Barnahus Ireland

Action Plan accompanying the Strategy to Scale-up Barnahus Services in Ireland

WP 1: SERVICE PROVISION

#	Description of action	Specific timeframe suggested	Institution leading the implement ation	Institution(s) supporting the implementation	Outcome(s)	Resources
Rec 1.1	It is recommended that the current review of the Joint Working Protocol be finalised as a matter of priority.					
Action 1.1.1	Finalisation and adoption of the Joint Working Protocol	Immediate priority (within 12 months)	AGS and Tusla	AGS and Tusla	Joint Working Protocol in place	No additional resources required
Rec 1.2	It is recommended that the 2003 Good Practice Guidelines for Specialist Interviewing be updated.					
Action 1.2.1	Revision of the 2003 Guidelines	Immediate priority (within 12 months)	AGS	DCEDIY, DoJ, AGS, Tusla, CHI and DPP	2003 Guidelines revised	No additional resources required
Rec 1.3	It is recommended that steps be made to ensure that paediatric forensic medical examinations are done in a consistent manner by trained paediatric medical examiners.					
Action 1.3.1	Rollout of co-located Child & Adolescent Sexual Assault Treatment Services and	Medium priority (within 24 months)	HSE	HSE, CHI, Tusla	Child & Adolescent Sexual Assault Treatment Service and SATUs (for >14 years) co-	Additional resources may be required, costing exercise needed

	SATUs (for ≥14 years) in each Barnahus centre				located with each Barnahus centre	
Action 1.3.2	Training needs assessment of new/ aspiring paediatric forensic medical examiners and updating/revision of the existing programmes (SAFE,[1] SANE_P[2] and FFLM[3] SOM[4] UK qualifications) take account of practice specific for Ireland	Medium priority (within 24 months)	HSE	HSE / CHI	Training programme for paediatric forensic medical examiners meets the needs	No additional resources required
Action 1.3.3	New/aspiring paediatric forensic medical examiners training	Medium priority (within 24 months)	HSE	HSE / CHI	New/aspiring paediatric forensic medical examiners trained in sufficient numbers to meet the demand	Resources may be mobilized through reallocation of the existing resources

WP 2: STAFFING						
#	Description of action	Specific timeframe suggested	Institution leading the implementation	Institution(s) supporting the implementation	Outcome(s)	Resources

[1] SAFE: Sexual Assault Forensic Examiner qualification for Clinical Nurse Specialists.
[2] SANE_P: Sexual Assault Nurse Examiner in Paediatrics qualification for Paediatric Clinical Nurse Specialists.
[3] FFLM: Faculty of Forensic and Legal Medicine UK.
[4] SOM: Sexual Offences Medicine.

Rec 2.1	It is recommended that the Interagency Agreement be adopted as a matter of priority and include sufficiently detailed and clear provisions concerning agency-level responsibilities with regard to staffing.					
Action 2.1.1	Finalisation and adoption of the Interagency Agreement	Immediate priority (within 12 months)	DCEDIY	All IDG and BNASC participating agencies	Interagency Agreement in force and includes sufficiently detailed and clear provisions concerning agency-level responsibilities with regard to staffing	No additional resources required

WP 3: MINIMUM REQUIREMENTS FOR BARNAHUS FACILITIES

#	Description of action	Specific timeframe suggested	Institution leading the implementation	Institution(s) supporting the implementation	Outcome(s)	Resources
Rec 3.1	It is recommended that Barnahus East set up be completed in compliance with the standards outlined in Section 8 of the Strategy.					
Action 3.1.1	Barnahus East operationalisation	Immediate priority (within 12 months)	BNASC	All BNASC participating agencies	Barnahus East facilities outfitted and relevant staff assigned	Resources required, proposals submitted to HSE

WP 4: INFORMATION SECURITY AND DATA PROTECTION

#	Description of action	Specific timeframe suggested	Institution leading the implementation	Institution(s) supporting the implementation	Outcome(s)	Resources
Rec 4.1	It is recommended that the Data Protection Code of Conduct be developed and adopted.					
Action 4.1.1	Data Protection Code of Conduct development	Long-term priority (within 36 months)	BNASC	All BNASC participating agencies	Deta Protection Code of Conduct developed and adopted	No additional resources required

Rec 4.2	It is recommended that discussions on the terms of reference for the Barnahus Automated Information System (AIS) be kickstarted.					
Action 4.2.1	Discussions on the terms of reference for the Barnahus AIS	Long-term priority (within 36 months)	BNASC	All BNASC participating agencies	Provisional structure of the Barnahus AIS agreed upon	No additional resources required

WP 5: PROFESSIONAL DEVELOPMENT

#	Description of action	Specific timeframe suggested	Institution leading the implementation	Institution(s) supporting the implementation	Outcome(s)	Resources
Rec 5.1	It is recommended that an interagency training plan be agreed upon.					
Action 5.1.1	Training needs analysis	Immediate priority (within 12 months)	DCEDIY	All IDG and BNASC participating agencies	Training needs analysis conducted from a multidisciplinary perspective	No additional resources required
Action 5.1.2	Training plan development and rollout	Medium priority (within 24 months)	DCEDIY	All IDG and BNASC participating agencies	Interagency training plan agreed upon, including respective contributions by individual agencies	No additional resources required

WP 6: CHILD SAFEGUARDING

#	Description of action	Specific timeframe suggested	Institution leading the implementation	Institution(s) supporting the implementation	Outcome(s)	Resources
Rec 6.1	It is recommended that the Barnahus Child Safeguarding Statement and associated policies and procedures be developed and adopted.					

Action 6.1.1	Development and adoption of the Barnahus Child Safeguarding Statement	Immediate priority (within 12 months)	IDG	All IDG participating agencies	The Barnahus Child Safeguarding Statement developed and adopted	No additional resources required
Action 6.1.2	Review of the existing agency-level policies and procedures, gap identification and a review of existing policies and procedures and the development of new ones, as need be, to ensure consistency across the array of associated policies and procedures	Medium priority (within 24 months)	IDG	All IDG participating agencies	Existing policies and procedures reviewed and a set of consistent associated policies and procedures developed and adopted	No additional resources required
Rec 6.2	It is recommended that all relevant services within Barnahus adhere to their agency specific child safeguarding and are aware of the function of the Barnahus Child Safeguarding Statement.					
Action 6.2.1	Awareness raising at the Barnahus-wide and agency levels	Long-term priority (within 36 months)	IDG	All IDG participating agencies	Requisite awareness raising conducted at the Barnahus-wide and agency levels	No additional resources required

WP 7: QUALITY ASSURANCE

#	Description of action	Specific timeframe suggested	Institution leading the implementation	Institution(s) supporting the implementation	Outcome(s)	Resources
Rec 7.1	It is recommended that an agreement be reached at the IDG and BNASC level regarding the specific model of internal oversight.					

Action 7.1.1	Agreement on the model of internal oversight	Medium priority (within 24 months)	IDG	All IDG participating agencies	Acceptable model of internal oversight developed and adopted	No additional resources required