

Ms. Patricia Rickard-Clarke
Independent Chairperson
Safeguarding Ireland
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Email To: patricia@safeguardingireland.org

7th October 2022

Dear Ms. Rickard-Clarke,

I am writing to you in your capacity as Safeguarding Ireland Chair and I would firstly like to acknowledge and commend the important work that Safeguarding Ireland has been engaged in over the last number of years in relation to promoting the rights and protection of adults at risk of abuse.

That said, I would like to draw your attention to concerns and queries recently raised by members of the Irish Association of Social Workers (IASW) in relation to what is perceived as an inconsistent response from Safeguarding Ireland regarding specific actions (*and* inaction) and incidents, as well as some media coverage of adult safeguarding issues. Our queries can be broadly divided into three themes, which I explain in greater detail below:

- 1) Queries re: Safeguarding Ireland's letter to Government Ministers Stephen Donnelly TD and Anne Rabbitte on 22nd July regarding the Director of Nursing in Adult Safeguarding Position, in response to media coverage on the role.
- 2) Queries re: Safeguarding Ireland's responses to other media coverage which also raised safeguarding issues relevant to its brief.
- 3) Queries re: Safeguarding Ireland structures and processes around consultation, decision making, tendering, and learning from safeguarding social work practitioners and people with lived experience.

1. Director of Nursing Position:

Background: Social work is the acknowledged lead profession in adult safeguarding with Health and Social Care Professionals forming the second largest clinical workforce in the HSE. Just as we have sought and welcomed multidisciplinary professional roles in child safeguarding in Tusla, IASW has supported multidisciplinary strategic and operational roles in adult safeguarding. **IASW has consistently advocated that all new roles are open to nursing and all other equally qualified Health and Social Care Professionals (HSCPS), as is common and routine practice in the UK and other jurisdictions, to ensure diverse and holistic perspectives exist in both safeguarding management and frontline services.** This approach also reflects key learnings from the Brandon Report, learnings which have direct relevance for all health and social care services and the delivery of optimum safeguarding for adults at risk. We also believe the existing safeguarding workforce should have an opportunity to identify gaps in expertise and knowledge in current service delivery which could be supported by new roles.

As you are aware, following the decision of the HSE to offer **new lead adult safeguarding posts**

to the nursing profession only, the IASW wrote to express our concerns to Minister of State Anne Rabbitte TD, concerns which were covered in <https://www.rte.ie/news/2022/0718/1310950-hse-safeguarding-job/>.

I am aware that Safeguarding Ireland subsequently wrote to Ministers Donnelly and Rabbitte citing this article and stating: *'I am writing to you following recent media coverage in relation to proposed safeguarding posts within the HSE... if the media report is accurate, there appears to be some concerns regarding safeguarding appointments.'* The letter goes on to endorse and support the new nurse-only posts, makes calls for similar focus for the 'allied health professional sector' and calls for financial and legal expertise within the HSE's National Safeguarding Office. This letter signifies a significant advocacy position by Safeguarding Ireland in relation to the specifics of workforce planning for adult safeguarding in Ireland. The letter made no reference to IASW calls for an adult safeguarding lead open to all expert professions, instead stating *'safeguarding clearly cannot just be left in the domain of the social work profession.'*

It is important to note that other organisations such as Inclusion Ireland, the Irish Association of Speech and Language Therapists, Forsa Trade Union, and Minister Rabbitte herself have shared IASW concerns and requested that the new safeguarding roles were **opened to nursing and all other equally qualified Health and Social Care Professionals**. The HSE however declined this request, citing the support of Safeguarding Ireland in its response to Minister Rabbitte. This has understandably raised significant questions among concerned stakeholders, including members of the wider Health and Social Care Professional Alliance, with whom we are sharing our concerns in this regard and requesting wider HSCP consideration of the matter.

The HSE has opted to fund nurse only safeguarding roles and appoint a Director of Nursing role, with a plan to recruit 9 more safeguarding posts (**again, which will only be offered to nurses**) around the country. The HSE has repeatedly referenced its plan to solely fund nurse roles, without any reference to the need for wider HSCP safeguarding roles. This means that nursing will provide and manage the majority of health and social care services (often managing HSCPs) **and** will now carry responsibility for the safeguarding of those services. It is our position that service delivery and safeguarding delivered through a single professional lens is not a positive development in adult safeguarding. This significantly reduces the level of holistic safeguarding expertise available at strategic and operational level to adults at risk, to social workers and to nurses themselves. It is unclear and of considerable concern why lead adult safeguarding roles commonly used elsewhere and previously cited by Safeguarding Ireland in various forums, are not now supported by the body?

Concerns

IASW fully respect the right of Safeguarding Ireland to support HSE policy decisions on the Director of Nursing position, however our members are concerned about the lack of engagement and consideration of alternative views. We are disappointed that Safeguarding Ireland, an independent body, has not consulted or sought to clarify and understand the genuine professional concerns of social work on this issue. I attach a copy of our letter to Minister Anne Rabbitte, outlining those evidence-informed concerns from frontline social work practitioners.

In addition, the advocacy letter sent by Safeguarding Ireland to Minister Rabbitte was not made available via website or press release. It is evident that the HSE were made aware of Safeguarding Ireland's position and advocacy letter, as they cited it, however other stakeholders were not made aware of this intervention. As the HSE clearly places considerable and appropriate weight upon the views of Safeguarding Ireland, we believe it is important that all stakeholders have easy access to relevant decisions and that there is transparency around the processes which inform that decision making by such independent bodies.

Important questions arise about the transparency and consultation that takes place when Safeguarding Ireland reach positions, which have significant implications for safeguarding workforce planning. IASW queries include:

- Given its independent remit and emphasis on interagency collaboration, did Safeguarding Ireland consult with any concerned stakeholder outside of its own Board members and HSE staff?
- We would also like to clarify whether the letter and its content was discussed and agreed with Safeguarding Ireland's Advisory Body or other structures within Safeguarding Ireland itself?
- Upon reflection, as an independent body, mainly funded by the HSE, would it have been appropriate and helpful for Safeguarding Ireland, to engage or consult with IASW to better understand our concerns before or even after taking this position?
- We remain unclear as to why Safeguarding Ireland is not publicly supportive of multidisciplinary adult safeguarding roles as recommended by IASW and others, roles which would be open to all qualified health and social care professionals and are commonplace elsewhere?
- We believe that interagency collaboration and transparency cannot simply be a recommendation of Safeguarding Ireland, it must also be led and modelled by it.

2. Queries re: Safeguarding Ireland's response to other media articles which raised concerns relevant to its brief.

Background: While Safeguarding Ireland proactively wrote to Government to support the HSE policy in reference to the strategic nurse only role which will manage nine new nurse-only operational safeguarding roles, it is unclear if Safeguarding Ireland has written to relevant Government Ministers taking a position on other equally relevant strategic and operational safeguarding issues discussed in the media.

IASW and Social Work concerns have repeatedly featured in the media highlighting serious concerns about safeguarding culture and operations in the HSE, concerns which align with the stated function of Safeguarding Ireland, i.e.: *'Safeguarding Ireland was established to promote safeguarding of adults who may be vulnerable, protect them from all forms of abuse by persons, organisations and institutions and develop a national plan for promoting their welfare.'* A further stated aim of Safeguarding Ireland is: *'to inform and influence Government policy and legislation to safeguard the rights of people who may be vulnerable.'*

Given the above, it is reasonable to assume it would have pertinent for Safeguarding Ireland to write to Government Ministers, Departments, and agencies, stating a position on:

- Preventable drop in safeguarding referrals to the HSE during Covid.
<https://www.rte.ie/news/health/2021/1028/1256538-hse-safeguarding-drop-reports/>
- The events in the Brandon case in HSE area CHO1 in which decades long known sexual abuse of multiple residents occurred and safeguarding advice from safeguarding teams were ignored by HSE management, leaving adults at risk of ongoing abuse.
<https://www.irishtimes.com/news/ireland/irish-news/devastating-sexual-abuse-of-18-residents-in-hse-run-centre-in-donegal-1.4701004>
- The subsequent concerns by HIQA that the HSE was not fit to lead disability services in CHO1 <https://www.rte.ie/news/2022/0215/1280849-hse-hiqa-northwest/>
- Ongoing concerns about HSE strategic failure to address operational backlogs (in their thousands) adequately resource safeguarding social work teams.
<https://www.medicalindependent.ie/in-the-news/news-features/between-the-lines-of-adult-safeguarding-in-the-hse/>
- Report outlining concerning safeguarding culture:
<https://www.medicalindependent.ie/in-the-news/breaking-news/hse-to-address-under-resourcing/>

In the context of a number of the above articles, IASW raised concerns about unsafe safeguarding culture and addressed HSE failings. We appreciate that there are many tools of advocacy open to Safeguarding Ireland but given the decision of Safeguarding Ireland to write to Government supporting one role, it is reasonable to ask why the same decision was not taken in terms of other recruitment proposals (i.e., to fill empty social work posts). Social Work and indeed adults at risk would have welcomed Safeguarding Ireland's intervention, advocacy, and support to Government on these issues, which are highly relevant to the promotion of safeguarding of adults and are clearly issues which align with the brief of Safeguarding Ireland. In our view, as an independent body, Safeguarding Ireland should be consistent in its approach and pay equal attention to all strategic and operational matters relating to adult safeguarding. It is important that as an independent body, Safeguarding Ireland comments when it disagrees with HSE policy, as well as when it agrees with it.

3. An Independent Body: Meaningful Consultation, Participation and Representation

Background: Safeguarding Ireland has the benefit of a range of expertise, including those of a senior nurse academic as well as financial and legal experts on the Board, however the Board lacks the expertise of Social Work, any HSCP or a Person with Lived Experience of Safeguarding, nor is there, with the exception of IASW, a representative from a HSCP professional body on the Safeguarding Ireland Advisory committee. We recognise the importance of engagement with various other organisations, including the HSE safeguarding teams, however we believe the Board expertise would be strengthened by additional perspectives outside of the HSE to avoid perceived or indeed actual bias in decision making, particularly in regard to operational safeguarding matters.

When taking a position, it may benefit Safeguarding Ireland to consider missing voices and perspectives 'in the room.' We believe that transparency is required about how, why, and when Safeguarding Ireland takes positions as well as clarification on the rationale for those, as well as to why Safeguarding Ireland writes to and seeks to influence Government on some issues but not others.

We believe it is important as an independent body, that evidence is available of transparent processes in relation to decision making, around consultation and engagement with different perspectives. A transparent process for the tendering and funding of research is equally important, with easily available public information on previous and current funded projects.

IASW Reflections and Requests

- We would urge you to give consideration as to whether the current composition of the Safeguarding Ireland Board, which lacks a representative from the lead profession in adult safeguarding, a representative of Health and Social Care Professions or a person with lived experience of safeguarding, limits the scope of Safeguarding Ireland to consider and engage with diverse perspectives?
- We believe as an independent body, a limited company and registered charity, in receipt of public funding, all correspondence to Government by Safeguarding Ireland should be easily accessible to the general public and interested stakeholders.
- In addition, and in line with best practice, information about the funding of research by Safeguarding Ireland should be easily accessible to all interested stakeholders and should be subject to an open tender process. Emphasis should be given to commissioning research into the experiences of delivering and receiving safeguarding services in an Irish context, given the dearth of research in this area and overreliance on similar research from other jurisdictions.

While we have considerable concerns, as outlined above, we reiterate that Safeguarding Ireland has an important and valuable role to play. Our overarching goal is that organisations such as Safeguarding Ireland maximise their positive contribution, in cooperation with all stakeholders, in the interest of adult safeguarding in Ireland. As things stand, and particularly as a consequence of the fallout from the issues outlined above, we believe that Safeguarding Ireland's contribution is not optimised, opportunities to improve matters are being missed, policy and operational missteps are resulting and that adult safeguarding in Ireland is all the poorer for that. We do appreciate that Safeguarding Ireland may have a very different perspective on the issues raised in this letter and we would welcome any opportunity to meet to discuss further.

Yours faithfully,



Vivian Geiran
IASW Chairman
SW000319

CC; C/O Paschal Moynihan, Safeguarding Ireland Company Secretary on behalf of the Safeguarding Ireland Board Members, Unit 23, Block B, Maynooth Business Campus, Maynooth, Co. Kildare. paschal@safeguardingireland.org

Minister Anne Rabbitte, of Statement at the Department of Children, Equality, Disability, Integration and Youth and at the Department of Health. Block 1, Miesian Plaza, 50 – 58 Lower Baggot Street, D02 XW14 anne.rabbitte@oireachtas.ie minister_rabbitte@health.gov.ie

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