



**Review undertaken in respect of a death of a young person who
was in the care of the Child and Family Agency**

Clare

Executive Summary

June 2017

Introduction

This review concerns a young girl here called Clare, who took her own life at 15 years of age. Clare had been in care since she was two years old, in a relative placement for her first fourteen years and later in a number of short-term and longer term foster placements. Clare was described as a warm, attractive, outgoing young girl who was intelligent and had an active social network. She was also described as emotionally very fragile and had been deeply affected by the deaths of her mother and one of the relatives who had cared for her for many years.

Clare was first placed in voluntary care with her relatives when she was two, and her younger sibling was placed with a mainstream foster family. The children's mother died from an overdose when Clare was four. The question of placing both children together was considered initially and while Clare's relatives were initially unsure of their capacity to take care of two children, they later expressed a wish to have her sibling placed with them. However, Clare's mother had opposed this proposal prior to her death and asked for the two children to be placed together elsewhere. Ultimately the SWD decided to leave the children in the placements where they had become settled. Clare was considered to be well cared for and happy living with her relatives until she was 12 years old. She had regular contact with her sibling, which she valued. Clare also expressed curiosity about her father but never met him while she was in care. A difficult relationship between her relative carers and her sibling's foster carers meant that the social work department had to supervise contact visits for a number of years.

Clare had regular Child in Care reviews, at which she consistently expressed a wish to see more of her sibling. She was assigned a social care worker when she was five to help her deal with her sadness over the death of her mother. Between the ages of nine and eleven Clare did not have an allocated social worker because of staff shortages in the HSE, but the SWD maintained contact and continued to supervise visits between herself and her sibling. Prior to, and following this period she had four allocated social workers. While she was with her relatives, Clare resisted the notion of being seen as a child in care because she was living with her extended birth family, and also resisted having contact with a social worker and completing review forms. However, despite her reluctance, good relationships developed between her and the different social workers.

The death of her male relative carer when she was 12 was a cause of deep grief to Clare who had been very close to him. It also had a profound effect on her placement and she became unsettled thereafter. She found her remaining relative carer to be too strict. Their relationship became fraught when Clare would not conform to the boundaries set for her. She began to self-harm and expressed suicidal ideation. She attended the CAMHS service, and her school also expressed concerns about

her. The social work department initially tried to support and maintain her placement but ultimately her relative carer found that the stress of Clare's self-harm was untenable and it was agreed that she would move to another placement.

Following a stay in an emergency placement Clare moved into a long term foster placement where she stayed for thirteen months. Although she appeared to get on well with the foster carers and her self-harming reduced considerably, strains began to emerge as she wanted to spend increasing amounts of time with her boyfriend who was two and a half years older and on whom she had become very emotionally dependent. Her foster placement ultimately disrupted following an incident where she mitted from school and did not return home for two days and was later found to have been staying, concealed, in her boyfriend's house. The SWD pursued a residential placement at this point, considering it to be the better option for her. While this plan was taking shape, Clare spent time in two short term placements. The SWD and her former carers were concerned about the intensity of her relationship with her boyfriend and her inability to deal with the vicissitudes of a normal teenage romance which was off and on at different times. She formed a very good relationship with her second short term carer, and began a process of transition to the residential unit that had been chosen for her. In the interim, she visited her boyfriend at weekends when things were going well between them. She continued to attend the CAMHS service and was prescribed anti-depressant medication which was given to her by her carer. She had recently quarrelled with her sibling and her social worker took them out for a day together which was successful in reconciling them.

Ultimately, both Clare and her social worker decided that the residential option would not suit her; she had found some introductory visits upsetting and it was decided that she would remain on a long term basis with her carer, with whom she had formed a good relationship. The final decision about this was confirmed at a meeting that she attended and she was reportedly happy about it. Clare's school later complained that they had not been fully informed about her placement arrangements. Evidence from correspondence between them indicates that both the school and the SWD had difficulty communicating due to unavailability of staff in both services to take calls at the time they were made.

Sadly, Clare took her life a few days after the decision about her placement had been made. Although it appeared that her suicide had been planned by her during the few hours that preceded it, those who were in contact with her at the time commented that there had been no 'build up' over the days leading up to it and that she had seemed in generally good form, looking forward to decorating her new bedroom.

Findings

This review has not looked in detail at the quality of service provision in the early years of Clare's relative placement. Overall, there is evidence that once Clare was placed with her relative carers, concerns about her welfare and safety ceased and she was considered to be well looked after in a loving family environment. The review does raise the question, however, of whether sufficient consideration was given to placing Clare with her sibling, or whether the significance of separating them was fully understood.

The decision to place Clare in an alternative long term placement when she was older appears to have been made in her best interests, all other options having been considered. Her placements were well supported and she had regular contact with her social workers. She was provided with appropriate services to help her deal with her deep sadness at her relative carer's death and to help her address her increasing tendency to self-harm. Her best interests were also considered by her carers and her social workers when it became evident that her relationship with her boyfriend was unusually intense for someone of her age. Ultimately, her own wish not to move into the residential placement that was selected for her was heeded and an option that she apparently favoured was made available to her.

Conclusions

The review team is cognisant of the impact of Clare's tragic death and offers condolences to her family and to her former carers and all the professionals that worked with her. It has reached the following conclusions:

- Clare was appropriately received into the care of the then health board when she was a young child and her placement met her needs at the time, albeit that it would have been desirable to place herself and her sibling together.
- The placement of Clare and her sibling together was considered at different times, but various obstacles were identified, not least of which was the risk of disrupting the stability of their current placements. However, there is no evidence that the issue was prioritised for serious consideration as stipulated in the National Standards for Foster Care and it is not clear that the significance of separating them was fully understood.

- There were periods when Clare was in care when she had no allocated social worker, the longest one being when she was between nine and eleven years old. This, together with the fact that no fostering link worker was allocated to the family at the time, represented a breach of compliance with Child in Care Regulations.
- Bereavement and child and adolescent mental health services were available to Clare when they became necessary and the SWD facilitated her attendance at appointments.
- There is evidence that efforts were made find suitable carers and placements according to Clare's particular needs. At the time of her death Clare was in a placement that was considered to meet her needs, and she was receiving social work and mental health services.
- While interagency collaboration was generally good in this case, there is evidence of weak communication between the SWD and Clare's last school.

Key Learning

The main learning point from this review concerns the matter of placing siblings together and the importance of keeping them in contact with each other. It is worth considering what evidence on the placement of siblings demonstrates. Research¹ indicates that contact with siblings often represents what children value most in family life. It is recommended that if siblings cannot be placed together, practitioners should reflect on what precisely this means for them, and do their best to facilitate the contact that the children want. Children in foster care often experience losses of significant relationships and siblings are often their only source for continuity of important attachments. A recent Irish study (Cooper, 2013)² reiterates the strong sense of sadness experienced by young people in care who are separated from siblings and highlights the responsibility of social workers to keep it on the agenda.

Dr. Helen Buckley

Chair, National Review Panel

¹ <http://www.scie.org.uk/publications/guides/guide07/placement/siblings/>

² Cooper, A. (2013) An Exploration of Sibling Contact for Children in Foster Care
https://www.ucc.ie/en/media/academic/appliedsocialstudies/2013_AmandaCooper.pdf