

Statement of Dr Kevin McCoy

Harberton House

1. I understand that the Chairman of the Inquiry engaged in a conversation with Counsel for the Inquiry about the contents of a memo dated 28th August 1990 to Mr. John Hunter, and stated that Dr. McCoy will want to explain why the Department were trying to cut down the terms of Reference of the Bob Bunting review into the incidents of peer abuse in HH 1989/90.
2. I think it is important to place this memorandum in context.
3. The incidents of peer abuse occurred in Harberton House between December 1989 and March 1990 and only came to light in March 1990. A copy of the Harberton House untoward incident report dated 15 March 1990, which detailed the discovery by staff of sexual abuse activities amongst a group of young children aged 9/10 years and two 12/13 year olds, was forwarded to SSI by letter from the Board dated 8 May 1990.
4. When the DHSS became aware of the incidents of peer abuse in Harberton House, the SSI acted quickly and with concerted effort to address this issue with the Board. The gravity with which SSI viewed the issue is evidenced by the number of briefings of senior officials within the Department and actions arising. The steps taken by DHSS were as follows:
 - a) Mr O'Brien continued to seek and receive updated reports from the WHSSB;
 - b) I visited the WHSSB and the Fort James and Harberton House children's homes on 26 June 1990 to consider the situation with the Board and staff from each of the homes;
 - c) I, by minute dated 29 June 1990, apprised Mr J Hunter, the Chief Executive of the DHSS Management Executive, and other senior staff within the DHSS, including Dr Harbison, the DHSS Under Secretary/Deputy Secretary, of the situation and my concerns that:
 - the group activity had gone on for a sustained period of 3-4 months without being detected by staff;
 - there was an apparent absence of any full investigation by the Board as to how this could happen;

- there was an absence of any response by the Board to provide psychiatric and psychological care and treatment for children or support for staff in the face of a most unusual incident;
 - the prospect that this was a new phenomenon which might possibly occur elsewhere given the characteristics of children now being received into care;
- d) By minute dated 9 July 1990, Mr Hunter requested a meeting with Dr Harbison and other senior officials to consider *inter alia* whether some form of formal investigation of the Board's actions should be undertaken. This was agreed.
- e) **At the Department's instigation**, a Review Team which included 2 senior officers from the Board was established in August 1990. The team, led by Mr R Bunting, the Eastern Board's Assistant Director of Family and Child Care, reported in December 1990;
- f) It is clear that the Board had taken no action to address the incidents of peer abuse in Harberton House and had not indicated that the problem was more widespread i.e. occurring in other homes.
5. It was because we only had information about the extensive peer abuse in Harberton house that the Department proposed terms of reference which were developed before the Western Board altered the Terms of Reference which were applicable to Harberton House only. The Board decided to widen the scope of the Review and in my view this would only lead to a dilution and not address the events in Harberton House. I would also wish to point out that the emphasis on resources available to the Board generally was being used to attempt to extract more resources from the Department. It was opportunistic. This is borne out by the General Managers presentation of the Review to a Board Committee (FJH10991) in which he is recorded as stating that a key aspect of the exercise was to assess the significant resource implications that this new major development would present to the Board.
6. My concerns about the revised terms of reference were that the failure to focus in on events in Harberton House would mean that the Review Team would not address fully what happened, why it happened and how did it go on for so long without being detected. It was clear that the Board had not discharged its duty of care to the children who had been abused while being placed in the care of the Board and placed in Harberton House.

7. This view was shared by Mr. Hunter who wrote to the General Manager of the Board on 30th August 1990 (FJH 10984).
8. Following receipt of the Report of the Review Group led by Mr R. Bunting, the Board's General Manager wrote to Mr J Hunter addressing the resource allocation to the Board and comparing this to the Eastern Board's allocation. He used the Review Report as a lever to extract additional funding from the Department. (FJH 10979)
9. The Review Report was considered by the Department in March 1991 and the investments in services proposed by the Board were noted. Actions to be taken by the SSI were also recoded. (FJH 10977,10978)
10. The SSI, together with the WHSSB convened a regional symposium on 4 February 1992 on the potential for abuse in residential care in which officers of the DHSS and SSI took part. The keynote speaker was Mr T White, Chair of the Committee of Inquiry into "Children and Young Persons who abuse other Children."
11. I am satisfied that as Chief Inspector of the Social Services Inspectorate that my response to the receipt of information about peer abuse in Harberton House was appropriate and that the actions taken by me following receipt of the Bunting Report were also appropriate. I would emphasise that without my intervention with the Board no action would have been taken to address comprehensively the incidence of peer abuse in Harberton House.



Kevin McCoy

10th June 2015

C14816
KC/27/6/90

From: D P O'BRIEN

Date: 21 JUNE 1990

Mr McElfatrick ^{home. 22/6/90} (to see)
Dr McGoy ^{25/6}

THE STATE OF PLAY IN WESTERN BOARDS CHILDRENS HOMES

1. Recently you advised that at the suggestion of the Acting Director of Social Services you would be visiting Harberton House and Fort James childrens homes on Tuesday 26 June. I understand that Mr McElfatrick spoke to you briefly about correspondence (Tab A) which I received from SND 502 about child care problems within the Foyle Unit of Management. briefly, these refer to an increase in admissions of children to care necessitating going over the established number of places in Harberton House and Fort James, and to an unsavoury untoward incident in Harberton House where children were found to be abusing each other. The purpose of this note is to bring you up to date on the position in the facilities which you will be visiting.

2. ADMISSIONS TO CARE

The Western Board admitted 58 children to care between 1 January and 31 March 1990 mainly because of abuse and neglect. I have asked for a breakdown of these figures in terms of family size, reasons for admission, planned/unplanned admission, short/long term care, etc. I suspect that we will find that 4 or 5 large family groups account for almost half of these children. Therefore, although this does not dilute the Boards problem, it does diminish the possibility of this level of admissions becoming a trend. Western Board staff suggest that their workload in all areas of child care has increased. In support of this view they have provided a synopsis of a study on social work staffing levels undertaken by
SND 466 APSW (Tab B).

3. IMPACT ON RESIDENTIAL CHILD CARE

Initially all 3 childrens homes within the Foyle Community Unit of Management were holding children in excess of the numbers which they are approved to accommodate. Recently the situation has eased somewhat. Harberton House (25) is catering for 26 young persons, ie one above its normal complement, but the staff flat which had been used for 4 children, has been taken out of service. Seventeen of the 19 residents in Fort James (20) are being accommodated in the main house, which normally sleeps 15 (the remaining 5 places are in the flatlets to the rear of the main building). Nazareth House (20) is accommodating 20 boys and girls which is its normal operating level.

However the influx of children to residential homes has had a consequential impact on the children and staff, particularly in Harberton House. The Board recruited untrained temporary workers to give assistance with supervising children living in the homes. However, permanent staff

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KC/50/6/90

From: K F McCOY, CHIEF INSPECTOR, SSI

Date: 29 JUNE 1990

cc: CMO
 Dr Harbison
 Mr Kearney
 Mr McElfatrick
 Mr O'Brien

Mr Hunter

RESIDENTIAL CHILD CARE SERVICES - WESTERN BOARD

1. On 26 June I had planned to meet with _____ SND 502, Acting Director of Social Services, Western Board. As a part of that meeting she had arranged for me to visit 2 childrens homes in the Foyle Unit of Management which had recently been forced to take children in excess of their physical and staffing capabilities. Mr O'Brien's note of 21 June 1990 to me sets out briefly the background to the rise in admissions to care in the Unit and the impact on residential care. The primary purpose of this note is not to alert you to these general concerns but rather to alert you to the contents of the untoward incident report for Harberton House dated 15 March 1990, attached to SND 502 letter of 8 May 1990 and now attached to this minute.
2. Many, if not all, of our childrens homes now admit children who have been physically and/or sexually abused. These children present severe behavioural problems because of their experiences and general upbringing. Sexual activity among teenage children in care is common and staff are alert to the possibilities of this happening and usually plan care and treatment accordingly.
3. However, this incident report points to worrying developments on 2 fronts:
 - a. the overt sexual activity of pre-teenage children; and
 - b. the organised group sexual activity in a childrens home.
4. My concerns about this report are that:
 - a. The group activity went on for a sustained period, 3-4 months, without being detected by staff and was only revealed when one of the children mentioned it in passing to a member of staff.
 - b. The apparent absence of any full investigation by the Board about how this could happen. SND 502 has now indicated that the matter was investigated by the local Unit of Management and will send me copies of this report.)

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- c. The absence of any response by the Board to provide psychiatric and psychological care and treatment for children and support for staff in the face of a most unusual incident.
 - d. The prospect that this is a new phenomenon which may not have occurred elsewhere but given the characteristics of children in residential care may possibly occur.
6. I shall be out of the office until Wednesday, 18 July but I would find it helpful if we and the copy recipients could consider what we might learn, and what action, we should take from such an incident.

K F McCoy
K F McCoy
Chief Inspector
Social Services Inspectorate

CONFIDENTIAL

write Copy

WESTERN HEALTH AND SOCIAL SERVICES BOARD
FOYLE COMMUNITY UNIT

MEMORANDUM

TO: Mr T Haverty, A/UGM
FROM: Mr G Carey, PSW
DATE: 9 July 1990
SUBJECT: HARBERTON HOUSE INCIDENTS

I had a telephone conversation with SND 502 Acting Director of Social Services, before I went on leave who indicated that Kevin McCoy had spoken to her abouts the incidents in Harberton House. He apparently posed three questions:-

1. Had we done an investigation?

SND 502 had replied in the affirmative and gave some details over the phone but indicated that she would reply in further detail. I referred to the report I had recently completed in addition to an earlier report I undertook in relation to the immediate action we took when this incident came to our attention. I indicated to her that no doubt this report would be passed on to her by you in due course.

2. Dr McCoy referred to the document "Co-operating to Protect Children" and in particular paragraph 4.15, page 21, which indicates that Boards should consider invoking the Child Protection Procedure in instances where cases of child abuse arise in Residential Units.

SND 502 indicated to Dr McCoy that she made a conscious decision not to invoke the child protection procedures in this case as she felt it would not be appropriate. However, she did indicate to me that she may well want to meet with you and TL 4 during my leave to develop a procedure in relation to this aspect of the document in view of a similar situation arising in future. I stressed to

SND 502 my reservations about this particular matter and was anxious to impress upon her the need to separate out child protection procedures from disciplinary action where staff may either be guilty of abuse or may be guilty of negligence which led to that abuse. There is also an apparent contradiction in invoking child protection

procedures in relation to children who are already in our care. However, no doubt she will be in contact with you about this matter in the near future.

3. Apparently Kevin McCoy wants a report on the overall circumstances of the case that could be disseminated broadly to the Association of Directors to alert other Boards to the problem and so that they can learn from our experience. Apparently it would also be used to appraise the Department of the problems we are facing in child care with a view to making them more amenable to requests for resources to cope with these problems. SND 502 indicated that she would be completing this report herself but would need the information that I have supplied to you. SND 502 may well speak to you personally about these issues but I felt that I should notify you should she make contact with you whilst I am on leave.

GABRIEL CAREY
PRINCIPAL SOCIAL WORKER

Pa. 27/1

HEL/roh

23 July 1990

STRICTLY CONFIDENTIAL

Dr K McCoy
 Chief Social Services Inspector
 Department of Health & Social Services
 Dundonald House
 Upper Newtownards Road
 BELFAST
 BT4 3SF

Dear Dr McCoy

**Re: INCREASE OF CHILD ABUSE REFERRALS AND IMPLICATIONS OF THIS INCREASE
 FOR OUR BOARD AS A CHILD PROTECTION AGENCY**

I refer to my correspondence of 8 May addressed to Mr Denis O'Brien, Social Services Inspector and for ease of reference have included a copy of this letter in Appendix I. Appendix II provides statistical information in relation to admissions to care from January to April 1990. You will appreciate that these statistics alone do not provide a complete picture of the child abuse situation within Foyle Unit of Management. One must also consider the number of children placed on the Child Protection Register and even more importantly the nature of abuse which children are being subjected to. To secure a total sense of the overall child care situation we require to look at the preventive and normal child care day-to-day work which by necessity receives lower priority when staff have to divert their energies towards the more horrific forms of abuse. I know you fully appreciate that such action can result in sustained child abuse going undetected.

I have included in Appendix III a typical Child Protection Case which is on our Child Protection Register and may I add that I simply selected this case at random. I think it encapsulates for me the level of high risk taking carried by our Department as a Child Protection Agency. I believe this to be an intolerable level.

Our Child Care Services are subjected to a strain I haven't previously experienced and I know that the traditional response such as the provision of additional residential places is not the solution. We require to offer an ever increasingly more flexible service with a greater range of options as outlined in the paper in Appendix IV which is known as our integrated approach to Child Care.

In the short-term there is an urgent necessity for;

- A) additional field workers,
- B) an extension of the role and function of many of our existing pre-school playgroups,
- C) further development of fostering.

this barrier and seeking the assistance of our community in not only referring child abuse to us but equally importantly providing them with information which will heighten their own consciousness regarding the care of their children. We have a responsibility to enable our communities to live more wholesome fulfilled lives whether they be children or adults. I believe that such a campaign focusing on Family and Child Care should be as important to us issues such as smoking or heart disease because if the quality of life of our community continues to deteriorate I do fear for the next generation and in the here and now I fear for the ability of our Community Services to fulfil their responsibilities.

You are aware that our family networks are beginning to breakdown which is something we never thought would happen in Northern Ireland and there is an ever-increasing number of people who need social work counselling and support.

I am aware in recent DHSS Guidelines entitled "Co-operating to Protect Children" that it is incumbent upon me when an allegation is made concerning the abuse of a child in the care of our Board, that the Board must assess whether to invoke the Child Abuse Procedures. I believe the fact that children were abusing each other within our Board cannot reflect back on staff in this particular instance as the reasons for not detecting the abuse which was of some weeks duration possibly having commenced in December 1989 was due to a combination of factors which can be summarised as below.

1. Due to a shortage of residential and fostering places we had children in care far exceeding our bed complement in our children's homes and had to appoint on a temporary basis unqualified, inexperienced staff.
2. Staff time was spent in coping with the sheer numbers of children and as a result of this the children did not have the individualised time and indeed physical and "personal" space they would have had formally.
3. There were no staff on waking-night duty which has been practised in our Board for many years and as you are aware many of the untoward incidents occurred in the early hours of the morning.
4. Residential staff were consumed with concern and guilt regarding the untoward incidents and on occasions were feeling that Senior Management, particularly myself, did not understand their impossible situation.

For all these reasons I believed and still do believe an investigation into the untoward incidents led by me would have done nothing to improve staff morale and enhance the care of our children. My Senior Management colleagues at Unit level were satisfied that the above analysis of the situation was correct.

Finally, in recent days we have had evidence emerging of considerable sex abuse within the Creggan area here in the City of Derry and I have enclosed a report in Appendix XIII which highlights again my concerns regarding the increase in child abuse locally.

As you are aware from previous correspondence the General Manager and Senior Management, members of all professions including Board members, have listened with sensitivity and understanding to the problems we are currently facing and indeed responded with additional manpower some weeks ago to address the day-to-day child abuse difficulties.

I have to acknowledge that there are other equally acute demands placed on this Board in addition to child abuse and for this reason I feel that the ever increasing child care difficulties should be looked at immediately with a view to the DHSS offering additional revenue. I would suggest that if we could secure additional social work practitioners we could proceed with the setting up of child care teams, child protection teams and teams working with children in care. I believe that this way forward seems to be the "right model" for our Board. I know of course that any extension of social work staffing in the whole area of child abuse has implications for our medical colleagues, RUC care unit, psychologists, health visitors etc. I reckon that an additional 8 qualified social workers would do much to address the situation within our Board and would enable us to move down the road of our integrated child care plan. Should you require any further information you know of course I shall be more than happy to provide same.

Yours sincerely

SND 502
Acting Director of Social Services

Encs

FROM: J G HUNTER
DATE: 27 JULY 1990

copy to this group

cc: Dr Harbison
Mr Browne
Mr Kearney
Dr Sloane
Mr McElfatrick
Mr O'Brien

h 30/7. 1/208.

Mr. 27h

Dr McCoy ..

CHILD CARE SERVICES - WESTERN BOARD

1. This morning I spoke to Mr Frawley.
2. He agreed that it was desirable that we should explore the learning opportunities of the situation in Harborton House. He appreciated the need for an assessment of the training implications for social services staff and other professionals in the Province.
3. He undertook to discuss an investigation with **SND 502** who would liaise with you over who might undertake the investigation.
4. He readily agreed that the Western Board would initiate the investigation and to do so in such a way as to avoid the appearance of a witch hunt and recriminations.

JGn.

J G HUNTER

*You will be interested
to see the latest papers
re the incidents in
Harborton House.*

30/7.

to avoid drawing attention specifically to Harberton House as she fears that presenting the terms of reference to the Social Services Committee in such a specific way would have, in effect, drawn media attention to the home and made the enquiry more difficult.

5. The nett effect of all of this is to widen the terms of reference to the extent that the issues of supervision and management in Harberton House will not get the scrutiny they deserve. Paragraph 4 of the Boards terms of reference sets out the values which underlie the Review but these are overshadowed by the final paragraph on methods which on two occasions refers to "available resources". Given that the sixth term of reference is "to examine the resource implications" this could be construed as guiding the Review in a particular direction.
6. The presentation of the Review by the General Manager to the meeting of the Community Care Committee on 3 August would appear to confirm that the Board will use the review to emphasise their inadequate revenue base. The attached copy minute indicates that the General Manager identifies "significant resource implications" arising from the Review.
7. Miss Lennox has invited Mr R Bunting (Assistant Director of Social Services, Family & Child Care), Eastern Health and Social Services Board to chair the enquiry team. He will be supported by Mr J T Armstrong, Senior Social Services Manager (Omagh & Fermanagh) and FJ 39 Principal Social Worker (Training & Staff Development), both of whom are Western Board staff.
8. The enquiry team has been asked to report to the Acting Director of Social Services, SND 502 by Monday, 24 September 1990.
9. I feel we have failed to convey to the General Manager our real concerns on this issue and you may wish to consider taking some action on this before the work of the Review Team really gets underway on Mr Bunting's return from leave on 28 August 1990.
10. I would be happy to discuss.

K.F. McCoy

K F McCOY
Chief Inspector
Social Services Inspectorate



AREA BOARD HEADQUARTERS

1/8/91

Please use this reference in your reply

Our Ref: B/TJF/gl

Your Ref:

Date 13 February 1991

Mr J Hunter
 Chief Executive
 Department of Health & Social Services
 Dundonald House
 Upper Newtownards Road
 BELFAST
 BT4 3SF

Dear Mr Hunter
 Dear Mr Hunter

Review of Child Care Services

You will by now have had time to study the report on Child Care Services, particularly at Harberton House. The report as I have indicated has been the subject of detailed discussion at 2 recent meetings of the Board and relevant Committees.

The reason I write relates to the discussion at the Community Care Committee meeting in February when members felt that because of the sort of investments that are now becoming necessary and also in relation to the level of funding available to the Western Board compared to other Boards, particularly the Eastern Board, I should write asking if the Department would consider a separate allocation to address this very worrying problem. The Board appreciates the very difficult financial scenario, particularly in the coming year but feels that an issue of this complexity and public concern does need urgent attention.

In our recent discussion, I indicated that I would wish to meet with you to have a detailed exchange on our financial position, particularly as it relates to PARR and equalisation of funding. Maybe within this framework we could have an early meeting.

Yours sincerely

T J Frawley
 T J FRAWLEY
 AREA GENERAL MANAGER

*To see & return to me please.
 I am holding the other papers
 to refer.*

15 Gransha Park, Clooney Road, Londonderry, N.Ireland BT47 1TG
 Telephone L'Derry (0504) 860086 (14 Lines)
 Fax. No. (0504) 860311

IN CONFIDENCE

FROM: DR J J M HARBISON

DATE: 21 DECEMBER 1990

cc: Mr Hunter
Dr Sloan
Mr Kearney
Mr McElfatrick
Mr O'Brien

Dr McCoy

RESIDENTIAL CHILD CARE SERVICES - WESTERN BOARD

1. I refer to your minute of 11 December covering the report from the Bunting Review on the circumstances surrounding incidents of peer child sex abuse which occurred within residential care in the Western Board.
2. I found the report a carefully documented and comprehensive record of the incident which is most valuable. Whilst the report is provided for Western Board, it I believe raises a number of fairly fundamental questions which must be considered at regional level.
3. I retain concern that in a home which has got adequate (in terms of Departmental guidelines) staffing, good physical resources, staff who have experienced in the main appropriate training to sensitise them to difficulties of sexually abused children, good staff relationships and communication, generally good professional practice, reasonable support etc the staff still did not detect the extensive abnormal behaviours over such a considerable length of time. Should this ring alarm bells with us?
4. The report is mainly written from a social services perspective, and some of the multi-disciplinary recommendations and implications, I believe, could have possibly been developed and emphasised.
5. The wider implications of the findings as articulated in para 8.1(ii): sound: an ominous note. ("We must also highlight the significant factor of the numbers of children and adolescents experiencing difficult and complex problems who are now coming into care or contact with a child care programme of care, generally in both statutory and voluntary services."). This more general point is not picked up in the conclusions or recommendations, but must have considerable ramifications for child care provision in all 4 Boards.
6. On the basis of the above points, and particularly the closing lines of section 10(10.34), the wider implications of the conclusion that: "There are clear indications that the present situation represents a high level of risk for both children and staff in the Unit of Management" must be considered. Such a conclusion may not be limited to this Unit of Management and could have implications across NI for current provision and resource considerations.
7. Because of the wider importance of the report, I believe we should meet to discuss its implications and potential further action.


J J M HARBISON

Reference.....

6

From: H. V. McELFATRICK

Date: 7. 1. 91

Mr O'Brien,

RESIDENTIAL CHILD CARE SERVICES : WESTERN BOARD

1. Copies of the comments by Departmental recipients of the Review Team's report have been sent to you and you should also have a copy of my memo to Dr McCoy, which was drawn up in consultation with you.
2. You will note that the Chief Executive has asked if we would take the lead in considering what management follow up is required in respect of the report and its recommendations.
3. I would be grateful if you would consider the responses and ^{advise} ~~consider~~ what management action is appropriate. You should also give thought to what steps we may need to take to alert other Boards to potential risks and to advise of steps which they might take to avert such problems arising elsewhere.
4. You will see from the papers that ⁱⁿ Mr Burke's letter of 10.12.90 to Dr McCoy he proposed certain action e.g. present the report to the Community Care Committee and meet with UOM + Senior Social Services staff in the Foyle CUM to share the report and agree how they should manage the implementation of its recommendations. Dr McCoy in response has advised that he would find it helpful to be kept informed of developments on these fronts. He has had no further communication from Mr Burke since 10.12.90. and the matter needs to be followed up. Could you draft a letter for Dr McCoy's signature to follow up his letter of 11.12.90 enquiring what actions or decisions have been taken by the Comm. Care Committee and the Senior Social Services management personnel. We could then have regard to this in reaching any conclusions about the adequacy of the board's response.
5. You managed to obtain comparative staffing figures for N.W. Belfast Community UOM. Dr McCoy has suggested that it would be helpful to have an indication of the family & child care staffing situation in a range of units of Management to enable a broader picture to be obtained. Can you get this information. Perhaps NPD5 would be able to help.
6. I realise you have quite a lot on over the next 2 weeks. Perhaps you could give me something by 25.1.91?

H. V. McElferrick

Reference

FROM: D. P. O'BRIEN
DATE: 23-1-91

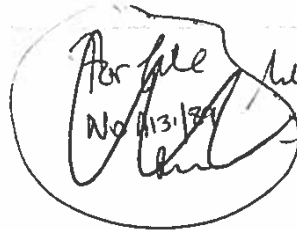
Mr. Mc Elfatrich

Residential Child Care Services - Western Board

1. Your note of 7th January refers. You have asked for advice on what management follow up is required in respect of the report and its recommendations. I have assumed that you are referring to follow up by the Management Executive as the Western Board should be planning to take action on foot of the Review Group's report providing of course that it accepts the recommendations made in Chapter 11. In my view action could be taken at regional level in the following areas:-

- (a) a review of the standard used by the Department and Boards (based on the Castle Priority Report) for minimum staffing levels in children's homes,
- (b) measures to arrest the flow of professionally qualified social workers from residential child care to fieldwork posts,
- (c) the development of guidelines for the deployment of staff engaged in residential child care and a review of their roles and functions,
- (d) a review of manpower guidelines for the personal social services with a view to setting minimum levels of field social workers for family and child care,
- (e) support for training at Board level on assessment / action planning, perhaps on an inter disciplinary basis, but based on the DOH publication 'Protecting Children'.

2. Concern has been expressed by several respondents to Dr. McCoy's minute about the amount of time which elapsed before staff "detected" the episodes of maladaptive behaviour between the children



KC/43/1/91

From: K F McCOY, CHIEF INSPECTOR, SSI

cc: Mr J. Kearney

Date: 25 JANUARY 1991

Copy to Mr. J. Kearney re.

Mr. 29/1

Mr V McElfatrick

CHILDREN AND YOUNG PEOPLE WHO ABUSE OTHER CHILDREN

At Mr Kearney's suggestion I have drawn Mr Burke's attention to the series of consultative discussions to be held during February by this Committee Enquiry. A copy of my letter to Mr Burke is attached.

It occurs to me, however, that apart from Harborton House we have no extensive knowledge about this subject and inspections of homes have not revealed any other similar activities. Perhaps you would consider asking Inspectors to engage Assistant Directors (Child Care) in discussions about their perception of the extent of this problem and existing responses to it. The terms of reference for the Committee of Enquiry might usefully form the agenda for these discussions. A report could then be compiled (by Mr Walker) for the Child Abuse Review Group which meets under the leadership of Mr Kearney.

K F McCOY
Chief Inspector
Social Services Inspectorate

SSI/112/91

From: C C Walker

Date: April 1991

Mr H V McElfatrick

CHILDREN WHO ABUSE CHILDREN

As requested I made enquiries in the Northern and Eastern Boards on this topic and [redacted] has been in contact with Southern Board staff. Altogether I had 3 meetings with Bob Bunting and met the Principal Social Workers in all the units of management in the Northern Board. In spite of the amount of time involved the information available is sketchy and does not really enable any comparisons to be made. Further information that I have been promised has not been sent but if it does arrive I will let you have it.

As a basis to my discussions I used the 5 headings in the terms of reference for NCHs study of the problem of child abuse in England, that is,

a. known incidence;

- b. extent of existing treatment facilities;
- c. the management of the care investigation;
- d. appropriate forms of intervention to change and/or modify behaviour; and
- e. appropriate management processes needed to maximise effective services.

I also tried to look at the problem in 2 contexts,

- 1. Social Services involvement with young abusers in the community, and
- 2. the problem of peer sexual abuse among the residents of children's homes.

I had intended to use the Board's monitoring reports as a means of eliciting information on the incidence of abuse in residential care but this did not prove possible. At my first meeting with Bob Bunting we agreed that it was important to differentiate between "normal" sexual activity between young people and sexual abuse involving 2 young people. The current records of untoward incidents do not necessarily make this distinction. For example 2 16 of 17 year olds found having sexual intercourse in a children's home would, quite properly, be noted as an untoward incident but it might or might not involve abuse of one of those involved by the other.

10014

WESTERN
HEALTH AND SOCIAL SERVICES BOARD

**AREA BOARD HEADQUARTERS**

Please use this reference in your reply

Our Ref: TH.dm
Your Ref:
Date 7 April 1992

Dr K F McCoy
Chief Inspector
DHSS
Dundonald House
Upper Newtownards Road
Belfast
BT4 3SF

Dear Dr ^{Kevin} McCoy

Mr Chambers *RC*

This looks like a minor clerical error.
If you are contact person advise
colleagues in PSC and HSE and prepare
draft reply. *Kevin McCoy*

10/14

**REPORT ON THE CIRCUMSTANCES SURROUNDING INCIDENTS OF PEER CHILD
ABUSE AT HARBERTON CHILDREN'S HOME**

Thank you for your letter of 20 January 1992. I indicated in my letter of 27 February 1991 of the steps taken to increase the staffing levels at Harberton House and the additional resources provided for foster care services and Nazareth House. The staffing level at Coneywarren Children's Home was also increased.

I would now wish to advise you that the Consultant Psychiatrist post for children and adolescents is currently advertised.

I would point out again as I did on the 27 February 1991 that the Board experienced difficulty in addressing all the recommendations made by the review group because of the competing demand for resources.

Since I wrote to you in February, staff both at Board Headquarters and Unit of Management have examined the report in detail again with view to taking follow up action on the recommendations made. The following is the position in relation to the recommendations.

Recommendation 11.1

The professionalisation of Family and Child Care Services which will ensure that all social work staff either working in a fieldwork residential or day care setting will be professionally qualified and be paid to similar salaries.

Mr Chambers
*AB**Mr G. Bnew*

Mr D Burke
Director of Social Care
Western Health & Social Services Board
15 Gransha Park
Clooney Road
LONDONDERRY
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15 May 1992

Dear Mr Burke

**REPORT ON THE CIRCUMSTANCES SURROUNDING INCIDENTS OF PEER CHILD ABUSE
AT HARBERTON CHILDREN'S HOME**

Thank you for your letter of 7 April 1992 detailing the steps taken by the Board to respond to matters identified in the Report of the Circumstances Surroundings Incidents of Peer Child Abuse at Harborton Children's Home (December 1990). The Board is to be commended for the comprehensive range of measures introduced following this most thorough scrutiny of its services. It is noted that it has not been possible to implement all of the recommendations made by the Review Group because of competing demands for resources.

May I identify a few matters of continuing concern, of which I am no doubt you are all too well aware:-

- a. the proportion of unqualified staff employed at Harborton Children's Home was low and at the time of the last Inspection (February 1991). I understand that the Board continues to experience difficulty in recruiting qualified staff and that it has been necessary to consider appointing unqualified staff to permanent posts;
- b. The Review Group recommended the appointment of 4 additional team leaders and 8 social workers.

Your letter seems to indicate that by 1995 only 3 additional social work posts will have been created;

- c. You indicate that the span of control of the Assistant Principal Social Worker is unchanged and that there is need to appoint a Senior Social Worker to relieve this officer of some of the day-care aspects of his post, but this allocation of resources has to be judged against other priorities.

I am sure that you will share the view that team leaders in residential care need high quality support and you may wish to consider whether the proposed re-structuring of children's homes will create increased demands for management support and professional consultation. If this is likely to be the case, perhaps greater priority should be given to reducing the span of responsibility of the APSW sooner rather than later.

I am grateful to you for providing me with this comprehensive account of progress to date.

Yours sincerely

K F McCOY
Chief Inspector
Social Services Inspectorate

Hidden cc: Mr Chambers