



United Nations
Educational, Scientific and
Cultural Organization



UNESCO Chair in
Children, Youth and Civic Engagement
Ireland
CHILD AND FAMILY RESEARCH CENTRE



NUI Galway
OÉ Gaillimh



Institute for
Lifecourse and Society

A study of Tusla - Child and Family Agency's actions and decision-making process following An Garda Síochána's application of Section 12 of the Child Care Act 1991

EXECUTIVE SUMMARY



TUSLA

An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

UNESCO Child and Family Research Centre
NUI Galway

March 2020

Dr Carmel Devaney
Dr Rosemary Crosse
Dr Leonor Rodriguez,
and Dr Charlotte Silke

The authors of this report are:

Dr Carmel Devaney, Dr Rosemary Crosse, Dr Leonor Rodriguez, and Dr Charlotte Silke

Any citation of this report should use the following reference:

Devaney, C., Crosse, R., Rodriguez, L., and Silke, C. (2020). *A study of Tusla - Child and Family Agency's actions and decision-making process following An Garda Síochána's application of Section 12 of the Child Care Act 1991*. Galway: UNESCO Child and Family Research Centre, National University of Ireland Galway.

ISBN: 978-1-905861-75-0

Copyright © UNESCO Child and Family Research Centre (UCFRC), 2020

For further information, please contact:

UNESCO Child and Family Research Centre

Institute for Lifecourse and Society

National University of Ireland Galway

Galway, Ireland

Tel: +353 91 495398

Email: cfrc@nuigalway.ie

Web: www.nuigalway.ie/childandfamilyresearch

The authors are responsible for the choice and presentation of views expressed in this report and for opinions expressed herein, which are not necessarily those of UNESCO and do not commit the Organisation.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without the prior permission in writing of the copyright holder.

For rights of translation or reproduction, applications should be made to the UNESCO Child and Family Research Centre, Institute for Lifecourse and Society, Upper Newcastle Road, NUI Galway, Ireland.

DISCLAIMER

Although the authors and publisher have made every effort to ensure that the information in this report was correct at press time, they do not assume and hereby disclaim any liability to any party for any loss, damage, or disruption caused by errors or omissions, whether such errors or omissions result from negligence, accident, or any other cause.

About the UNESCO Child and Family Research Centre

The UNESCO Child and Family Research Centre (UCFRC) is part of the Institute for Lifecourse and Society at the National University of Ireland (NUI) Galway. It was founded in 2007 through support from The Atlantic Philanthropies Ireland and the Health Service Executive (HSE), with a base in the School of Political Science and Sociology. The mission of the UCFRC is to help create the conditions for excellent policies, services, and practices that improve the lives of children, youth, and families through research, education, and service development. The UCFRC has an extensive network of relationships and research collaborations internationally and is widely recognised for its core expertise in the areas of Family Support and Youth Development.

Contact Details:

UNESCO Child and Family Research Centre,
Institute for Lifecourse and Society,
Upper Newcastle Road,
National University of Ireland Galway,
Ireland.

T: +353 91 495398

E: cfrc@nuigalway.ie

W: www.nuigalway.ie/childandfamilyresearch

Twitter: @UNESCO_CFRC

Facebook: [ucfrc.nuig](https://www.facebook.com/ucfrc.nuig)

Introduction

Tusla - Child and Family Agency (hereafter called Tusla) and An Garda Síochána are the key agencies empowered by law to carry out assessments and investigations, respectively, of suspected cases of child abuse and neglect in Ireland. Each agency manages its particular area of responsibility, and their joint efforts are designed to ensure that the protection and welfare of children receive priority attention. Joint working between Tusla and An Garda Síochána forms an integral part of the child protection and welfare service.

The Child Care Act 1991 is the main legislation in Ireland pertaining to the protection and welfare of children. Under this Act, Tusla has a statutory responsibility to promote the welfare of children who are not receiving adequate care and protection (DCYA, 2017).

The function of An Garda Síochána concerning child abuse and neglect is to preserve life, vindicate the human rights of each individual, and prevent, investigate, and detect criminal offences. An Garda Síochána have the power to remove a child¹ to safety under Section 12 (S12) of the Child Care Act 1991, as amended. Before invoking S12, An Garda Síochána must have reasonable grounds to believe that there is an immediate

and serious risk to the health or welfare of a child or young person under 18, and that it would not be sufficient for the protection of the child from such immediate and serious risk to await the making of an application for an Emergency Care Order (ECO) by Tusla under Section 13 of the Child Care Act. In addition, An Garda Síochána must, as soon as possible, deliver the child or young person under 18 into the custody of Tusla. Joint working between Tusla and An Garda Síochána forms an integral part of the child protection and welfare service. An Garda Síochána and Tusla adhere to a protocol for joint working which details how they should cooperate and interact with each other around child welfare concerns.

1 'Child', 'children', and 'young people' refer to those aged under 18 years. In this report the terms 'child' or 'children' refer to persons 12 years and under, while the terms 'young person' and 'young people' are used to refer to persons aged 13–17 years.

Research Aim & Objectives

This research was commissioned by Tusla - Child and Family Agency, at the request of the Minister for Children and Youth Affairs. This study aims to investigate actions and decision-making processes following An Garda Síochána's application of S12 of the Child Care Act 1991 from the perspective of Tusla. The objectives of the study are therefore to:

01

Identify the pathways for children who have been subject to S12 of the Child Care Act 1991 between 1 July 2016 and 30 June 2017

02

Explore the rationale and decision-making process of social workers in the aftermath of S12 being invoked

03

Describe the characteristics of communications between Tusla and An Garda Síochána in relation to S12 notifications and follow-ups from the perspective of Tusla social work and Tusla management

04

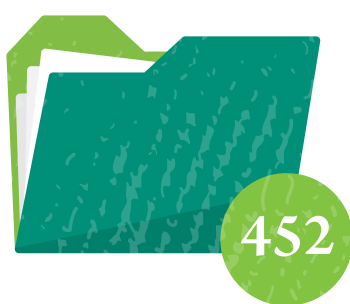
Ascertain the role of the Out-of-Hours Service in Tusla's response to a S12

05

Examine and determine the circumstances relating to children being removed more than once.

Research Methodology

This research is based on a mixed-method approach comprising both qualitative and quantitative data. Quantitative data analysis was carried out on a bespoke dataset collected in Tusla for the purpose of this study, which included anonymised data on 452 Section 12 notifications during the period 1 July 2016 to 30 June 2017. The qualitative data in this study is based on 28 semi-structured interviews with Tusla child protection social work practitioners, including those working in the long-term teams, the duty intake teams, the Crisis Intervention Service (CIS), the National Out-of-Hours Service (OOHS), and members of Tusla’s management team.



SECTION 12 INCIDENTS



INTERVIEWS WITH TUSLA CHILD PROTECTION SOCIAL WORK PRACTITIONERS AND MANAGEMENT

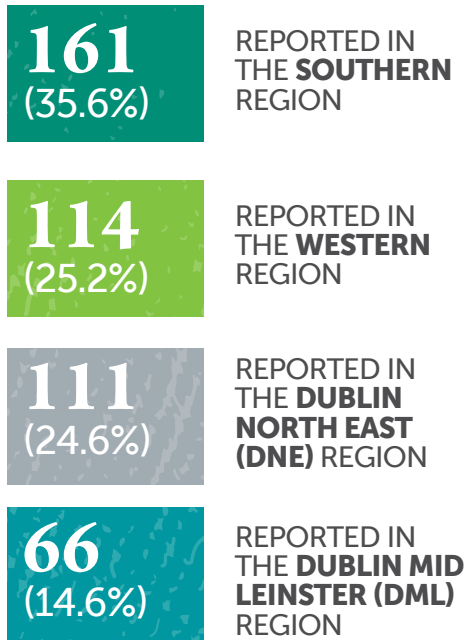


PERIOD 01.07.2016 TO 30.06.2017

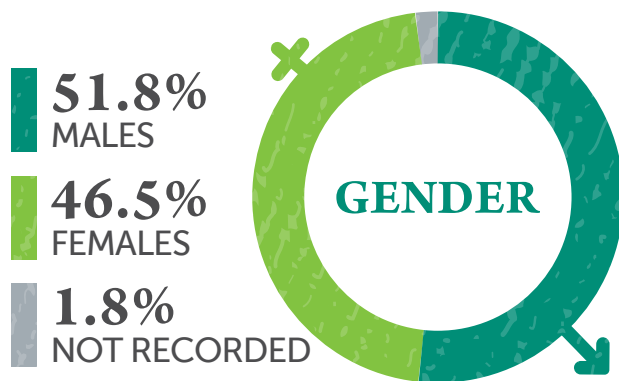
Quantitative Findings



A sample of 452 Section 12 notifications in the Republic of Ireland between 1 July 2016 and 30 June 2017 were selected by Tusla for this research. Of these,



15-17 YEARS WAS THE MOST FREQUENT AGE RANGE FOR YOUNG PEOPLE INVOLVED IN A S12



Section 12s – 1 July 2016 to 30 June 2017

A sample of 452 Section 12 notifications in the Republic of Ireland between 1 July 2016 and 30 June 2017 were selected by Tusla for this research. Of these, 161 (35.6%) were reported in the Southern Region of Tusla, 114 (25.2%) in the Western Region of Tusla, 111 (24.6%) in the Tusla Region Dublin North East (DNE), and 66 (14.6%) in the Region Dublin Mid Leinster (DML). The most frequent age range for young people involved in a S12, over the course of the study was 15 - 17 years. Regarding gender, 234 (51.8%) involved males and 210 (46.5%) involved females. In eight cases (1.8%), gender was not recorded.

Of the 452 reported S12 incidents, 392 represent unique cases (i.e., separate individuals), of whom 199 (50.8%) were male and 186 (47.4%) were female. For seven of these cases (1.8%), gender was not recorded. The total population of children and young

people under the age of 18 included in the population census of 2016 was 1,190,502. The 392 children and young people included in this study represents 0.03% of the total population of children and young people in Ireland in 2016.

Of the 452 individual S12s recorded, 347 (76.8%) were already known to Tusla. Of these, 248 (71.5%) were open to Tusla Child Protection at the time the S12 was invoked with 224 (90.3%) of these allocated to a social worker. Of the 248 cases open to Tusla Child Protection, 29 (11.7%) cases were on the Child Protection Notification System (CPNS) system, while 174 (70.2%) were not. This information was either not known or not recorded for 45 cases (18.1%). Thirty-one of these S12 reports involved children or young people who were in care, most (n = 28) cases involved children or young people in foster care (90.3%).

Reasons for Invoking Section 12

The most commonly reported reasons for invoking Section 12 were Parenting Difficulties (n = 103) or Parental Alcohol/Drug Abuse (n = 88), closely followed by Child Behaviour Difficulties (n = 72). There was no information recorded in 14 cases.

Month, Day, and Time of Section 12

During the period in question most S12s were recorded in March (10.3%), followed by June (9.7%), July (9.7%), and April (9.7%). The lowest number of S12s was recorded in September (4.4%). Most S12s happened on a Monday (16.8%), followed by Thursday (15.3%) and Wednesday (15%). Saturday had the lowest percentage of S12s recorded (12%). The most common time when S12s occurred was between 6 p.m. and 7 a.m.; this time corresponds to the operating hours of Tusla's National Out-of-Hours Service (63.3%), whereas S12s reported during normal office hours (Monday to Friday 9 a.m. to 5 p.m.) comprised 14.3%.

Contact Between An Garda Síochána and Tusla

It was found that An Garda Síochána contacted Tusla prior to invoking S12 in 81.4% of the S12s recorded (n = 368) and did not contact Tusla for 8.2% of S12s (n = 37). This information was not recorded for 10.4% of S12s. Of the 368 S12s where contact was made, An Garda Síochána made contact with Tusla OOHS in 82.6% of the S12s and with the Tusla social work office in 15.9% of these cases.

For the 452 cases observed in this study, and for which evidence was recorded of An Garda Síochána notification, An Garda Síochána were found to have notified Tusla after invoking S12 in 89.8% (n = 406) of cases, and did not notify Tusla after 1.5% (n = 7) of these S12s. This information was not recorded for 8.7% (n = 39) of cases. It was found that contact between An Garda Síochána and Tusla was within the same day in 335 (82.5%) of these S12s. In the cases where notification was

not within the same day, it took between one (8.6%) and 90 days (0.2%) for An Garda Síochána to contact Tusla. This information was not recorded for 3.9% (n = 16) of these cases.

Move to a Place of Safety

Analyses were carried out to examine the time it took between S12 being invoked and the child or young person being brought to their place of safety; moves of 0–90 minutes were categorised as 'immediate'. It was found that the move was immediate in 68.6% of S12 incidents. In cases where the move was not immediate, the time it took to bring the child or young person to a place of safety ranged between 3 and 6 hours. It was found that Garda vehicles were used in 62.8% of S12s and a social worker's car in 20.8% of cases, suggesting that social workers were involved, at least in terms of providing transport, in 94 of the S12s invoked. This information, however, was not available for 12.8% (n = 58) of S12s. Private foster care (funded by Tusla) was the final place of safety for 40.3% of S12s, followed by Tusla foster care for 21.4% and hospitals for 19.9%.

Outcome of the Section 12

It was found that following S12, in 44.7% of cases the child or young person was returned to the parent or home. The second most common action was the application of Section 13 (19.5%), that is, an application to the court for an emergency care order (ECO). The third most common action was children being admitted into voluntary care, following 9.1% of S12s. Information regarding actions taken after S12 was not recorded for 32 cases.

For the 88 cases where a Section 13 was applied for, child welfare was the reason in 31 cases (35.2%), neglect was the second most common reason (19.3%), followed by physical abuse (12.5%) and emotional abuse (9.1%). Thirty-nine cases (44.3%) resulted in an Emergency Care Order, while 20 cases (22.7%) resulted in an Interim Care Order. No order was granted for 6 (6.8%) cases.

Repeat Section 12s

Overall, 56 (14.3%) children and young people were removed more than once over the course of the study period, while 336 (85.7%) were removed once. Cases of more than one S12 happened most frequently in young people aged 15–17 years; 16 years was the age with the highest frequency.

The time between the first S12 being invoked and the most recent S12 being invoked was analysed. Of the 56 children and young people who experienced multiple Section 12s between 1 July 2016 and 30 June 2017, 43 (76.8%) were removed twice during this period. The time between these children or young people's first² and second removal (between 1 July 2016 and 30 June 2017) ranged from one day to over six months, with removals occurring most frequently (25.6%) one to three months apart.

The reason for the second S12 was the same as for the previous one for 19 (44.2%) children and young people. However, for 15 (34.9%) children and young people there was insufficient data to compare reasons for these separate S12s. The immediate outcomes of the first and second S12s for these 43 children or young people with two removals in the study period were also analysed. The most common immediate action recorded for children or young people after their first S12 during the period in question was a hospital placement (30.2%), followed by placement in private foster care (23.3%). The most common action recorded for children or young people after their second S12 was placement in private foster care (46.6%), followed by placement in other forms of foster care (25.6%).

A further 13 children and young people were recorded as having experienced three or more removals between 1 July 2016 and 30 June 2017. The time between these children or young people's first and last removals³ (i.e., between 1 July 2016 and 30 June 2017) ranged from 11 days to over six months. These children or young people ranged in age from less than 12 months to 17 years, while the majority (76.9%) of young people

were aged 15–17 years at the time of their first removal (during the period of study). The reasons for the first and last removals were the same for five (38.4%) children and young people. However, for four (30.8%) children and young people there was insufficient data to compare reasons for separate Section 12s. The outcomes of the first and last S12s for these 13 children or young people with three or more removals in the period under study were also analysed. The most common outcome recorded for children or young people after their first S12 during the period of study was being returned to a parent or other relative (30.7%). The most common outcome recorded for children or young people after their last S12 was a hospital placement (46.1%).

Section 12s Prior to 1 July 2016

Of the 392 children and young people included in this study, 4.1% (n = 16) were reported as having experienced at least one S12 prior to 1 July 2016. The majority (81.1%) had not experienced S12 before 1 July 2016. For 14.8% of children or young people, no information about removals prior to 1 July 2016 was recorded. For those 16 children, the time between the two S12s ranged from 11 days (6.3%) to over 11 years (18.7%), with most children or young people (56.2%) experiencing a Section 12 between one month and two years prior to their current Section 12.⁴ At the time of their previous Section 12, these children and young people ranged in age from less than one year to 17 years, with the average age being 11.31 years. For the majority (81.2%) of children and young people, the reason for invoking this previous Section 12 (i.e., the S12 recorded prior to 1 July 2016) was 'child welfare concerns'. For 12.5% of children and young people, the reason was physical abuse or parental mental health issues. For one child or young person (6.3%), the reason was not recorded. For these 16 children or young people, the most common outcome recorded was returning the child to a parent, which occurred for 11 (68.7%) children or young people.

2 First removal refers to the earliest Section 12 invoked for the child or young person during the period 1 July 2016 to 30 June 2017.

3 Last removal refers to the last recorded Section 12 invoked for the child or young person between 1 July 2016 and 30 June 2017.

4 A 'current' Section 12 refers to the first S12 reported for a child or young person during the period 1 July 2016 to 30 June 2017.

Qualitative Findings



Legislation, Policy, Procedures, and Guidelines

Overall, participants are knowledgeable about the national legislation and policy documents and use these to inform their practice. The Child Care Act 1991 and Children First: National Guidance for the Protection and Welfare of Children (2017) are the key sources used by participants, while the Child Protection and Welfare Handbook, the National Out-of-Hours Protocol, and the Joint Working Protocol for An Garda Síochána/ Tusla - Child and Family Agency were also cited as additional points of reference.

Section 12s – 1 July 2016 to 30 June 2017

Participants are of the view that there are differences in the frequency of S12s across Tusla areas and suggest reasons for S12s can be divided into two categories: S12s on children (identified as 0–12 years) and on young people (identified as 13–17 years). The most cited reasons for S12s on children are parental mental health and parental substance misuse. The most cited reasons for S12s on young people are teenage behavioural issues and parent’s refusal to allow young people home. Participants reported that repeat S12s were mostly carried out on young people (i.e. 13–17 years) with similar reasons for repeat S12s as for initial S12s.

Participants are of the view that there are differences in the frequency of S12s across Tusla areas and suggest reasons for S12s can be divided into two categories:



CHILDREN
(IDENTIFIED AS
0–12 YEARS)



PARENTAL
MENTAL
HEALTH



PARENTAL
SUBSTANCE
MISUSE



YOUNG PEOPLE
(IDENTIFIED AS
13-17 YEARS)



TEENAGE
BEHAVIOURAL
ISSUES



PARENT'S
REFUSAL TO
ALLOW YOUNG
PEOPLE HOME

Contact Between An Garda Síochána and Tusla

Longstanding relationships between An Garda Síochána and Tusla in some areas ensure that contact with Tusla is made by An Garda Síochána where there is child protection concern before S12 is invoked, which in some instances negates the need for S12. Acknowledging that S12s are invoked where there is immediate and serious risk to a child or young person, participants suggested that, where possible, it can be helpful if An Garda Síochána contact Tusla prior to invoking S12. Tusla may contact An Garda Síochána to assess the need for S12 during office hours if they consider there to be a concern for child safety and there is a need to gain access to a property. Tusla may also contact An Garda Síochána if time for a resolution of a high-risk situation is limited (e.g., in the late afternoon, or when social workers cannot access a sitting court), and therefore An Garda Síochána may assess the situation to determine the need for S12.

A range of practices were reported on collaboration by An Garda Síochána with Tusla's National Out-Of-Hours Service (OOHS) in relation to S12s. In some cases contact is made by members of the Gardaí prior to S12 being invoked, and in others contact is made after. Acknowledging that S12s are invoked where there is immediate and serious risk to a child or young person, participants suggested that, where possible, it may assist with decision-making if contact is made with OOHS prior to invoking S12. Participants were of the view that the Gardaí (particularly those members based outside of Dublin, Kildare, and Wicklow) perceive that contact with OOHS can be made only after S12 has been invoked. It was also suggested by participants that there is varied awareness and use of Tusla's on-call social workers and that a referral to the on-call social worker is made only in exceptional circumstances.

Places of Safety and Placements

Respondents described how emergency foster care placements are sourced by the OOHS team with private placements (funded by Tusla) predominately used. Respondents maintain, however, that these types of placements are often unsuitable for young people with behavioural issues, and that there is very limited availability of emergency beds in residential units. Respondents also indicated that children and young people are at times maintained in Garda stations overnight and that hospital placements are being used for a social admission of a child or young person where there is a child protection concern.

Respondents identified several issues regarding placements. Hospitals and Garda stations are noted as inappropriate places for children and young people who are subject to S12. Emergency placements are often outside the locality and can be a significant distance away. Given the time limit placed on emergency foster placements, social work teams are under significant pressure to make alternative arrangements before this time (24 hours on weekdays, and 72 hours at weekends) passes.

Decision-Making and Interagency Collaboration

A range of methods are used to inform Tusla social work departments about S12s that have occurred. Reports received from OOHS are perceived as detailed and timely, whereas respondents noted that reports received from An Garda Síochána can be less detailed, which necessitates contacting the individual Garda for additional information. This can be challenging due to the shift patterns that the Gardaí work to. This is noted as particularly problematic where An Garda Síochána are required to give direct evidence in cases of Emergency Care Orders, although this is not a requirement by the court in every location. Participants emphasised that long-established relationships between members of the two agencies, dedicated Garda liaison officers, and Garda Child Protection Units help facilitate this contact.

Participants reported that the Joint Working Protocol between An Garda Síochána and Tusla is followed in many cases as part of interagency collaboration. Most Tusla areas hold regular formal meetings with An Garda Síochána both on a case-by-case basis and for strategic development. Regular informal contact between Tusla and An Garda Síochána also occurs, particularly where there are well-established relationships between the two agencies. A number of issues were identified by participants which can make interagency collaboration difficult in some areas. Perceived difficulties for members of An Garda Síochána in relation to S12 include: managing behaviour of young people, lack of appropriate placements for young people, and lack of use of local on-call social work. Perceived difficulties for Tusla members include: poor communication with members of An Garda Síochána and mixed views on the appropriate use of S12.

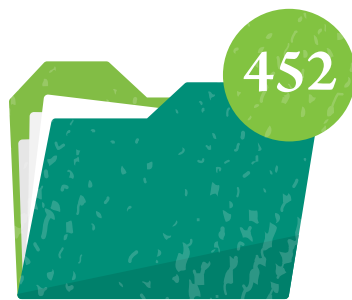
Recent Improvements and Ongoing Challenges

Improvements noted by respondents since July 2017 include increased joint meetings and joint training between the two agencies. At an overall level joint training is very positively perceived by respondents and is viewed as very helpful. Such improvements are thought to be contributing to improved relationships between members of An Garda Síochána and Tusla. In particular, Child Protection Units (where developed) are viewed as making communication between the two agencies more effective and efficient. Respondents also emphasised the usefulness of the Joint Protocol and the use of the Signs of Safety model of practice. Notably the use of email as a form of communication is also perceived to be contributing to improved contact between both agencies.

Ongoing challenges in some instances include a lack of adequate information on S12s and inaccuracies in Garda notifications with follow-up contact with the relevant Garda difficult to achieve. Acknowledging that they are not present when the decision is made and may not have all the information, participants note their view that some S12s are unwarranted. A lack of appropriate placements and supports for children and young people is also emphasised as an ongoing challenge.

Discussion and Issues for Consideration

A total of 452 S12s relating to 392 children and young people between 1 July 2016 and 30 June 2017 were included in this study. The majority of these children and young people were subject to one S12 in this time period. For a majority of these children and young people the need for S12 arises from parental issues and behaviours. This evidence suggests a strong need to increase the provision of early intervention parent and family support services for children, young people, and families, to reduce vulnerability and to respond to needs in a timely manner, thus avoiding the need for one or more S12s. A vulnerable group identified in the course of this research was young people, specifically those aged 15–17. Such findings necessitate further exploration of the needs of this age group (who have the highest incidence of S12s) and provision of appropriate resources and training for staff of both Tusla and An Garda Síochána on responding to the needs of this group.



SECTION 12
INCIDENTS



INDIVIDUAL CHILDREN
AND YOUNG PEOPLE WERE
INCLUDED



VULNERABLE GROUP
IDENTIFIED WAS YOUNG
PEOPLE, SPECIFICALLY
THOSE AGED 15–17

Decision-making processes before, during and after S12

This study has identified examples of very good practice and decision-making processes, based on this legislation and the associated policies, which ultimately support a child or young person in the best way possible. The research emphasises the strengths of such practices but also highlights areas where practice can improve to ensure the safeguarding of vulnerable children, young people, and their families. This research affirms the need to ensure that appropriate actions and decision-making on S12s are informed by a thorough knowledge of relevant policy and legislation, while taking account of the specific circumstances of a child or young person at a particular time. Overall, Tusla staff have a high level of awareness about the Child Care Act in terms of its implications for social work practice and about the relevant national policies, particularly Children First 2017, as they pertain to S12s.

Interagency Collaboration

This research provides evidence of best practice in joint work and collaboration between Tusla and the Gardaí. Specifically, strategic meetings and individual family meetings are noted as standard practice. The impact and benefit of well-established professional relationships between An Garda Síochána and Tusla cannot be overestimated. These relationships are shown to facilitate the timely sharing and exchange of information and knowledge between the two agencies, before, during and after S12 is invoked. This suggests a strong need for more opportunities for Tusla and Garda Síochána members to establish local relationships.

Practitioners noted both over-reliance and under-reliance on the use of S12 by An Garda Síochána, along with many instances of appropriate use of this section of the Act. This finding may suggest the absence of a standardised and consistently appropriate response to children and young people in need of emergency protection. Regular joint training between An Garda Síochána and

Tusla is highly recommended as an effective way to ensure an appropriate and consistent interpretation of the Child Care Act and S12 in particular. This study has emphasised the need for consistent ongoing professional relationships between An Garda Síochána and Tusla with regard to all of their joint working responsibilities, and specifically S12. An Garda Síochána and Tusla bring separate sets of skills and expertise that can be used collaboratively to further improve the decision-making processes to ultimately benefit children, young people, and families.

Joint training for An Garda Síochána and Tusla

Regular meetings and joint training sessions were identified as key to the development and maintenance of positive relationships and communication between An Garda Síochána and Tusla. It is therefore necessary to support this type of engagement in all areas and across all teams. Joint training and education on S12 procedures, thresholds, and roles and responsibilities will have the additional benefit of clarifying best practice. Of note, it has been recommended in a review of joint Senior Local Management Liaison Forums that each Senior Local Management Liaison Forum will lead on a joint training programme. Refresher training; training specifically for Gardaí on S12s; and joint training on roles, responsibilities, and procedures in relation to S12s are recommended. These types of training can increase accuracy in identifying the need for S12s and help to develop an understanding of and appreciation for the different roles of agencies and individuals.

The National Out-of-Hours Service

The National Out-of-Hours Service (OOHS). OOHS is emphasised as a resource available to An Garda Síochána which can provide information on children and young people known through the National Child Care Information System (NCCIS) and can assist them in their decision-making on S12. The one specific out-of-hours resource that requires consideration is the role and use of the on-call social worker. There is varied

awareness and understanding of the on-call service in Tusla areas nationwide. Many areas have little awareness of the role and despite the fact that social workers are on-call nightly, this resource is not being accessed.

Places of Safety

This research found strong evidence to suggest that children and young people are provided with a safe place within a short period of time. This shows that processes and decision-making are being successfully driven by the goal of safeguarding children and young people. There is scope for improvement, however, with a lack of appropriate available places of safety for children and young people. The research found that some children and young people are sent to places of safety outside of their locality or are placed in hospitals or Garda stations in their local area. It is widely accepted that it is preferable that children and young people be placed close to their familial and social environments and that this will facilitate a return to the care of a family member as soon as possible. Places of safety are required at a local level to avoid additional stress or burden on children arising from being transported over long distances or to environments that they are completely unfamiliar with. The findings from this study also indicate a need for an increased range of appropriate placements for young people with behavioural difficulties. A wider use of supported lodgings as an option for the 15–17-year cohort is worth considering.

This study highlights that Garda stations or hospitals (even in the case of a social admission) are not appropriate placements for children and young people. Furthermore, this study reports interagency tensions arising between hospital staff and An Garda Síochána or Tusla due to the use of hospital placements. Such incidents highlight how decision-making can be affected by the reality of available resources and by circumstances outside the control of either agency. This confirms the need to increase the resources and supports available nationally for children and young people in emergency

circumstances in order for decisions to be made in their best interests.

It is suggested that ongoing liaison between An Garda Síochána, Tusla and the relevant hospital staff should be put in place to ensure a full understanding of S12 and an awareness of the circumstances children and young people are likely to be in when they require an emergency social admission. While acknowledging that hospital is not a suitable medium-term placement, it is worth considering developing a protocol that applies to all three agencies and that specifically relates to short-term emergency social admissions. Joint training with An Garda Síochána, Tusla and the relevant hospital staff is also suggested.

Preventative Supports

Because most S12s are invoked for reasons of parental well-being or a child or young person's behaviour, this research supports the need for ongoing development of preventative initiatives in the area of family and parenting support in advance of and in response to S12 interventions. Signs of Safety and Meitheal are highlighted as useful practice models and this research supports the need for the availability of training on these approaches to be provided to relevant members of Tusla and An Garda Síochána. Increased partnership with parents over follow-up plans after S12 has been invoked and to prevent repeat S12s is suggested. This will help promote awareness and understanding of both statutory and non-statutory options of support for families where this level of need exists.

The particular needs of young people who have behavioural issues, young people where substance misuse is an issue, and young people who have a disability require specific attention. Earlier intervention on a one-to-one basis with children and young people is also suggested. Models of advocacy, mentoring and youth work could be used to support this cohort at an early stage. There is also a need for increased specialist services (such as Psychology, Child and Adolescent

Mental Health, and Disability Supports) as the evidence highlights the level of behavioural problems among the 15–17-year-olds who are most likely to be involved in S12.

Increased partnership with children and young people is also suggested in exploring the circumstances surrounding S12s. A number of initiatives are now in place in Tusla to ensure a participatory approach, with young people and practitioners trained in this regard. It is suggested that such an approach be applied to the 15–17-year-old cohort specifically in an effort to give them an appropriate level of involvement and ownership in their role in the need for S12 and the safety plan following S12.

Record Keeping

This research found a need for a standardised approach to record-keeping on S12s in all Tusla areas. Aligned with this, interview respondents identified a need for an effective, ethical system of record management that is mandatory for all areas. To that end, all information on paper files should be digitalised to facilitate access, accuracy, and standardisation nationwide. Data recording should follow current data-protection guidelines and policies, such as GDPR.

To improve the accuracy of data collected, national templates that feed into data systems are required to ensure that standardised information is recorded and available nationwide. This is substantiated by the fact that there is no nationally agreed standard for collection of such statistics and that there is a perceived inconsistent use of available Garda Síochána templates.

Consistent collection of an increased level and type of data is necessary in order to accurately profile children and young people who are subject to S12 and to detail the circumstances that led to the S12 and its subsequent outcome. The Tusla database and the database used by An Garda Síochána (PULSE) need to align to ensure consistent gathering of relevant data. Protecting the identity and ensuring the anonymity of these children and young people should also be

of central concern in terms of how data is accessed and managed. Of note, An Garda Síochána and Tusla are currently exploring the integration of their PULSE and NCCIS IT systems to allow for real-time child abuse notification and enhanced communications for Gardaí and social workers. This will essentially mean the automatic completion of joint Garda/Tusla liaison records during child abuse investigations. It is also anticipated that Section 12 incidents recorded on the Garda PULSE system will be automatically recorded on Tusla's National Child Care Information System (NCCIS) and that all communications and actions between the two agencies will be recorded on their respective systems as appropriate.

Further Research

Further research is required to understand the circumstances that lead to children being removed under S12, particularly in circumstances where this happens more than once. This may include qualitative in-depth research with children and families in the form of case studies. Further research on parental difficulties and appropriate parenting supports is also necessary as it was found that parental difficulties were the main issues leading to S12s being invoked. Future research may benefit from exploring parenting practices further, to understand the circumstances surrounding S12s with young people in particular.

Conclusion

This report provides an understanding of Tusla’s actions and decision-making processes following An Garda Síochána’s application of S12 of the Child Care Act 1991. While limited in terms of the available quantitative and qualitative data, the study highlights many examples of good practice and decision-making in relation to S12 that ultimately support and protect a child or young person in an emergency situation. The study has also identified areas where practices and procedures can be improved to strengthen and improve the response to children and young people both at the time of, and following, S12.

This report is based on a point-in-time and notes a number of welcome developments that are in process in relation to many of the areas identified for consideration. Nonetheless, there is a need for further in-

depth research on current practices and procedures in relation to S12 and their impact on the safety, well-being and experiences of children, young people, and their families.



Notes



Notes

[This section contains faint, illegible text, likely bleed-through from the reverse side of the page.]

Notes





United Nations
Educational, Scientific and
Cultural Organization



UNESCO Chair in
Children, Youth and Civic Engagement
Ireland
CHILD AND FAMILY RESEARCH CENTRE



UNESCO Child and Family Research Centre
Institute for Lifecourse and Society
Upper Newcastle Road
National University of Ireland Galway
Galway, Ireland

T: +353 91 495 398

E: cfrc@nuigalway.ie

W: www.nuigalway.ie/childandfamilyresearch

Twitter: @UNESCO_CFRC

Facebook: [ucfrc.nuig](https://www.facebook.com/ucfrc.nuig)



An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

Tusla – Child and Family Agency
The Brunel Building
Heuston South Quarter
Saint John's Road West
Dublin 8

T: +353 1 771 8500

E: info@tusla.ie

W: www.tusla.ie

Twitter: @tusla