home and allow them to
9 build up that experience?
10 A. **Well, I think we could not have functioned without those**
11 **staff. I mean, they may have lacked formal**
12 **qualifications, but all the people I have worked with in**
13 **my career were extremely child-centred in their approach**
14 **to the work. Through time they did build up a body of**
15 **skill and experience that could not even be matched by**
16 **someone who was professionally qualified just coming in**
17 **to start work. So they were a valuable asset. I think**
18 **as well too because there was a limit. They were**
19 **limited in their mobility. They could not move outside**
20 **the system. So they either had to commit themselves,**
21 **you know, to the work, and they did in the greater part.**
22 Q. One last question that I have for you, HH5, is that in
23 your role children's home do you feel
24 that you were supported in that role by your senior
25 management?

1 **A. I must say throughout I was fortunate, as were other**
2 **people within the sector, during my career, most of my**
3 **career time, to have a manager who was -- you know, was**
4 **an excellent manager.** TL 4 **and**
5 **I think if you scan through some of the -- you know, the**
6 **stuff that you have before you, you will see that** TL 4
7 **was an extremely dedicated and committed manager. He**
8 **was there, and his -- and the Programme Manager, you**
9 **know, the Principal Social Worker, latterly the**
10 **Programme Manager, was also a great support.**
11
12 **. For them -- I could not have asked for**
13 **more support and more help from them.**
14 Q. One of the things that we heard again FJ 33 speaking
15 about Fort James is that, despite that middle management
16 level of support, that things did not always happen as
17 quickly as you might have liked to. Is that your
18 experience?
19 **A. Well, they never do, you know, and sometimes our**
20 **expectations -- well, put it this way: expectations**
21 **always exceeded the resources, you know, that were**
22 **around, but it didn't stop people advocating, because**
23 **again over the time I was there we fought very hard to**
24 **actually -- with, you know -- with senior management and**
25 **with administrators to try and get the resources that we**

1 **needed. I can say looking, you know, back now, I mean,**
2 **that was an evolutionary rather than a revolutionary**
3 **process. It took time, over time, but we didn't stop.**
4 Q. Well, HH5, that's all I want to ask you about unless
5 there is anything further you feel that we haven't
6 covered that you want to tell us about your time in
7 Harberton particularly.
8 A. **Could I go back just a bit, because you were talking**
9 **previously about the incident in relation to** HH 15
10 **and some of those ones.**
11 Q. Yes.
12 A. **The -- not specifically speaking about** HH 15 **but**
13 **in that context where you have people who end up having**
14 **to confront children whose behaviour is out of control,**
15 **I mean, we struggled for many years trying to look at**
16 **how we could actually deal with those children.**
17 **People -- we had a limited number of male staff and**
18 **a greater proportion of female staff. There was**
19 **a natural inclination when kids were out of control that**
20 **there was almost an over-reliance on male staff to try**
21 **and support female staff in dealing with it. I always**
22 **believed that left them vulnerable, you know. Plus it**
23 **did not do any good to the relationship between them --**
24 **male staff were repeatedly coming in to try and deal**
25 **with difficult situations, and that was recognised, you**

1 know, by the staff.
2 We for many years tried to find a model to try and
3 work with children who presented challenging behaviour,
4 and that created difficulties, because any models that
5 we looked at were all related to working with adults in
6 psychiatric units and so forth. It was totally
7 inappropriate for children. So rather than pick one
8 thing and go with it, myself and managers and the
9 training team in the Western Board spent a long time
10 trying to find a model that would be appropriate,
11 because prior to that time we were given some general
12 information about how to try and diffuse a situation --
13 "Use your relationship. Try and avoid confrontation" --
14 you know the usual things you try and do not to heighten
15 the situation with kids, but when the situation broke
16 down to the point where a child needed to be held, there
17 were no directions about how you could appropriately do
18 that, safely do that, and that was the big gap. It
19 wasn't until the introduction of Therapeutic Crisis
20 Intervention as a model, which was in the mid-'90s, that
21 staff were finally given appropriate training on how to
22 manage and deal with very challenging behaviour. That
23 really was about -- 90% of that programme was about how
24 you actually de-escalate situations, how you work with
25 children in helping them recognise the trigger points

1 **that set off the behaviour, how you as a person yourself**
2 **was feeling at the time when the incident occurred, and**
3 **how you could safely manage that.**
4 **set up a system for actually recording that and**
5 **learning from it through training, but that did not**
6 **happen until the mid-'90s.**
7 Q. Much later.
8 **A. Yes.**
9 Q. Well, HH5, thank you very much for that. I have no
10 further questions, but the Panel Members may have some
11 for you.
12 **A. Thank you.**
13 **Questions from THE PANEL**
14 MS DOHERTY: Thanks very much, HH5. Can I just follow on
15 from that? Did you have any particular problems about
16 HH 15 behaviour? Did you have any particular worries
17 about that? I understand exactly what you are saying
18 about male workers being, you know, pulled in.
19 **A. No. My only concern was that he was a large man. He**
20 **was a big man, and the fact that people tended to maybe**
21 **use him more than they should in dealing with very, very**
22 **aggressive children, but we spoke about that, you know,**
23 **and tried -- and tried to deal with that through the**
24 **team meetings and through talking to people about not**
25 **relying, you know, because again I had a -- not only did**

1 **I have a duty of care towards the children. I had**
2 **a duty of care towards my colleagues to try and make**
3 **sure that they weren't put in a position of**
4 **vulnerability or risk.**
5 Q. Can I just go back to the issue about supervision and
6 how staffing levels affected supervision of the
7 children; what the particular challenges were?
8 **A. I think the challenges were, as I think I have mentioned**
9 **before again, as a role of the residential social worker**
10 **evolved and the key worker or primary worker role**
11 **evolved, you became more and more involved in -- it was**
12 **a dual function. You had -- your primary responsibility**
13 **was the care of the children. That was your first**
14 **responsibility, but in terms of professionalising the**
15 **service, there was then -- once you were qualified as**
16 **a qualified person, there was an expectation that your**
17 **role would be different, that you would be taking on**
18 **more complex social work tasks.**
19 **Again from your background you know there was**
20 **a debate for years: was residential care social work?**
21 Q. I know. Exactly.
22 **A. There was actually papers written on that: was**
23 **residential care social work? In many ways residential**
24 **childcare was -- what was the other term they used at**
25 **the time? The Cinderella service. You know, that was**

1 **what we were -- but there was an expectation that we**
2 **would take on that role, but I don't think there was**
3 **an understanding at some level that that complex role**
4 **also carried with it an additional, you know, burden in**
5 **terms of how you did that and then provided that level**
6 **of supervision for children. It was always a balance**
7 **about that. Now when push came to shove, the other bit**
8 **had to go and the children had to come first.**
9 Q. So really if -- people who were qualified were trying to
10 take kind of intensive therapeutic work with children
11 which would bring them away from the general building
12 and the general supervision of the children?
13 **A. It could have at times, yes.**
14 Q. Okay, and when that was the case, then that was the
15 toss-up. You had to go back to the --
16 **A. Yes, and always -- I mean, if a man is hungry and he**
17 **needs a psychologist, you won't get the psychologist**
18 **first.**
19 Q. No, no, no.
20 **A. You will feed him, you know. In terms of the children,**
21 **the children's care came first.**
22 Q. One of the things I was interested in when we were just
23 looking at the issues about the incidents, one of the
24 kind of trigger points that were identified, HH5, was
25 after school and the fact that staff were having to go

1 to accompany children from school, because the taxi man
2 wanted cover for that.
3 **A. Yes.**
4 Q. But, I mean, that seems like a real pull on staff at
5 quite a critical time of the day when children would be
6 coming home and trying to get them settled.
7 **A. Yes.**
8 Q. Was there any discussion about that, about an
9 alternative?
10 **A. Oh, there was,**
11
12
13
14 Q. When you discussed that with your senior managers about
15 the -- you know, the appropriateness of that, of
16 a skilled resource being used in that way?
17 **A. Well, there was -- I mean, there was an understanding**
18 **that there was a difficulty, but again it was how you**
19 **actually managed that and how you actually tried -- the**
20 **ways we tried to manage it, we did that. You know, we**
21 **used -- I mean, myself and others would**
22 **have gone and done that rather than free somebody -- you**
23 **know, rather than take somebody away from the floor, as**
24 **you say.**
25 Q. Okay. Can I -- I mean, the issue about the change of

1 function, so going from a pure assessment centre,
2 recognising that in a sense it wasn't working that way,
3 became a kind of medium care, and then in a sense
4 institutionalising that into the structure and function
5 of the home, do you think that was the right decision at
6 that time?
7 **A. It was the only decision.**
8 Q. That isn't what I asked.
9 **A. No, because I don't think that -- talking from my own**
10 **practice, my own experience, the unit was too big. You**
11 **know, to have -- we were moving away at that period of**
12 **time from large institutional units. Harberton as it**
13 **was originally envisaged was okay, you know, for that**
14 **short-stay, moving thing, although even again at that**
15 **stage when it was being built, in England, you know,**
16 **they were getting -- I mean, I -- I mean, a lot of my**
17 **practice and stuff was reflecting and looking back at**
18 **what was happening in other jurisdictions. You know,**
19 **the Children Act, the '89 Children Act, you know, there**
20 **was a lot of stuff came out of that even at that stage,**
21 **and prior to that there was stuff coming along. When**
22 **you looked at people like, you know, David Berridge and**
23 **other people who were writing about children's homes,**
24 **the move was towards smaller homes. That really was**
25 **part of I think the Trust's thinking at the time,**

1 **because subsequently that's where we moved towards in**
2 **terms of much smaller units, but at that time Harberton**
3 **was too big.**
4 Q. So are you saying that some of that -- some of the
5 rationale for that decision was about trying to make it
6 smaller units, not just accepting the fact that there
7 were children staying longer than an initial assessment
8 period?
9 **A. Yes, because you recognise -- because if children were**
10 **staying longer, then the unit was inappropriate, because**
11 **even environment -- even in terms of the environment,**
12 **like, what we tried to do was try and -- I mean, there**
13 **were structural changes made to the building. We**
14 **provided smaller kitchens, you know, individual -- like**
15 **a kitchen for children where they could go and make**
16 **their breakfast, make their tea, at any time go and get**
17 **-- the dining rooms were broken up into smaller, more**
18 **family-orientated type dining rooms. So there were**
19 **structural changes made to the building to try to**
20 **respond to that, but it didn't take away from the fact**
21 **that at times we could still have had 28, 29, 30**
22 **children on that site.**
23 Q. Did you actually try and -- I mean, in terms of the
24 issue of taking children from assessment into the kind
25 of medium stay was there -- was that a kind of

1 an organised transfer --
2 **A. Oh, yes.**
3 Q. -- or did you get -- as you had children in assessment
4 and more emergencies were coming in, was there a --
5 **A. No. We always -- I mean, any movement -- that's why**
6 **sometimes you had a problem within the assessment unit,**
7 **because you weren't just going to shift a child down the**
8 **hall --**
9 Q. Okay.
10 **A. -- because another child was coming in. Every child**
11 **moving to the medium stay unit would have been -- that**
12 **would have been on the basis of a review decision that**
13 **was made in terms of their future care plan.**
14 Q. Okay. When we talked to FJ 33 this morning, he indicated
15 that actually again, like yourself, and it is clear from
16 the papers how supportive TL 4 was and, you
17 know, other senior managers, but that in some senses
18 there was quite a lot of conversation, often informal,
19 about the -- as opposed to recorded about the pressures
20 on -- he was talking mostly about Fort James, but that
21 in a sense it took a long time to get change.
22 He was suggesting that one of the issues on
23 reflection might be that the merging of social care and
24 health meant that a lot of resources went towards acute
25 care as opposed to social care.

1 **A. that was a very, very**
2 **vigorous debate, because not only did it -- you know,**
3 **not only did you have a move from -- you know, into that**
4 **structure, but you also had a creature that they created**
5 **called a locality manager. This could have been**
6 **a person from any professional background who at the end**
7 **of the day could have been responsible for childcare and**
8 **administration and something else, but without a social**
9 **work background. You know, that was -- that was what**
10 **locality management was about.**
11 **I can remember some of the fieldwork managers in**
12 **some of the areas in there took on responsibility for**
13 **health visitors, you know, and from a practice point of**
14 **view there was not an issue, but who are they**
15 **accountable for professionally in their practice?**
16
17 Q. So there was the issue about kind of professional
18 structures and what was lost within that, but was there
19 an issue about resource as well? Do you --
20 **A. I always believe that acute serv... -- you know, it took**
21 **priority.**
22 Q. In relation to, you know, when you were and
23 you heard about the incidents, were you surprised, HH5,
24 by the extent of it?
25 **A. Yes.**

1 Q. You were? There was --
2 **A. Yes, I really was.**
3 Q. You didn't feel that there was anything in your previous
4 experience that would have indicated -- I mean, clearly
5 you knew about the risk, but it was just about the
6 extent?
7 **A. It was just -- I suppose just the way that it happened**
8 **and the circumstances surrounding it that actually**
9 **surprised me. I don't know. Again was that just to do**
10 **purely with my lack of understanding or knowledge about**
11 **the nature of peer abuse, but it was the fact that this**
12 **was, you know, highly -- seemed to be highly organised**
13 **and it seemed to be sort -- you know, in that way,**
14 **because, I mean, as seen in the round, there have always**
15 **been incidents between children over time where you try**
16 **to respond appropriately and deal with them, but it did**
17 **-- yes, it did surprise me, the nature of that**
18 **particular situation.**
19 Q. The final one you will be glad to hear. I mean, in some
20 senses some of the activity that has been described is
21 about sexual exploration.
22 **A. Well, again you see -- yes, and that's what -- I am**
23 **going back to my training even prior**
24 **to that, because there were -- I mean, people were**
25 **always aware that children were sexual -- well, some**

1 **people wouldn't acknowledge it, that children were**
2 **sexual beings and that there was that idea of sexual**
3 **curiosity or, you know, sexual exploration --**
4 Q. Uh-huh.
5 **A. -- and I think sometimes that was used as a reason for**
6 **almost not wanting to look further than that. "Let's**
7 **not -- you know, these are children".**
8 Q. Yes.
9 **A. "You know, are we going to end up going in and, you**
10 **know, end up criminalising children?"**
11 Q. Uh-huh.
12 **A. I think that was part of social work thinking I think as**
13 **well at the time.**
14 Q. Just one more. The whole issue of sexualised behaviour,
15 of, you know, children coming who were presenting
16 sexualised behaviour, did any staff get training
17 about that afterwards, specifically about that?
18 **A. Yes. Well, again if you go back to like the** DL 518
19 **report, I mean, some of the recommendations coming out**
20 **of that -- one of them was in relation to training, and**
21 **we were directed by the report in terms of, you know,**
22 **how we would implement some of the recommendations.**
23 **I think the report at that time was indicating like**
24 **rather than zero in and target specifically, you know,**
25 **these -- training and identifying child sexual abuse,**

1 **you know, that we -- you look at -- it was recognised it**
2 **was there, but how do you therapeutically intervene to**
3 **try and deal with it and work and help and support**
4 **children through that? I think that's where the focus**
5 **was provided after that time for staff.**
6 Q. And for the children as well?
7 **A. And for the children as well, yes, because there were --**
8 **I mean, there were whole issues about -- even before**
9 **about keeping yourself safe. There were booklets -- you**
10 **know, things there about -- but we were always talking**
11 **in terms of like stranger danger and that whole notion**
12 **of -- and Kidscape, which was introduced and was used as**
13 **a means of trying to educate children, you know, about**
14 **keeping themselves safe. So, you know, we were involved**
15 **in that process at the time as well.**
16 Q. Okay. Thanks very much, HH5.
17 MR LANE: Just to follow up on one of those points, did you
18 find it helpful involving the police in talking to the
19 children?
20 **A. I live in Northern Ireland, you know, and sometimes**
21 **while the intention was good, a lot of these children**
22 **came from families and from areas that were -- and some**
23 **of them were highly politicised and, I mean -- so you**
24 **had to be really, really careful in how you used the**
25 **police in dealing with children, because it could make**

1 **a bad situation worse for -- not only for the children**
2 **but, you know, for the families and for us. So we did**
3 **have links with the police and they were extremely**
4 **helpful, but we had to be very careful about how we used**
5 **them, because that was the context. That was the time.**
6 Q. Yes. Sure. You spoke very warmly about the way you
7 were managed, and I am pleased to hear that, but were
8 you ever given too little space to manage yourself? Did
9 you ever feel you were a bit over-managed?
10 **A. No, never.**
11 Q. So you had all the sort of scope to do what you wanted
12 to do?
13 **A. I had -- I had a good relationship. Now that -- I mean,**
14 **I was -- I was accountable for my practice.**
15 Q. Yes.
16 **A. I was -- you know, I was -- I had supervision. I had to**
17 **provide my own monitoring reports, but in terms of the**
18 **support, if I asked -- if the resource was available,**
19 **whether it was a human resource or something, if I asked**
20 **for it and presented an argument, I got support. I may**
21 **not necessarily have always gotten it, but I certainly**
22 **felt supported in asking for it.**
23 Q. You mentioned the supervision sessions. What were the
24 sort of things you discussed in those?
25 **A. Well, I mean, it was a standard supervision, where you**

1 **would look at practice.**

2 Q. Yes.

3 A. **You would look, you know, at the whole area of -- and if**

4 **it was sort of a key worker supervision time, you would**

5 **look at the cases or the key worker system and how it**

6 **was working and what work was being undertaken with the**

7 **child. You would look at organisational issues, you**

8 **know, in terms of just what was being passed down**

9 **through the organisation**

10 **There was an element of training, about**

11 **how you would look at future training Then**

12 **there was the bit about -- you know, the personal bit**

13 **about themselves, about how they were progressing.**

14 **That -- those were sort of the elements that made up the**

15 **supervision.**

16 Q. Thank you. Just one last question. From my memory of

17 the plan of the building it was a sort of H-shape,

18 wasn't it?

19 A. **Unfortunately it was, yes.**

20 Q. I wasn't suggesting any other connotations --

21 A. **Oh, it was picked up on quite regularly.**

22 Q. I mean, wasn't it a rather strange shape to use as

23 a place that's meant to be a home for children?

24 A. **Yes. I mean, we had to work with what was given us at**

25 **the time, you know. That was the design. I don't know**

1 **why -- where the design -- you know, that design was**
2 **created by the Department.**
3 **I wouldn't have built the building that**
4 **way.**
5 Q. Yes.
6 A. **But it was also, of course, in keeping with the thinking**
7 **of the time that it was a short stay unit, you know. So**
8 **in terms of you made it -- you had the central core**
9 **where you have all the services and stuff, and you had**
10 **the sleeping part. It separated it out a bit, but it**
11 **was, yes.**
12 Q.
13
14 A. **tried to separate it out as much**
15 **physically could, but it is on the one site. So**
16 **actually created -- because again when it opened, it**
17 **is my memory it was very much an open plan, but**
18 **created separate sitting rooms and dining rooms.**
19 **created separate kitchens -- as I said, kitchens. We**
20 **had visitors' rooms, you know, where staff -- where**
21 **children could bring their families, bring their**
22 **parents, bring their friends, and there was a communal**
23 **sort of area.**
24 Q. Did the children identify with those smaller groupings
25 then?

1 **A. Oh, yes, they did, yes.**
2 Q. Yes.
3 **A. Plus the fact that because we were working -- I mean,**
4 **I was always extremely interested in what happened to**
5 **kids afterwards, you know, the whole leaving care**
6 **and moving out into the community. So although**
7 **not set out to do that initially, we were still trying**
8 **to have to prepare children for leaving. So that's why**
9 **sort of opened that little unit, which was almost a**
10 **(inaudible) thing for teenagers, to try and prepare them**
11 **as part of that leaving care process.**
12 Q. any pressure on to -- the authority to
13 create more homes as places people could come move on?
14 **A.**
15 **I think that was always part of a long-term strategic --**
16 **strategic plan --**
17 Q. Yes.
18 **A. -- and I think that was followed through in the '90s, as**
19 **you saw anyway --**
20 Q. Right.
21 **A. -- because Harberton eventually closed and they did --**
22 Q. Yes.
23 **A. But again it took a long time, because I think -- you**
24 **know, looking back at it, you can think, "Well, that**
25 **would have been a straightforward thing". I mean,**

1 **in the early part of that**
2 **process had extreme difficulty just trying to**
3 **find a location to build these places --**
4 Q. Yes.
5 **A. -- because they weren't exactly -- there was this**
6 **perceived wisdom out there in the community that**
7 **children's homes were bad and children in them were bad**
8 **and "I didn't want one in my neighbourhood".**
9 **colleagues spent an awful lot of time even**
10 **trying to find appropriate locations that weren't based**
11 **in a hospital setting, that were in the community as**
12 **part of the community. That took a number of years to**
13 **even try and overcome that difficulty apart from the**
14 **resourcing difficulty.**
15 Q. Okay. Thank you very much.
16 CHAIRMAN: Well, HH5, thank you very much for coming again
17 to speak to us. We are very grateful to you for doing
18 so. Thank you.
19 **A. Thank you, Chairman.**
20 **(Witness withdrew)**
21 MS SMITH: Chairman, that concludes today's evidence.
22 CHAIRMAN: Thank you. Usual time tomorrow.
23 (3.40 pm)
24 (Inquiry adjourned until 10 o'clock tomorrow morning)
25 --ooOoo--