



HSE Children **First**

GOVERNANCE STRUCTURES

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1. Introduction

The [Children First Act 2015](#) (the Act), which was signed into law on 19 November 2015 and fully commenced on the 11th December 2017, puts elements of Children First: National Guidance for the Protection and Welfare of Children on a statutory footing. The Act forms part of a suite of child protection legislation which includes the National Vetting Bureau (Children and Vulnerable Persons) Acts, 2012-2016 and the Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012.

The Act provides for a number of key child protection measures, as follows:

- A requirement on organisations providing services to children to keep children safe from harm and to produce a Child Safeguarding Statement;
- A requirement on defined categories of persons (mandated persons) to report child protection concerns over a defined threshold to the Child and Family Agency;
- A requirement on mandated persons to assist the Child and Family Agency in the assessment of a child protection risk, if requested to do so by the Agency;
- Putting the Children First Inter-Departmental Implementation Group on a statutory footing.

The legislation operates in tandem with the Children First: National Guidance for the Protection and Welfare of Children 2017, which outlines the non-statutory obligations which will continue to operate administratively for all sectors of society.

The HSE is the single largest provider of health services to children in the State. There is a vast range and number of services provided in public and private health facilities by and on behalf of the HSE.

The size, complexity and organisational structure of the service delivery model creates significant challenges for the HSE in implementing and monitoring compliance with Children First policy and related child safeguarding legislation and, as such, a strong and active governance framework is essential.

A range of governance structures were put in place to support the implementation of Children First up to the full commencement of the Children First Act 2015 on the 11th of December 2017. This included a Health Sector Children First Oversight Group, chaired by the Department of Health, with cascading governance committees across the HSE.

The Health Sector Children First Oversight Group completed its terms of reference and was disbanded in mid-2018. As the HSE moves beyond initial implementation of key Children First legislative and policy requirements, there is a continued need to develop on the quality of processes and culture of managing Children First across our services. The continued development of efficient and effective systems to support compliance with Children First is essential in order to ensure that children are protected from the risk of harm. Given the current period of HSE transformation, as we move toward the implementation of Sláinte Care, significant staff changes and turnover, the HSE Children First Governance Structures have been amended to reflect how best to support and monitor the strategic and operational needs of HSE and HSE funded and contracted services in delivering on our responsibilities and commitment to keeping children safe from harm.

2. HSE Children First National Office

The National Director for Acute Hospitals Strategy and Planning is the appointed National Director with overall responsibility for implementation of Children First throughout HSE and HSE funded and contracted services. The HSE National Children First Lead reports to the National Director and is the HSE representative on the Children First Inter-Departmental Group, established under the Act.

The HSE Children First National Office, led by the HSE National Children First Lead, was established in order to support and monitor consistent implementation of, and compliance with, the Children First Act 2015 and its associated Children First National Guidance 2017, across HSE and HSE funded and contracted services.

Mission Statement

The HSE Children First National Office will support HSE and HSE funded and contracted services to promote and cultivate child-centred practice and to safeguard children through the effective implementation of Children First.

Vision

By developing and delivering effective and innovative resources and partnerships, the HSE Children First National Office will enhance organisational and individual skills, behaviours and effectiveness across the HSE and HSE funded and contracted services, to support the protection and welfare of children and young people.

Responsibilities

The Children First National Office will support the health and social care services of the HSE to meet their responsibilities under Children First legislation and Children First National Guidance 2017. This will be achieved through the coordination of a national programme that will ensure that Service Sectors and individual units of service as required:

- Provide a child centred focus to service development and delivery
- Put in place the organisational infrastructure required to support and implement the requirements of Children First
- Under Children First legislation risk assess services against Children First Policy and have Child Safety Statements in place
- Have in place Policy and Reporting Procedures under Children First 2017 and Children First legislation
- Implement training strategies to ensure staff members receive a level of child protection training under Children First commensurate with their level of responsibility
- Have safe recruitment practices
- Have codes of conduct for staff members
- Have communication strategies that ensure that staff members, patients and service users are aware of child protection policy and procedures
- Have in place adequate procedures for managing allegations against staff members

- Have in place quality assurance systems that provide analysis and data to assist service improvement in respect of meeting the requirements of Children First

Values

While working within the HSE Values of **Care, Compassion, Trust** and **Learning** the work of the Children First National Office is also underpinned by the following values:

- ✓ **Child-Centred** practice to ensure that children's welfare and safety is at the heart of all decision making;
- ✓ **Integrity** in planning, communicating and making decisions that affect all those working across our services;
- ✓ **Quality** delivery of supports that enhance services for the organisation, its staff and children availing of HSE and HSE funded and contracted services;
- ✓ **Respect** for the views of others and complexities in service delivery, working to support learning and integration of insights provided;
- ✓ **Inclusive** and consultative where possible, using the governance structures in place as a conduit to do so;
- ✓ **Accountable** to our responsibilities and the delivery of our Business Plan.

HSE Children First National Office Business Planning

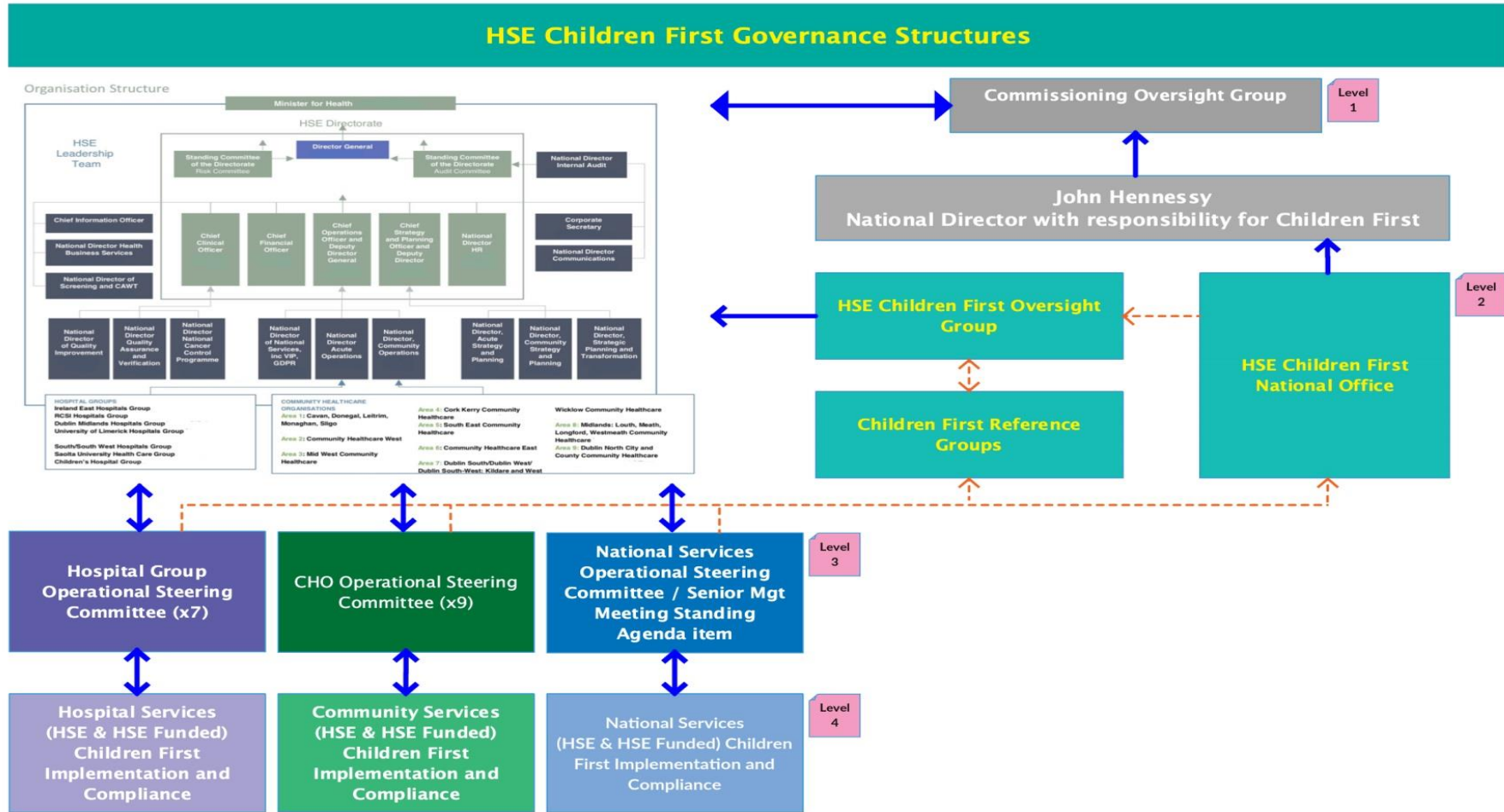
The HSE Children First National Office will work within a project planning approach aligned to an annual business plan that will be dynamic and flexible, where possible, to the needs of the organisation. The business plan will be informed by key legislative and policy requirements, HSE Leadership requirements and operational requirements informed through the Children First Governance reporting structures. The National Children First Oversight Group will support the prioritisation and progress of implementation of the business plan.

3. HSE Children First Governance Structures - Overview

The governance structures will operate on a number of levels. Operational implementation of Children First remains within the responsibilities of the overall HSE organisational and governance structures. These direct Children First Governance Structures have however been outlined to support the Children First National Office from a strategic planning; monitoring; support and development perspective.

The Children First National Oversight Group provides sector specific leadership and guidance to the Children First National Office in relation to the requirements across the HSE system to support effective and consistent operation of Children First and child protection policies and procedures. The structures at Steering Committee Level (Level 3) provide for a consistent national approach to support compliance with obligations under Children First and clear communication structures for reporting on progress and issues arising.

Organogram - HSE Children First Governance Structures



Level 1 - HSE Leadership- Commissioning Oversight Group

With lead responsibility for the operational and performance management of HSE functions, the HSE Commissioning Oversight Group will oversee HSE Children First performance and compliance. The Children First National Office, in conjunction with the Children First National Oversight Group, reports on progress to the HSE Commissioning Oversight Group.

Level 2 - HSE Children First National Oversight Group

The HSE Children First Oversight Group is chaired by the HSE Children First National Lead. Its membership is made up of senior representatives across the following HSE sectors:

- ✓ Primary Care
- ✓ Disabilities and Older Persons
- ✓ Mental Health
- ✓ Acute Hospitals
- ✓ National Ambulance Service
- ✓ National Counselling Service

Representatives from the following divisions have also been nominated to attend selected Oversight Committee Meetings, at the request of the Chair, where particular agenda items may require input and support from these corporate functions.

- ✓ ICT
- ✓ GDPR
- ✓ Human Resources
- ✓ Health Business Services
- ✓ Planning and Transformation
- ✓ Communications
- ✓ Quality Assurance and Verification
- ✓ Project Management Office

As this is a HSE Oversight Committee, Tusla do not have a role of responsibility to require membership to the Group, however, as close liaison with Tusla is essential to provide continued support and consistent messaging across the system, a senior member of Tusla will be invited to attend oversight meetings, where particular agenda items may require their input.

Terms of Reference

- Monitor achievement of HSE's vision for the safety and protection of all children accessing, and/or whose parents access, health and social care, in line with the Corporate HSE Child Safeguarding Statement;
- Provide strategic direction for, and oversight of, the Children First National Office business plan;
- Approve significant work items of the Children First National Office before they are submitted to the Leadership Team for approval;
- Respond to recommendations made by Tusla and the Children First Inter-departmental Group (IDG);
- Make recommendations to the HSE Commissioning Oversight Group on all aspects of Children First, including required structures and identification of resources needed to support compliance;
- Ensure appropriate input of Children First requirements into the HSE National Service Plan and Operational Plans;
- Establish effective systems to monitor Children First compliance, risks and performance assurance across the Health Service Executive and funded and contracted services;
- Provide reports to the HSE Commissioner Oversight Group on compliance with Children First.

Level 2a – (Optional)- HSE Children First Sector Reference Groups

Members of the HSE Children First Oversight Group also provide updates to their own operational and/or strategic line management structure. They have, where they deemed appropriate, established and are the Chair of a Children First Reference Group for their respective sector of responsibility.

Membership of the Reference Groups is to be made up of the representative for the sector on each of the relevant Operational Steering Committee (level 3 below) and any other nominee the Chair of the group deems appropriate*.

The Reference Groups will act as a channel of information and advice to the Chair, in relation to updates on progress; priority issues; risks and proposals across their respective sector for the on-going implementation of, and compliance with, Children First.

* For example, a Children First Disability Services Reference Group would be chaired by the Oversight Group member for disabilities and older persons and have a membership including the nine (9) operational steering group representatives for disability services (one from each CHO Operational Steering Committee) plus any other nominee the group chair deems appropriate.

Terms of Reference

- Support the Chair in relation to monitoring of Children First compliance and performance assurance across the HSE and HSE funded and contracted services for their respective sector;
- Provide feedback (through the Chair) to the National Children First Oversight Committee on issues arising for their respective areas;
- Support communication and consultation processes of the Children First National Office to ensure effective development and implementation of Children First national policy, procedures, guidance and training resources across HSE and HSE funded and contracted services;
- Identify and initiate the development of key policies and procedures required for their respective areas, in line with national policy, procedures and guidance, as necessary;
- Advise (through the Chair), the respective National Director and Management Team for their area, regarding Children First and the operation of Children First.
- Share best practice initiatives and proposals.

Level 3 - HSE Children First Operational Steering Committees

Community Healthcare Organisation (CHO) Chief Officer, Hospital Group/Hospital (HG) Chief Executive Officer and National Manager has operational responsibility for compliance with Children First, across HSE; HSE Funded or Contracted services, in his/her designated area of responsibility.

Children First Operational Steering Committees are established at CHO and HG level.

National services, such as the National Ambulance Service and National Counselling Services also have operational steering structures in place, either through a dedicated committee or standing agenda items and working groups as part of senior management oversight structures.

The Operational Steering Committees have responsibility for preparing and steering the delivery of local Children First Implementation and Compliance Plans that provide on-going oversight of Children First implementation and compliance requirements within national guidance, relevant legislation, HSE policy and effective management of staff awareness and training.

Local Children First Implementation and Compliance Plans will be monitored by respective Chief Officers, Hospital Chief Executive Officers and National Managers. Implementation of and compliance with Children First will form part of the Performance Agreements and will be included in the HSE's Performance Assurance Process, in due course. Compliance requirements and obligations on funded services and contractors will form part of the relevant Service Level Arrangements, Grant Aid Agreements, For Profit Contracts or PCRS Contracts, in the provision of a service to or on behalf of the HSE.

The Operational Steering Groups will meet on a quarterly basis. They will be guided and supported by a Children First National Office Training and Development Officer, who will attend the meetings. The Children First Training and Development Officer will assist the Operational Steering Committee to prepare and submit, on a quarterly basis, update reports to the HSE Children First Oversight Group and relevant Chief Officer, Chief Executive Officer or National Manager. These update reports will be based on a standard template (Appendix 1) and will include a qualitative summary of specific issues arising across the service area and/or across the specific sectors within the service area. Risks identified, in relation to the implementation of Children First, will also be included so that there is national oversight of risks. The reports will be used by the National Children First Oversight Group (and, where relevant, its associated Reference Groups), to monitor and advise on overall national performance in relation to Children First and to highlight key issues arising that may require strategic input and support from the National Children First Office.

Terms of Reference

- Develop a local Children First Implementation and Compliance Plan to support the development and monitoring of compliance for HSE and HSE funded and contracted services in the service area of responsibility;
- Coordinate and Confirm the implementation of Child Safeguarding Risks Assessments and Safeguarding Statements, as required and in conjunction with the local Quality Assurance Lead;

- Adopt and communicate national policy, procedures and guidance with additions for local service specifics;
- Communicate staff responsibilities under Children First and update regularly on any developments;
- Support the Children First Training and Development Officer in the coordination of delivery of training for relevant staff;
- Support communication and consultation processes of the Children First National Office to ensure effective development and implementation of Children First national policy, procedures, guidance and training resources across HSE and HSE funded and contracted services;
- Submit, on a quarterly basis, update reports to the HSE Children First Oversight Group and relevant CHO Chief Officer, HG Chief Executive Officer or National Service Manager.
- Deliver on any other localised terms of reference and additional areas of work assigned by the Chief Officer, Chief Executive Officer or National Service Manager;
- Report to the Chief Officer, Chief Executive Officer or National Service Manager.

Membership

Membership of Children First Operational Steering Committees is at the discretion of Chief Officers, Hospital Chief Executive Officers and relevant Service Managers.

Membership should consist of representation from all relevant sectors across the service area. Community Healthcare Organisations must include at least one representative from Primary Care; Mental Health and Disabilities.

Members of the Operational Steering Group should be made available to attend Children First Reference Group (level 2a above) for their respective sector of responsibility, should one such group be established by the relevant member of the Children First National Oversight Group.

It is recommended that the membership of these groups is set at a Senior Management/Head of Service level and formally nominated to provide for accountability, autonomy and authority to ensure effective implementation of the Project Plans.

Operational Steering Committees Established

Community Healthcare Organisations	
1	Cavan, Donegal, Leitrim, Monaghan, Sligo
2	Community Healthcare West
3	Mid-West Community Healthcare
4	Cork Kerry Community Healthcare
5	South East Community Healthcare
6	Community Healthcare East
7	Dublin South/Dublin West/Dublin South-West: Kildare and West Wicklow Community Healthcare
8	Midlands: Louth, Meath, Longford, Westmeath Community Healthcare

9	Dublin North City and County Community Healthcare
Hospital Groups	
1	Ireland East
2	RCSI
3	Dublin Midlands
4	University of Limerick
5	South/South West
6	Saolta
7	Children's
National Services	
1	National Ambulance Service
2	National Counselling Service

Level 4 – Services (HSE and HSE Funded and Contracted) Children First Implementation and Compliance

All HSE and HSE funded and contracted services, national managers and line managers have a responsibility to ensure that Children First is implemented in their services and that the service is compliant with the Children First legislative and HSE policy requirements.

Level 4 of the Children First Governance Structures represents the delivery of all services and the varied structures that may be put in place to support the oversight of implementation of Children First in that service.

These structures may consist of anything from the establishment of a service children first committee; subgroup of a management committee; service children first lead/coordinator, to a minimum of Children First oversight being a standing agenda for all management and service meetings. The type of structure to be put in place will be dependent on the nature and size of the service provided and is at the discretion of management in that service, with the approval of Senior Manager with overall responsibility.

All services will have a responsibility to respond to and implement any requirements as set out by their respective Operational Steering Committees.

Note: The Governance Structures as set out does not preclude direct communication between a Community Healthcare Organisation Chief Officer, Hospital Chief Executive Officer or National Service Manager with the National Director with responsibility for Children First and/or the HSE National Children First.



Insert Service Area Here

Children First Operational Steering Committee (OSC)
Compliance Update and Key Issues Arising Report



APPENDIX 1- Children First Operational Steering Committee Update Report Template

Purpose of report:

As part of the HSE Children First Governance Structures, the Children First Training and Development Officer will assist the Operational Steering Committee to prepare and submit, on a quarterly basis, update reports to the HSE Children First Oversight Group and relevant Chief Officer, Chief Executive Officer or National Manager. These update reports are based on the standard template below and include a qualitative summary of specific issues arising across the service area and/or across the specific sectors within the service area. Risks identified, in relation to the implementation of Children First are also included, so that there is national oversight of risks. The reports will be used by the National Children First Oversight Group (and, where relevant, its associated Reference Groups), to monitor and advise on overall national performance in relation to Children First and to highlight key issues arising that may require strategic input and support from the National Children First Office.

Update Report to be prepared by the Children First Training and Development Officer, on a quarterly basis (schedule provided), and approved and signed by the Chair/Children First Lead of the Operational Steering Group before submission.

Complete all sections; enter N/A if no issues arising. Please keep updates brief but clear in detail.

Operational Steering Committee Chair	
Children First Training and Development Officer	
Date of Report:	
Reporting Period:	



Insert Service Area Here
Children First Operational Steering Committee (OSC)
Compliance Update and Key Issues Arising Report



Update on Progress	Issues arising / Recommendations
Child Safeguarding Risk Assessments and Statements – cascade through to all relevant services (list of relevant services and procedure for appointing a relevant persons)	
Mandated Persons (e.g. Procedure for list and informing mandated persons)	
Communication of Children First Key messages e.g. HSE CPW Policy	
Children First Record Management and Activity Data	
Oversight of Mandatory ‘An Introduction to Children First’ for all staff	
Children First Training and Supports (coordination and uptake – line manager briefings, cpw policy briefings, mandated persons training, other)	
Sector specific updates and issues (eg; Hospital, Mental Health, Social Care, Health & Wellbeing; Primary Care...)	



Insert Service Area Here
Children First Operational Steering Committee (OSC)
Compliance Update and Key Issues Arising Report



Funded and contracted services (input provided, issues arising)	
Tusla engagement/issues arising (positive engagement and state if anecdotal or strong evidence of issues)	
Issues or Risks arising (issue/risk identified, mitigation/action to be taken, included on risk register y/n)	
Any Other Comments	

Signed:	Signed:
Children First Training and Development Officer	Operational Steering Committee Chair