

Ms Sandra Tuohy
Assistant National Director,
Community Operations - Services for Older People
Health Service Executive

Sent to: olderpeople.operations@hse.ie

23rd February 2021

Dear Sandra,

Many thanks for the constructive meeting with the IASW on 11th February and your subsequent correspondence of 18th February. We write in relation to some of the agreed actions and with further proposals for your consideration.

Submission of Liaison Social Work Model: Please find an attached copy of the '*IASW: The Liaison Social Work Role in Nursing Homes and Residential Settings*' and accompanying guidelines. As you are aware, this model develops the innovative work of HSE managers and social workers in CHO9 & CHO7. It has been operationalised in varying forms in St Mary's Hospital in the Phoenix Park, the Navan Road Community Nursing Unit, St Clare's Community Nursing Unit, Clarehaven Community Nursing Unit, Lusk Community Nursing Unit, Bellvilla Community Unit, The Meath Community Unit, Tymon North, and Hollybrook Lodge Residential Care Centre. Such was the success of the model, that CHO9 subsequently established a permanent Social Work Team Lead post covering four nursing homes.

Concern: Throughout the pandemic, it has become clear that the delivery of vital communication care and crisis support is beyond the capacity of some overwhelmed nursing homes during a crisis, such are the demands associated with outbreak management. While the Expert Panel Report on Nursing Homes advise this care is the responsibility of individual nursing homes, it is clear that this has failed to occur in practice in multiple settings and that families and residents have suffered preventable trauma as a result.

Proposed Solution: Teams in CHO7 and CHO9 proactively sought to address the unmet needs of families and residents during crisis outbreaks. Social workers were temporarily redeployed from integrated care and primary care teams for the length of an outbreak in a nursing home to provide a liaison social work service, making it a time limited and cost-effective solution. During wave 1 and 2 of the pandemic, social workers gave families a consistent point of contact, supported their connection to the resident and in doing so, avoided the preventable trauma described by many families in other settings.

The HSE has successfully supported the allocation of a psychologist to all public and private nursing homes to support staff well-being, the same value must be placed on the needs of residents and their families.

The IASW proposes that the HSE provide liaison social work support, as part of the Covid Response Teams, to all public and private nursing homes.



IASW

Irish Association of Social Workers
Cumann na hÉireann um Oibríthe Sóisialta



IASW

Irish Association of Social Workers
Cumann na hÉireann um Oibríthe Sóisialta

The HSE could consider multiple options to deliver the liaison role on a temporary basis, including creative use of redeployment, use of national social work panel or agency staff, accessing the ring-fenced funding committed to the national psychosocial response for allocation of liaison posts (connected to the work of the 9 CHO Psychosocial Response Steering Committees already in existence).

The IASW is confident, given the leadership and commitment to meeting family and resident needs in CHO9 that the HSE can overcome any challenges and provide this vital service. Given the recommendations of the Expert Panel on Nursing Homes and availability of ring-fenced funding this is also an opportunity for Older Persons Services to consider longer term accessibility of residents to social work.

Benefits: These short-term social work interventions provide a solution to the psychosocial needs of families and residents during an outbreak. Through the provision of sensitive and timely support, the liaison role mitigates the risks of prolonged or complicated grief for bereaved families, which will otherwise require far more long term and costly investment in specialist bereavement services. It has been selected as a notably innovative project by The Economist's Intelligence Unit for inclusion in their 2020 report on global aging. Of most importance, it has received positive feedback from families and nursing home staff – we know it meets needs.

Adult Safeguarding:

Concern: Covid-19 has amplified existing adult safeguarding concerns and brought new safeguarding challenges. Lockdowns are associated with increased risks for all adults at risk of abuse and harm, including those in residential settings. We are particularly concerned about safeguarding risks in cocooned nursing homes. In 2019, The National Safeguarding Office reported 11,929 safeguarding and protection concerns, of which 159 were categorised as institutional abuse. A further backlog of 1000 concerns related to institutional abuse in HSE or HSE funded services in CHO7 were highlighted. Meanwhile, HIQA reported 711 concerns relating to poor quality care in nursing homes in 2019. Given known pre-existing weaknesses in regulation and safeguarding in the nursing home sector, highlighted by HIQA, the IASW and the HSE National Safeguarding Office, the prolonged removal of the protective eyes and ears of family leaves residents in a vulnerable position should risks arise in their care setting.

Proposed Solutions:

Recognising that lockdowns and cocooning pose increased safeguarding risks, a strategic response is required. This should include:

Registered Office: 114-116 Pearse Street, Dublin 2, Ireland
Tel: +353-(0)1-6774838
Email: office@iasw.ie
Website: www.iasw.ie



IASW

Irish Association of Social Workers
Cumann na hÉireann um Oibríthe Sóisialta

Data analysis: Tusla and Domestic Violence services have provided real time data to establish trends in reporting, accessibility, and knowledge of services etc. This allows services to understand what is happening on the ground and plan accordingly. The IASW propose that NSO gather and share real time data on adult safeguarding referral rates, monitoring for any concerning significant drop in referrals, particularly within residential settings.

Longer term planning: Planning may be required to address drops in safeguarding referral rates and management plan for any predicted surge in referrals. The backlog in CHO7 must be rapidly targeted and measures put in place to ensure this does not occur, given the likely increased demand for safeguarding services.

Targeted messaging and training: A Red C poll and the Department of Health *Report on Adult Safeguarding Focus Group with Health and Social Care Service Users* highlights that a significant proportion of adults are unaware of the existence of the Safeguarding and Protection teams and how to seek support around safeguarding concerns. National campaigns highlighting how older people/people with disabilities at risk of abuse in communities can access support is vital, there has been an absence of information on this to date. A targeted messaging & awareness campaign for the 32,000 residents in nursing homes is required, both raising their awareness of their rights, and describing how to access help if they are experiencing harm or abuse. This is particularly vital in nursing homes with known risk factors (i.e., settings with poor person-centred culture, widespread abuse).

Targeted training: Safeguarding training must be adapted and delivered to all nursing home staff, acknowledging the heightened risks posed by lockdown and providing support to staff to identify and report abuse and neglect appropriately. The effectiveness of generic online training (developed pre Covid) must be considered given the complexities of safeguarding in nursing homes during a pandemic. Virtual face to face or in person training should be considered to allow participants reflect, seek expert knowledge etc. All Covid Response team members & HSE leads should be prioritised for targeted safeguarding training on recognising and responding to institutional abuse and neglect. The liaison social worker, if adopted, provides safeguarding expertise on Covid Response team.

Reporting Concerns/Informing Families: IASW members have identified confusion among professionals and care staff on how to report abuse in residential settings. The HSE should ensure that all staff are aware of the HSE 2014 Safeguarding Vulnerable Persons Policy.

All staff must adhere to the Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 which means **all persons** are legally obliged to report particular offences against a vulnerable person.

Registered Office: 114-116 Pearse Street, Dublin 2, Ireland
Tel: +353-(0)1-6774838
Email: office@iasw.ie
Website: www.iasw.ie



IASW

Irish Association of Social Workers
Cumann na hÉireann um Oibríthe Sóisialta

Please note, while Safeguarding and Protection Social Workers do not have legal right of entry to private nursing homes, in practice, entry is regularly negotiated. All concerns related to abuse and neglect must be referred to Safeguarding and Protection Social Work teams, to HIQA and if criminal in nature, to the Gardai, without delay.

Families must be informed of concerns related to their relatives, or of risks in the environment which may pose harm to their relative, at the earliest opportunity, with social work support.

It is vital that residents and families are made aware of current risks in a timely way, so that they can make appropriate decisions about the placement.

Commission Research: There are key learnings to capture in relation to adult safeguarding during the pandemic. The IASW propose the HSE seek more information around the response to older person safeguarding and commission research to capture positive and effective practice and less effective practice, in order to inform future frontline practice and strategic planning.

Safe Visiting Spaces: Safeguarding is inextricably linked to family life. All HSE nursing homes must have safe, good quality, visiting spaces so that families can sight their loved ones regularly. The IASW understand that HSE Estates have identified some challenges, again, these must be addressed to ensure that the kind of safe visiting pods available widely in Europe, are accessible by families and residents here.

Social Work Representation on Psychosocial Committees: We are in the process of identifying social work representation on psychosocial teams and will update your office at the earliest opportunity.

Visitation: Please see attached visitation proposals.

Should you require any further information, please do not hesitate to contact our office on 087 7392420. We look forward to your consideration of these proposals and value the opportunity for continued collaboration with your office.

Kind Regards,

Aine McGuirk
Chair

Registered Office: 114-116 Pearse Street, Dublin 2, Ireland
Tel: +353-(0)1-6774838
Email: office@iasw.ie
Website: www.iasw.ie