



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Report on a follow-up inspection of the Health Service Executive fostering service in HSE Dublin North Area

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The Authority's mandate extends across the quality and safety of the public, private (within its social care function) and voluntary sectors. Reporting directly to the Minister for Health, the Health Information and Quality Authority has statutory responsibility for:

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Social Services Inspectorate — Registration and inspection of residential homes for children, older people and people with disabilities. Inspecting children detention schools and foster care services.

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Executive Summary

1. Introduction to Executive Summary

The Social Services Inspectorate (SSI) of the Health Information and Quality Authority (the Authority) carried out an announced follow-up inspection of the foster care service provided by the Health Service Executive (HSE) Dublin North Local Health Area (LHA). The purpose of the follow-up inspection was to assess the implementation of the relevant recommendations of the original full inspection report (see report ID number: 586), accessible on the HIQA website, www.hiqa.ie, which was published in July 2010.

The primary focus of the follow-up inspection was to assess HSE Dublin North's implementation of its action plan to implement *local* recommendations made by the Authority in the original full inspection report, published in July 2010. Where applicable this follow-up report also makes reference to the findings on compliance with national recommendations from the original inspection report. These national recommendations emanated from parallel inspections in HSE Dublin North Central and HSE Dublin North West Local Health Areas. In these two other LHAs, deficiencies were found and recommendations made that may have been applicable across all HSE areas and were therefore included in the original full inspection report for Dublin North Local Health Area. The HSE developed an action plan against the local recommendations in the Dublin North LHA. In the original full inspection, there were 12 numbered recommendations and associated sub-recommendations that required action by the Dublin North LHA. In August 2010, the HSE prepared the action plan in response to this report, and recommendations in this follow-up report are numbered as they appear in the HSE's action plan. Of the 68 numbered recommendations and sub-recommendations in the action plan, the Authority found that 44 had been met, 20 were partly met, and 4 were not met.

2. Findings on the follow-up inspection

This report details the actions taken in respect of all the recommendations. Those recommendations not met were in relation to the ongoing review of foster carers, the development of an out-of-hours service, the national register of allegations by children against foster carers, national transfer policy of children's cases between HSE areas and a national register of all foster carers. Recommendations that were met in part included: all children in foster care having an up-to-date care plan, the attendance of foster carers at training, the provision of guidelines in relation to the Child Care (Amendment) Act 2007 and the implementation of *Children First: National Guidelines for the Protection and Welfare of Children* (1999). Recommendations met included all children in foster care having an assigned social worker, all foster carers having an allocated fostering link social worker, and systems being in place to assess and manage risks associated with protection and welfare.

2.1 Data on children and their carers

At the time of the follow-up inspection there were 120 children in foster care in the Dublin North LHA. Inspectors examined the local register of children in foster care which indicated that on 24 January 2011, 55 children were in relative foster care and 65 were cared for by non-relative foster carers. All the children had an assigned social worker and all foster carers had an assigned link social worker.

2.2 Findings on the provision of the social work service for children in foster care

All of the children in foster care had an assigned social worker and all the foster carers had a link social worker. Inspectors received information from the HSE managers that showed that all of the 120 children had an assigned social worker. Furthermore there were no children in foster care on a waiting list for an assigned social worker.

Inspectors found that all the children in a sample of children interviewed had an assigned social worker. At the time of the commencement of the follow-up inspection, 104 of the 120 children in foster care had an up-to-date care plan which had been reviewed in accordance with statutory requirements. By the time the field inspection was completed inspectors found that 116 care plans were updated.

Social workers interviewed by inspectors presented again on this occasion as competent, child centred and committed to the continuing safety, care and happiness of the children. Inspectors found that they visited children frequently and displayed a comprehensive knowledge of their needs. There was a significant increase in the number of recently qualified social workers recruited in the Dublin North Area. Inspectors also found there had been an increase in the use of temporary staff.

Inspectors found that formal supervision continued to take place frequently and regularly. Inspectors examined a sample of case files, interviewed team leaders and social workers, and found supervision was of good quality. Inspectors found that formal supervision was frequent, on average occurring every six weeks. Recently appointed social workers received supervision on a weekly/fortnightly basis and they had a controlled caseload. One of the recently appointed staff told inspectors that she was well supervised and supported by the staff team.

At the time of inspection there was no formal induction programme in place for newly recruited staff. However, there was a coaching system in place where more experienced staff supported newly appointed staff. Members of the staff team interviewed by inspectors said that supervision was an effective mechanism for accountability and was both educational and supportive. However, inspectors found formal records of supervision to be minimal in some cases and advise that they be developed to reflect the high quality of supervision that was occurring.

There was one complaint in relation to social work practice since the last inspection. Inspectors reviewed records of how this complaint was reviewed, and judged that it

was managed appropriately. Inspectors found the standard of social work recordkeeping was good. There continued to be good recording systems in place. In the sample group all the case files had comprehensive care plans and statutory reviews and all the documentation required by regulations[‡] and the National Standards*. Inspectors noted again that the professional aspects of recordkeeping were complemented by an insightful and respectful tone. This was apparent in all case files read by inspectors and reflected a culture of respect and awareness that the children may seek sight of their records now or in the future.

2.3 Findings on the role of the link social worker for the foster carers

Inspectors found all foster carers in the sample group had a link social worker. Inspectors interviewed a sample of link social workers and found them well informed about their foster carers again on this occasion. There was evidence that they visited the carers and their children and provided them with supervision and support on a regular basis. There was also evidence that the social workers were in regular contact with foster carers by telephone.

Foster carers interviewed by inspectors said that their link workers continued to be accessible and supportive and responsive about any concerns they had about the placement. One foster carer said the link worker was very accessible and supportive and had given her good guidance over a number of years. Inspectors found that there continued to be frequent and very good communication between the child's social worker and the fostering link worker. Inspectors found a recommendation from the previous inspection that foster carers receive minutes of statutory reviews was now met.

A process of reviewing foster carers in HSE Dublin North had recently been approved by HSE management. It is a requirement under the National Standards that foster carers participate in reviews to ensure continued high quality placements. Inspectors were told that reviews themselves had not occurred. The recommendation to review foster carers should be implemented as a matter of priority.

Core training for foster carers was being delivered at the time of the inspection at more flexible times. There was evidence that training course attendance by foster carers had increased significantly since the last inspection. However, poor attendance by foster carers was evident in some cases.

2.4 Safeguarding and child protection

Inspectors found that the safeguarding and child protection standard was met. During the original full inspection, inspectors were satisfied that the Area had a

[‡] This term is used throughout the report to refer to the Child Care (Placement of Children in Foster Care) Regulations 1995, and the Child Care (Placement of Children with Relatives) Regulations 1995.

* *National Standards for Foster Care* (2003). These Standards are a set of 25 National Standards based on legislation, regulation, guidance, best practice and consultation. Their purpose is to serve as a basis for consistently promoting quality of care in foster care services nationally. They are referred to in the report as the National Standards or the Standards.

robust assessment model to identify care and protection needs of children. During the follow-up inspection, inspectors found that HSE Dublin North Local Health Area had implemented a standardised assessment model as part of the implementation of the Differential Response Model, which was a new model for service delivery.

In the past social workers were involved in a range of services to children, from foster care, child protection and welfare. One of the strengths of the HSE Dublin North Area LHA as identified in the last inspection report was the good practice of children maintaining the same social worker for significant periods of time, in some instances, for a number of years. There was evidence of social workers continuing to be the child's social worker in circumstances where the child was transferred within the Dublin North Local Health Area. This practice was found by inspectors to be in the child's best interest at the time. The flexibility demonstrated by social work managers and the staff team was commendable.

Inspectors found the same commitment by the social workers during this inspection as seen during the previous inspection. However, the majority of the staff team interviewed were concerned that the child-centred delivery of services was in danger of diminishing because of the new team structure. This issue is addressed further under the section on governance and management.

2.5 Governance and management

Overall, inspectors again found a high standard in the provision of foster care services to the population of Dublin North. There had been significant changes in the governance and management of the foster care service in HSE Dublin North LHA since the last inspection. One of these was a change in the governance of the social work service in Dublin North. In the original full inspection, there was one principal social worker who managed the Dublin North social work service. However, following the implementation of a new model for service delivery, namely the Differential Response Model, the social work service was now divided into three separate functional teams led by three principal social workers. They reported to the Acting General Manager who in turn reported to the Local Health Manager. The three new teams were: intake referral, welfare, and alternative care and fostering. Inspectors found that the HSE Dublin North had significantly increased the number of social workers through recent appointments, some on a permanent basis and others on short-term contracts.

However, inspectors were told that the new team structure could lead to multiple social worker involvement, thereby diminishing one of the key strengths manifested in the Area as outlined in the original full inspection report. In the last inspection, inspectors observed that the focus of the team and management at all levels was child centred. This was reinforced at the time of the previous inspection in interviews with a sample of children and their families.

While inspectors acknowledge the functional team structure was at an early stage of development, it is imperative that Dublin North LHA management and the staff team form a coalition in the strategic management of these major changes.

The HSE Dublin North were chosen as the national pilot site for the Differential Response Model (DRM), which is a new service delivery programme in line with best practice models internationally and which will be evaluated by the Child and Family Research unit in NUI Galway throughout 2011.

It was envisaged by the HSE that under the DRM change management programme social workers would provide more responsive, timely and effective services to children in need and at risk. Inspectors will monitor in future inspections the impact of the programme on the provision of DRM on the good social work service seen during this and the previous inspection. Inspectors found that there was universal support and commitment amongst the staff team members interviewed to implementing the DRM model.

While this was a positive progression for the service, inspectors found that the impact of its speedy implementation caused uncertainty and a diminution of morale amongst the majority of the staff team interviewed by inspectors. They were told that these changes generated some negative outcomes. For example in the last inspection, inspectors found that a great deal of time was devoted to direct social work with children and their families. On this occasion, it was evident that requirements of a new system resulted in far more administrative input by the social workers and therefore fewer hours to carry out direct social work with children and families. Inspectors were told that to compensate for this, social workers were choosing to work significantly extra hours including Saturdays to maintain the level of client contact that they had achieved in the past.

2.6 Day-to-day experiences of foster children in the sample group

A small sample of children and young people interviewed by inspectors during this follow-up inspection told inspectors that they had a very good relationship with both their social workers and aftercare workers and found them very helpful. One young person told inspectors that his social worker is "really sound and would do anything to help you". Another young person said that when he was looking for courses and accommodation as part of his aftercare plan the aftercare worker "looks up courses and accommodation even on her days off". One of the foster carers interviewed as part of the follow-up inspection told inspectors of a social worker who had been the child's social worker for a number of years. The carer said that the social worker had made such a positive difference to the family's life through his ability to approach situations constructively and bring insight to family challenges in a humane, insightful and non-judgemental way. Inspectors found this to be very good social work practice.

2.7 Conclusion

Inspectors found that the majority of the local recommendations were met. All children in foster care had an allocated social worker and there was evidence that the quality of the foster care service was good. Foster carers had allocated fostering link workers who provided regular supervision and support to them. There was good communication and joint working between social workers and fostering link workers.

Inspectors found that there was a culture of formal supervision of social workers which was frequent and of a high quality. There was a system of coaching new social workers undertaken by more experienced colleagues. Case records continued to be of a good standard.

Inspectors found that the recommendation in respect of reviews for foster carers was not met. While some progress was made in the development of a review procedure, reviews had not occurred. There was progress in the attendance by foster carers at training, however, further improvement is required.

Dublin North Local Health Area had introduced a new governance structure since last inspection. They also introduced a Differential Response Model (DRM) in the assessment of children in relation to their welfare and protection. Challenges were identified by inspectors in the implementation of DRM and the new structure. Ongoing consultation between staff and management is necessary to maintain the good standard of service to children in foster care.

Children interviewed by inspectors highlighted their good relationships with their foster carers, social workers and aftercare workers. Inspectors found there continued to be a good standard in social work practice provided by a committed staff team who remained child centred in their approach to their work.

2.8 Next steps

From the time of the publication of this report, the Authority requires the HSE to provide it with quarterly reports on the progress made on all of the unmet and partly met recommendations. The HSE is also required to provide the Authority with all foster care monitoring reports.

In order to verify progress, and to ensure that children in foster care are receiving a safe service compliant with the requirements of regulations and Standards, and consistent with current best practice, the Authority will carry out further inspections of the Dublin North Local Health Area fostering service as it deems appropriate.

The Authority will also:

- report to the Minister for Children on the findings of all inspections of the HSE Dublin North fostering service
- continue to carry out and publish inspections of foster care services provided by the HSE in its 32 local health areas
- review progress at a national and local level on an ongoing basis through the foster care monitoring reports, the quarterly written reports from the HSE to the Authority, and updated national and local foster care action plans.

1. Introduction

The Social Services Inspectorate (SSI) of the Health Information and Quality Authority (HIQA or the Authority), which incorporates the Office of the Chief Inspector of Social Services, is responsible for the inspection of Health Service Executive (HSE) foster care services under the Child Care Act, 1991 until such time as the relevant part of the Health Act 2007 is enacted.

The Authority carried out an announced follow-up inspection of the foster care service provided by the HSE Dublin North Local Health Area (LHA) in order to assess the implementation of the relevant recommendations of the inspection report (Inspection ID: 586, available on the HIQA website at www.hiqa.ie) which was published in July 2010. This follow-up inspection was carried out by inspectors under Section 69(2) of the Child Care Act, 1991 between 7 to 24 February 2011

2 Background

The original full inspection of the foster care services in the HSE Dublin North Area in 2009 and 2010 highlighted some areas where improvements in the service were required. This original full inspection report was published in July 2010 and the full inspection carried out in parallel with HIQA inspections of foster care services in two other HSE local health areas (LHAs) in Dublin. The findings in this follow-up report should therefore be read in conjunction with the Authority's recommendations and findings in the original full inspection reports (for HSE Dublin North Central and HSE Dublin North West, inspection report ID numbers 587 and 588 respectively), and follow-up inspection reports for these LHAs.

The follow-up inspections of these local health areas was undertaken in 2011. In HSE Dublin North LHA, inspectors found that many of the recommendations from the original full inspection were met or partly met in the Area. The parallel full inspections of Dublin North Central and Dublin North West Local Health Areas in 2009/2010 found deficiencies leading to recommendations that may be applicable across all HSE areas. Therefore, these recommendations were included in the 2010 original full inspection report for Dublin North LHA. Where these recommendations were not relevant for the follow-up inspection of HSE Dublin North LHA, this is indicated in this follow-up report.

3. Methodology

Inspector's judgments are based on an analysis of findings verified from several sources of evidence including interviews, observation and a review of records and documentation as listed below. In the last full inspection, inspectors found overall that the majority of the National Standards in relation to foster care in this area were met. The focus of this inspection was the HSE Dublin North Action Plan, returned to the Authority in response to local and national recommendations of the inspections

carried out in Dublin North, Dublin North Central and Dublin North West in 2009/2010.

Inspectors reviewed the following documents during the follow up inspection:

- HSE National Action Plan 586/587/588
- Area register of children in foster care
- Area register of foster carers
- Area register of relative foster carers
- document detailing the following:
 - number of children in care on the date of announcement of the follow-up inspection
 - number of placements since the last inspection
 - number of emergency placements since the last inspection
 - number of children without an assigned social worker
 - number of children without a care plan
 - number of children aged 16 and over without an aftercare plan.
 - number of children whose cases have been assessed as high risk.
- Documents detailing the following:
 - complaints since the last inspection
 - allegations against foster carers since the last inspection
 - samples of children and foster care files
 - parents questionnaires
 - questionnaires completed by social workers and link workers for the children and carers
 - development of a Differential Response to Child Protection and Welfare.
 - HSE Monitoring officer's report on complaints and allegations in foster care
 - HSE Monitoring officer's audit report on staff supervision
 - HSE National Child and family services staff supervision policy
 - current organisational structure and establishment of the teams.
 - questionnaires completed by the foster carers.

The inspection follow-up fieldwork took place over three weeks and included interviews with four children, the HSE Monitoring Officer, the Fostering Training Officer, an aftercare worker, 14 social workers, the Local Health Manager, the General Manager, Children and Family Services, a principal social worker for fostering, four social work team leaders, and seven foster carers.

3.1 Acknowledgements

The Authority wishes to acknowledge the cooperation of the children, their parents and carers, the HSE management, social work and administrative staff. In particular, inspectors wish to thank the children and their carers for the openness with which they embraced the inspection process and welcomed inspectors into their homes and shared their experiences of fostering.

4. Findings

4.1 Overview of the HSE Dublin North Area fostering service

Local Health Office Dublin North Area provides services to the communities of the district of Dublin City North and the Fingal district stretching along the coastline from Raheny, Sutton, Howth, Portmarnock, Rush, Skerries to Balbriggan. Inland, it encompasses Donaghmede, Coolock, Darndale, Swords, Ballyboughal, Oldtown, Garristown and the Naul.

HSE data indicates that in 2008, 103 (2%) of the 4,742 children in foster care nationally were in HSE Dublin North. This data shows that the percentage of children placed in foster care in this Area was considerably lower than other HSE local health areas such as Dublin North Central and Dublin North West. At the time of the follow-up inspection in February 2011 there were 120 children in foster care in the HSE Dublin North Local Health Area.

5. HSE's progress in implementing recommendations

The progress of the HSE against the specific recommendations contained in the Authority's original full inspection report are set out here. The recommendations appear in tables, and are presented alongside the HSE's action plan from August 2010. The status of the recommendation at the time of the inspection is also shown in the tables. Recommendations in this follow-up report are numbered in the tables as they appear in the HSE's action plan. These are outlined in the first column on the left. The actions reported or proposed by the HSE after receipt of the full inspection report are in the second column. This section also identifies those whom the HSE nominated as responsible for the implementation of the plan along with a timescale proposed by the HSE. In the third column on the right is the Authority's response following the current follow-up inspection indicating whether the recommendation has been met, partly met, or not met. Below each table is a description of the measures taken to fulfil the objectives of the action plan, and, where appropriate, inspectors' comments on the progress made. Table 1 shows the meaning of acronyms and generic words that appear in the HSE action plan.

Table 1. Key to text and terms used in HSE action plan

| Acronym or words used | Definition |
|-----------------------|---|
| ACM | Alternative Care Manager |
| AND | Assistant National Director |
| DRM | Differential Response Model |
| FTL | Foster Team Leader |
| GM | General Manager |
| ISA | Integrated Service Area |
| IAYPIC | Irish Association of Young People in Care |
| LHM | Local Health Manager |
| LHO | Local Health Office |
| National Office | HSE Office of the National Director of Children and Family Services |
| NSP | National Service Plan |
| NWD | North West Dublin |
| CTDU | Child Care Training and Development Unit |
| PSW | Principal Social Worker |
| RDO | Regional Director of Operations |

5.1 Follow-up findings on the provision of the social work service for children in foster care

Recommendation 1

Standard 5: The Child and Family Social Worker
Regulation: Part IV

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| <p>To meet this Standard and the regulations the HSE must:</p> <p>Recommendation 1.1 Ensure that all children in foster care have an assigned social worker.</p> | <p>HSE actions At the second phase of inspection all children in foster care in Dublin North had an assigned social worker. In future, all children being placed in foster care will have an assigned social worker at time of placement.</p> <p>Persons responsible: Principal Social worker</p> <p>Timescale: Completed</p> | <p>Recommendation met</p> |

Inspectors found that this recommendation was met. A review by inspectors of the register of children in foster care indicated that all children had an assigned social worker. Inspectors received information from the HSE managers, which confirmed that 120 children in foster care had an assigned social worker. Furthermore there were no children in foster care on a waiting list for an assigned social worker. This was verified by interviews with senior managers, social workers and a review of sample case files.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 1.2 Ensure that assigned social workers coordinate the care of children in accordance with the regulations and National Standards, paying particular attention to the assessment of the needs of individual children, quality care planning and case review and the visiting of children.</p> | <p>HSE actions Assigned social workers are compliant with the regulations and the National Standards. All cases are reviewed and children are visited within the recommended timescales. The Principal Social Worker North Dublin ensures that all assigned social workers and team leaders are aware of their responsibilities in relation to quality care planning.</p> <p>Persons responsible: Principal Social Worker, Team Leader and social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found that social workers assessed the needs of children and young people in foster care. Inspectors also found that social workers coordinated the care of children in accordance with regulations and National Standards. Social workers interviewed by inspectors presented again on this occasion as competent, child centred and committed to the continuing safety, care and happiness of the children. There was evidence that they visited children frequently and displayed a comprehensive knowledge of their needs.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 1.3 Ensure that all children aged 16 and over have an aftercare plan and are adequately supported in leaving foster care.</p> | <p>HSE actions All young people in foster care over the age of 16 will have an Aftercare Plan completed in collaboration with their carer, assigned social worker, and aftercare worker where available.</p> <p>Persons responsible: Principal Social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found there was a high level of awareness amongst the members of the social work team that an aftercare plan is developed for children over 16 years of age. This recommendation is further developed in the section relating to recommendation 2.8.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>To meet this Standard and the regulations the HSE must develop, implement and assure the quality and effectiveness of the monitoring systems that:</p> <p>Recommendation 1.4.1 Assess and manage the risk in the cases of children and families, including those awaiting a social work service.</p> | <p>HSE actions There are no children in care or fostering cases currently awaiting a social work service in Dublin North.</p> <p>Persons responsible: Principal Social Worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

Inspectors found that this recommendation was met. They found that all children in foster care in the Area had an assigned social worker. The HSE Dublin North Local Health Area was chosen as the national pilot site for the implementation of Differential Response Model (DRM). This assessment-and-management-of-risk model is a new service delivery programme which is considered to be in line with best

international practice models and which is being evaluated by the Child and Family Research Unit in NUI Galway throughout 2011.

It was predicted that under the DRM change management programme, social workers would provide more responsive, timely and effective services to children in need and at risk in the Area as well as continuing the good practice to children in care.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|---|
| <p>Recommendation 1.4.2 Supervise social workers and social work practices to a satisfactory standard.</p> | <p>HSE actions Formal supervision is carried out monthly and is to a satisfactory standard. The Monitor is currently undertaking an audit of supervision in the LHO.</p> <p>Persons responsible: Principal Social Worker, team leader and Monitoring Officer</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found that formal supervision continued to take place frequently and regularly. Formal supervision of the staff team had been subject to an internal monitoring report by the HSE monitoring officer who found that there was a culture of formal supervision in the Dublin North Area and found it was regular and in line with good practice. Inspectors perused a sample of case file records and found supervision was of good quality. On average formal supervision was occurring every six weeks. However, recently appointed social workers received supervision on a fortnightly basis and they had a controlled caseload. Members of the social work staff team interviewed by inspectors said that supervision was an effective mechanism for accountability and was both educational and supportive.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| <p>Recommendation 1.4.3 Define a significant event, ensure that all significant events are notified to social workers in a prompt manner and that social workers respond to these notifications in accordance with HSE policy.</p> | <p>HSE action A significant event has been defined as per the Dublin North East Standardised Policies and Procedures for Children’s Residential Centres, pending the development of a definition for foster care. Training will be provided for foster carers to ensure they are aware of the process for dealing with such events and that they are aware of their responsibilities in this regard, Social workers will respond to these notifications in accordance with HSE policy.</p> <p>Persons responsible: Principal Social worker, Fostering team leader</p> <p>Timescale: December 2010</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found that social workers and foster carers interviewed had a comprehensive understanding on the need for notifications of significant events. Foster carers in the sample group were aware of how to notify social workers and what was deemed as significant. Social workers interviewed were satisfied that they received the relevant information in a timely manner.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 1.5 Children are placed with carers who are chosen for their capacity to meet the assessed needs of the child through the matching process.</p> | <p>HSE actions All children in long term care will be presented to the placement committee for matching with their long term carers.</p> | <p>Recommendation met</p> |

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--------------------------------------|---|--|
| | <p>Persons responsible: Principal social worker, Fostering team leader team leader.</p> <p>Timescale: December 2010</p> | |

This recommendation was met. Inspectors received written confirmation from the HSE North Local Health Area that all foster carers were subject to full assessment and matching for suitability. Inspectors interviewed the Principal Social Worker for foster care, six link social workers and a sample of foster carers. Inspectors also perused files of foster carers in the sample group and found comprehensive assessments of foster carers that were congruent with the needs of the respective child. The action plan indicated that the HSE intended every child in long-term foster care would be presented to the Foster Care Committee[‡] for suitable matching and inspectors found this was occurring in practice.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| <p>Recommendation 1.6 All children have an up-to-date care plan as required by regulations and the National Standards.</p> | <p>HSE actions At the time of inspection there were 16 care plans outstanding. These have now been completed.</p> <p>Persons responsible: Principal Social Worker Team Leader</p> <p>Timescale: December 2010</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. At the time of the commencement of the follow-up inspection in February 2011, 104 of the 120 children had an up-to-date care plan and had completed their statutory reviews. By the time of the completion of the fieldwork of the follow-up inspection 116 care plans for children had been updated and four were nearing completion. Inspectors were informed by a social

[‡] A foster care committee comprises professionals such as public health nurses, social care managers, and social workers, and includes people with expertise in child welfare and foster care. It recommends for approval, or rejection, applications to become foster carers on the social worker's assessment and other relevant information.

work team leader that the cause of the delays in the majority of these cases was either illness in a family of origin or the social worker was awaiting a court decision in relation to the future care of the child. Inspectors recommend the remaining care plans are completed as soon as possible. Inspectors perused a sample of the files of children in foster care and found all the children in the sample group had up-to-date and comprehensive care plans.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|---|
| <p>Recommendation 1.7 All foster carers receive minutes of statutory care reviews as required by the regulations and National Standards.</p> | <p>HSE actions All relevant parties including foster carers now receive minutes of statutory care reviews as required by the national standards.</p> <p>Persons responsible: Team leader and social worker.</p> <p>Implementation date: Completed</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors were provided with written information from the HSE Dublin North LHA that all foster carers received minutes of statutory reviews as required by the Standards. Social workers interviewed by inspectors confirmed it was now standard practice to ensure that following a statutory review, foster carers received minutes. Inspectors also perused a sample of case files and found that this was recorded as occurring in practice. Inspectors also interviewed foster carers from the sample group who confirmed that they had received minutes of the last statutory review of the child in their care.

5.2 Follow-up findings on the provision of link social workers for the foster carers

Recommendation 2

Standard 15: Supervision and Support

Regulations: Part III and Part IV

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>To meet this Standard and the regulations the HSE must:</p> <p>Recommendation 2.1 Ensure that all foster carers have an assigned link social worker.</p> | <p>HSE actions All foster carers have an assigned link worker.</p> <p>Persons responsible: Principal Social Worker</p> <p>Timescale: Completed</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found that all foster carers had an assigned link social worker. A register was maintained in the Area which identified the link social worker for each carer. From a perusal of files and interviews with foster carers and link social workers, inspectors found that carers were regularly supervised by the link social worker who had a comprehensive knowledge of the placement.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 2.2 Ensure that link social workers carry out their duties in accordance with the regulations and the National Standards, paying particular attention to the formal supervision of foster carers.</p> | <p>HSE actions Fostering Link Workers carry out their duties and supervise foster carers in accordance with the Regulations and National Standards. They will continue to be supported in this by the Fostering Team Leader.</p> <p>Persons responsible: Principal Social worker and Fostering Team leader</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

Inspectors found this recommendation was met. Each fostering link worker had an allocated number of foster carers which they supervised on a regular basis. Foster carers interviewed by inspectors said that their link social workers continued to be accessible, supportive and responsive about any concerns they had about the placement. Two foster carers interviewed by inspectors said that they were supervised by the same fostering link social worker over a number of years. They said the link worker was very accessible and helpful and had given them good advice and direction. Inspectors found that there continued to be frequent and very good communication between the child's social worker and the fostering link social worker.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>Recommendation 2.3 Agree on and provide core training to all foster carers.</p> | <p>HSE actions All foster carers in Dublin North are required to attend the Foundations for Fostering Course as part of core training for foster carers prior to any placement. All relative carers will be required to attend the new Fostering Relations course as part of their core training prior to any long-term placements, commencing October 2010.</p> <p>Persons responsible: Fostering Team leader</p> <p>Timescale: Ongoing October 2010</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors found that core training for foster carers was now delivered at more flexible times such as in the evening to accommodate foster carers' attendance. The fostering team leader told inspectors that the training course attendance had increased significantly since the last inspection. Three foster carers told inspectors that a recently completed course for relative carers was informative and central to their needs and requirements as carers. Another programme was delivered during the weekend to the foster carers' own children which had very good attendance and reported feedback was positive.

However, inspectors perused a number of foster carer's files and found that attendance was poor in some cases. This needs to be further addressed by the Dublin North Area.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>Recommendation 2.4 Revise contracts with foster carers to ensure compliance with HSE policy generally and attendance at core training in particular.</p> | <p>HSE actions All new carers are now issued with a signed copy of their contract in accordance with the Standards and Regulations. All carers will be issued with a copy of their contract, which will include a requirement to attend training, in accordance with the Standards and the Regulations, where this is outstanding.</p> <p>Persons responsible: Fostering Team Leader</p> <p>Timescale: October 2010</p> | <p>Recommendation met</p> |

Inspectors found this recommendation was met. In the last inspection, inspectors were concerned about the poor attendance at training courses for carers and recommended that this be addressed. Inspectors found improvements during this follow-up inspection. Attendance at fostering training courses was now a written condition in the foster carer's contract with the HSE. Fostering link social workers also consulted foster carers as part of a training audit to ensure that courses were relevant and responsive to the training requirements of the carers.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>Recommendation 2.5 Ensure that assessments for the purpose of matching the needs of individual children with the capacity of foster carers to meet these needs are carried out in accordance with National Standards and HSE policy, and recorded appropriately.</p> | <p>HSE actions Dublin North is in the process of ensuring all long-term matches for children in care are presented to the Placement Committee for approval as required.</p> <p>Persons responsible: Fostering team Leader and Team leader</p> <p>Timescale: December 2010</p> | <p>Recommendation met</p> |

This recommendation should be read in conjunction with recommendation 1.5 above. Inspectors found that all foster carers were subject to full assessment for suitability. It was practice in the Area to ensure that long-term placements for children were approved by the Dublin North Foster Care Committee.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 2.6 Ensure that a review of all foster carers takes place as required by the National Standards, and that the Foster Care Committee is informed of the outcomes.</p> | <p>HSE actions: A process for reviewing all foster carers in Dublin North has commenced. With immediate effect, priority will be given to reviewing carers where a significant change in their circumstances or the circumstance of a child or a care breakdown has occurred. The fostering committee will be informed in writing of the outcome of these reviews.</p> <p>Persons responsible: Fostering team Leader</p> <p>Timescale: Sept 2010</p> | <p>Recommendation not met</p> |

Inspectors found that this recommendation was not met. A process of reviewing foster carers in Dublin North had recently been approved by HSE management at the time of the inspection. Inspectors were told that reviews themselves had not occurred and that a protocol for the reviews had not been developed, and that other priorities such as the assessment of foster carers and supervising children in care took precedence. This recommendation should be implemented as a matter of priority.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|---|
| <p>Recommendation 2.7 Ensure that all foster carers and children are provided with guidelines in relation to the Child Care (Amendment) Act 2007.</p> | <p>HSE actions HSE Dublin North is awaiting national guidance on this matter.</p> <p>Persons responsible: National Office</p> <p>Timescale: December 2011</p> | <p>Recommendation met in part</p> |

The recommendation that foster carers and children were provided with guidelines in relation to the Child Care (Amendment) Act 2007 was met in part. This Act provides for enhanced rights for foster carers in specific circumstances. Inspectors found that some foster carers were not aware of this provision. The HSE had issued written guidelines to staff. However, some staff in the social work department interviewed were unaware of its existence. In addition, the guidelines outlined policy in relation to the payment of legal fees for foster carers who wished to avail of these rights. Despite this, social workers and link social workers who were aware of the content of the guidelines believed that the matter of legal fees for foster carers had not been resolved. The HSE should ensure that written guidance and briefings are provided to children, social workers and foster carers.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|---|
| <p>Recommendation 2.8 Ensure that foster carers and children are made aware of local aftercare services for children approaching 18 years of age and young people who are 18 years and over who have been discharged from care.</p> | <p>HSE action All foster carers and children in foster care will be provided with information in relation to aftercare services locally. Similar information will be provided to young people who have been discharged from care. This information is in the process of being developed from the national policy on aftercare.</p> <p>Persons responsible: Fostering team leader, Team leader, Principal Social Worker</p> | <p>Recommendation met</p> |

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--------------------------------------|----------------------------------|--|
| | Timescale: September 2010 | |

A recommendation to ensure that foster carers and children are made aware of local aftercare services had been met. It was the practice of social workers and aftercare workers to communicate to children in care as required. At the time of the inspection, inspectors received written information that it was standard practice that all foster carers and children in foster care were provided with information in relation to local aftercare services. Foster carers and young people over 16 years interviewed by inspectors were aware of the local aftercare services.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>Recommendation 2.9 Ensure that a formal exit interview is conducted with foster carers and the child in all cases where there is long-term placement termination, and that sufficient supports are made available to foster carers who would like this support.</p> | <p>HSE actions: Formal exit interviews have commenced as required by the National Standards. HSE LHO Dublin North has nominated an appropriate person who is not directly involved with case activity to conduct these exit interviews. Two exit interviews have already been completed.</p> <p>The learning from these interviews will be shared and will inform the management and development of the service and FCC practices in approving future foster care applicants.</p> <p>Persons responsible: Fostering Team Leader Team leader, PP CTDU</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. The HSE Dublin North LHA had appointed an independent professional who made herself available to provide an exit interview for foster carers following long-term placement breakdown. Inspectors found that three exit interviews with foster carers had occurred since the foster care inspection in 2009-2010. A further two exit interviews were being considered with the relevant foster carers at the time of the follow-up inspection.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|---|
| <p>Recommendation 2.10 Ensure there is an out-of-hours social work service to provide support to children in care and carers in emergency situations.</p> | <p>HSE actions: There is currently no formal provision of an out-of-hours service though all foster carers have the mobile number of their fostering link worker. Any carer with a placement during normal working hours is supported by the link worker for as long as necessary and a breakdown report is submitted to the Foster Care Committee. The provision of a local out-of-hours service will be informed by the outcome of proposals to develop such a service by the national office.</p> <p>Persons responsible: Local Health Manager and National Office.</p> <p>Timescale: Ongoing</p> | <p>Recommendation not met</p> |

This recommendation was not met. While aftercare workers, social workers and link social workers in HSE Dublin North LHA were seen by inspectors to be dedicated and committed to the young people in foster care and often worked after hours to ensure good outcomes for the young people, there was no official out-of-hours service. The HSE should ensure that a national out-of-hours service is developed as a matter of priority.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|---|
| <p>Recommendation 2.11 Review how training is provided to all foster carers and address their low take up and attendance at training provided to them in the area.</p> | <p>HSE actions A review of the delivery of training is in process to identify reasons for low take up and attendance with a view to putting measures in place to remedy this. Attendance at core training is compulsory and the contract will reflect the need to do so and to attend other briefings such as new standards etc.</p> <p>Persons responsible: Fostering team leader, CTDU</p> <p>Timescale: September 2010</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Since the last inspection, the HSE Dublin North LHA had revised the contract between the HSE and the respective foster carers to include a provision that attendance at training is now an explicit part of the contract. Inspectors were given written evidence that courses were more frequent and the times and venues more responsive to the needs of the foster carers. Foster carers' attendance had improved since the last inspection. Inspectors also found the training material to be informative and relevant to the needs of the foster carers. However, from a perusal of the sample foster files inspectors found some gaps in foster carers' attendance at training courses with no explanation given in some cases. Inspectors recommend that link social workers strongly encourage carers to attend training as required by the National Standards and as per a condition of their contract with the HSE Dublin North LHA.

Recommendation 3

Standard 14(a): The Foster Carers (non-relative)
Regulations: Part III s.5 (2)(a)(b)(c)(d)

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| <p>To meet this Standard and the regulations the HSE must:</p> <p>Recommendation 3.1 Approve and implement a model of assessment for non-relative foster carers, and provide clear guidance on the content and structure of assessment reports provided to the Foster Care Committee(s) by link workers.</p> | <p>HSE actions Dublin North assesses relative and non-relative foster carers using the agreed model of assessment. All link workers are trained in the application of this assessment model and clear guidelines accompany the assessment document.</p> <p>Persons responsible: Fostering team leader, CTDU</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

In the 2009-2010 inspection, inspectors found that HSE Dublin North LHA had clear policies for the assessment and approval for non-relative foster carers. The process was deemed to be comprehensive and professional and this recommendation continues to be met. Dublin North Local Health Area had an agreed model of assessment for non-relative foster carers. All link workers were trained in the application of this model and assessment reports are provided to the Foster Care Committee.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>Recommendation 3.2 Satisfy itself that all non-relative foster carers are assessed and approved in accordance with the National Standards and the regulations and within the statutory timescales.</p> | <p>HSE actions All relative and non-relative foster carers are assessed and approved in accordance with the National Standards and Regulations. The process has been improved so that all new assessments are now completed within the statutory timescales, under our control.</p> | <p>Recommendation met in part</p> |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| | <p>Persons Responsible: Fostering team leader</p> <p>Timescale: Ongoing</p> | |

Inspectors found that assessments of non-relative foster carers were not completed within the statutory timescales in most cases. Factors contributing to the delays included increased social work demands and challenges in obtaining Garda Síochána checks within the assessment period. Inspectors were told by members of the Social Work Department that there was a substantial increase in the administration work associated with preparing assessments reports, however, there has been a reduction in administrative staff to support this demand. Inspectors were told that the Social Work Department was developing a new assessment model that would expedite the assessment of relative and non-relative carers. The HSE Dublin North LHA needs to ensure that non-relative foster care assessments are completed within the statutory timescale.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 3.3 As a matter of priority, ensure that any deficiencies in the vetting of existing non-relative foster carers are identified and addressed in an effective way.</p> | <p>HSE actions All existing relative and non-relative carers in Dublin North are vetted appropriately.</p> <p>Persons responsible: Principal Social Worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors found that while there were some delays in attaining Garda Síochána checks within the timescale required, there were no evidence of delays in sourcing references and medical records for non-relative carers.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|---|
| <p>3.4 Ensure that where there is a delay in the completion of an assessment of non-relative foster carers, carers are kept informed as required by the National Standards.</p> | <p>HSE actions It is now practice in HSE Dublin North that where there is a delay in the completion of an assessment the applicants are informed of this in writing by their assessing social worker and a new date for the completion of the assessment is given to the applicants. There is currently a significant delay in receiving clearance from the Garda Vetting Unit which impacts on the timescale.</p> <p>Persons responsible: Fostering team leader, social worker</p> <p>Timescale: Completed</p> | <p>Recommendation met</p> |

This recommendation was met. There were a total of nine foster care assessments since the last inspection. None of the assessments were completed within the time frame as required by the Standards. Some of the delays involved awaiting the receipt of both Garda Síochána checks information and in some cases the HSE needed international police clearance. In other cases, illness and other work priorities caused the delay. However, at the time of the inspection it was practice to give the foster carers written information outlining the reason for the delay and proposing a new date for the assessment completion.

Recommendation 4

Standard 14(b): The Foster Carers (relative)
Regulations: Part III s.5 (1)(a)(b)(c)(d)

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>To meet this Standard and the regulations the HSE must:</p> <p>Recommendation 4.1 Approve and implement a model of assessment for relative foster carers, and provide clear guidance on the content and structure of assessment reports provided to the Foster Care Committee(s) by link social workers.</p> | <p>HSE actions Dublin North currently assesses relative foster carers using the approved model.</p> <p>Persons responsible: Fostering team leader</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

As referenced in recommendation 3.1 relating to non-relative foster carers, the Authority found in the 2009-2010 inspection that HSE Dublin North LHA had clear policies for the assessment and approval for relative foster carers. The process used in the Area was deemed to be comprehensive and professional in both the full and follow-up inspections. In both inspections, HSE Dublin North Local Health Area had an agreed model of assessment for relative foster carers. All link workers were trained in the application of this model and assessment reports were provided to the Foster Care Committee. This recommendation was met.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>Recommendation 4.2 Ensure that all relative foster carers are assessed and approved in accordance with the National Standards and the regulations and within the statutory timescales.</p> | <p>HSE actions All relative foster carers are assessed and approved in accordance with the regulations. The process has been improved so that all new assessments are now completed within the time frames under our control.</p> | <p>Recommendation met in part</p> |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| | <p>Persons responsible: Principal Social Worker and Fostering team leader</p> <p>Timescale: September 2010</p> | |

This recommendation was met in part. As outlined in recommendation 3.2 regarding non-relative carers, inspectors found that assessments of relative foster carers were not completed within the statutory timescales in most cases. Factors contributing to the delays included increased social work demands and challenges in obtaining Garda Síochána checks within the assessment period. Similar to the situation for non-relative foster carers, inspectors were told by members of the Social Work Department that there was a substantial increase in the administration work associated with preparing assessments reports, however, there has been a reduction in administrative staff to support this demand. Inspectors were told that the Social Work Department was developing a new assessment model that would expedite the assessment of relative and non-relative carers. The HSE Dublin North Local Health Area needs to ensure that relative foster care assessments are completed within the statutory timescale.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>Recommendation 4.3 As a matter of priority, ensure that any deficiencies in the vetting of existing relative foster carers are identified and addressed in an effective way.</p> | <p>HSE actions All existing relative carers in Dublin North are appropriately vetted.</p> <p>Persons responsible: Principal Social Worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors found that while there were some delays in attaining Garda Síochána checks within the timescale required, there were no evidence of delays in sourcing references and medical records for relative carers.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 4.4 Ensure that where there is a delay in the completion of an assessment of relative foster carers, carers are kept informed as required by the National Standards.</p> | <p>HSE actions It is now practice in HSE Dublin North that where there is a delay in the assessment of relative carers the applicants are informed in writing of the reason for this delay by the assessing social worker and a new date is provided for its completion. There is currently a significant delay in receiving clearance from the Garda Vetting Unit which impacts on the timescale.</p> <p>Persons responsible: Fostering team leader and social worker</p> <p>Timescale: Completed</p> | <p>Recommendation met</p> |

This recommendation was met. As per recommendation 3.4 above, inspectors were told that while there were some delays in the assessment of relative foster carers it was the practice at the time of the inspection to give the foster carers written information outlining the reason for the delay and proposing a new date for the completion of the assessment.

5.3 Follow-up findings on safeguarding and child protection

Recommendation 5

Standard 10: Safeguarding and Child Protection

Regulations: Part II

Child Care Act, 1991: Part II

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>To meet this Standard and the regulations the HSE must:</p> <p>Recommendation 5.1 Ensure that any and all protective measures taken by the HSE Dublin North Local Health Area in relation to <i>all children</i> in its care and <i>all additional children known</i> to the Area:</p> <ul style="list-style-type: none"> ▪ are adequate ▪ keep children safe and protected ▪ have addressed all concerns notified to the Area. | <p>HSE actions HSE LHO North Dublin provides a social work service to all children in care and children known to the service in line with legislation and local child protection and welfare guidelines. The LHO is in the process of implementing a new practice model, DRM, which will further strengthen these protective measures through the development of eligibility criteria, threshold tool and risk assessment.</p> <p>Persons responsible: General Manager, Principal Social Worker, Team leaders and social workers</p> <p>Timescale: October 2010</p> | <p>Recommendation met</p> |

Inspectors found there was a good social work service in the Area. There was evidence of a coordinated approach to the care of children in accordance with regulations and National Standards. A new management structure of the Social Work Department had been established to enhance the protection and welfare of children. Inspectors found evidence of frequent high quality professional supervision of the staff team. Social workers presented as competent, child centred and committed to the continuing safety, care and happiness of the children. There was evidence that children were frequently visited and social workers displayed a high awareness of their needs. The introduction of the Differential Response Model (DRM) highlighted further the protective measures taken by the Area.

There were 10 incidents where a complaint, serious concern or allegation was made against, or raised in relation to, foster carers by children since the time of the full inspection in 2009/2010. In 7 of these 10 incidents, it was alleged that a child was slapped or otherwise inappropriately physically disciplined.

In two other cases a child was allegedly hit by a relative external to the foster family and in one case a sibling group of three children alleged that their carers had spoken unkindly to them. Inspectors found that the allegations were confirmed in six cases, unconfirmed in two cases and under investigation in one case. Inspectors found that these were managed appropriately in accordance with *Children First: National Guidelines for the Protection and Welfare of Children*.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of this report |
|---|---|---|
| <p>Recommendation 5.2 Develop, implement and monitor safe, effective and robust systems that ensure that foster carers found to be unsuitable to care for children do not have children placed with them, and that all relevant parties are notified of their unsuitability.</p> | <p>HSE actions Any foster carer found to be unsuitable is counselled out and a comprehensive report sent to the placement committee. They are subsequently removed from the register. Foster care reviews support this practice.</p> <p>Persons responsible: FTL</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Dublin North Area had a process in place to de-register foster carers deemed to be unsuitable. There was some evidence found by inspectors that the Area had initiated this process, however, it had not been completed. As a consequence inspectors were not in a position to affirm that the recommendation was fully met.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 5.3 Develop and maintain a national central register of all allegations made by children against foster carers.</p> | <p>HSE actions The General Manager's office currently maintains a list of allegations made by children against foster carers which will inform a national register.</p> <p>Persons responsible: National</p> <p>Timescale: Ongoing</p> | <p>Recommendation not met</p> |

This recommendation was not met. HSE Dublin North LHA maintained a local register of allegations against foster carers. Dublin North Area also maintained a register of foster carers, and inspectors were told that any foster carers found unsuitable was removed from the register following the submission of a report and recommendation to the Placement Committee. The HSE nationally did not have a system in place to maintain this information on a national database.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|---|
| <p>Recommendation 5.4 Ensure that foster carers and children's individual case files contain records of notifications of alleged abuse by foster carers to the Garda Síochána, outcomes of any criminal investigations conducted by the Garda Síochána and any other protective measures taken by the HSE to ensure the protection of individual children.</p> | <p>HSE actions Foster carers and children's files in North Dublin contain records of notifications of alleged abuse by foster carers. Protective measures in relation to the children placed are documented in case-notes, minutes of professional strategy meetings or a child protection case conference where the allegation was discussed/managed.</p> <p>Persons responsible: Principal social worker, Team leader and Social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. From an examination of a sample group of files, inspectors found that records were maintained of reports and notifications of alleged abuse including correspondence to the Garda Síochána. There was also evidence of child protection case conference decisions and recommendations.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 5.5 Implement <i>Children First: National Guidelines for the Protection and Welfare of Children</i> and the National Standards in all regions (including those issued by Ministers and produced by the Authority subsequent to this inspection).</p> | <p>HSE action North Dublin is in the process of implementing outstanding parts of Children First [1999] and outstanding parts of the National Standards [2003]. The new Children First Guidelines and the new Standards are not yet published.</p> <p>Person responsible: General Manager and Principal Social Worker</p> <p>Timescale: September 2010</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. During the original full inspection in 2009-2010 inspectors found that HSE Dublin North LHA had developed comprehensive local child protection guidelines. Inspectors found these guidelines provided for the principles of good child protection practice in the Area. This continues to be the case. Outstanding parts of Children First Guidelines are yet to be implemented in the Area.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 5.6 Introduce a model of risk assessment that takes into account the potential for peer abuse in each new admission to a foster home.</p> | <p>HSE actions A risk assessment which will take into account the potential for peer abuse is currently being developed.</p> <p>Persons responsible: Team leader PSW, Fostering team leader</p> <p>Timescale: October 2010</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors were told that a risk assessment was in the process of being developed but had not been completed at the time of the inspection.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|---|
| <p>Recommendation 5.7 Ensure that in any respite or childminding arrangements social workers know exactly who is looking after a child in care and ensure that appropriate steps are taken to assess his/her suitability.</p> | <p>HSE actions In respite arrangements for children in care in North Dublin the respite carer is always approved by the Foster Care Committee. Respite outside of 72 hours will be comprehensively assessed. Regular childminders are always interviewed by the relevant social worker and Garda cleared as appropriate.</p> <p>Persons responsible: Team leader and social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. HSE Dublin North Local Health Area had systems in place to safeguard children on respite or being cared for by child minders. The Foster Care Committee approved carers for respite care. Regular child minders were interviewed by social workers and, where appropriate, Garda Síochána checks were sought.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|---|
| <p>Recommendation 5.8. Review the placement of one child.</p> | <p>HSE actions Dublin North has requested a review of the child referred to in this placement by the placing area. This has now commenced.</p> <p>Persons responsible: HSE Local Health Office NWD</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. There have been a number of meetings with relevant parties in another HSE local health area, where the placement to Dublin North originated (HSE Dublin North West), but the review had not been completed by the time of the follow-up inspection. Inspectors were not satisfied that information received constituted a thorough review of the circumstances surrounding the placement of the young person. This recommendation needs to be implemented by the HSE Dublin North West as a matter of priority.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 5.9 Ensure that the Child Care Manager is notified of all allegations in the Area, irrespective of who placed and supervises the children.</p> | <p>HSE actions When the Child Care Manager in North Dublin is notified by another area or private agency of the placement of a child in Dublin North, the Child Care Manager writes to the placing area informing them of their responsibility to notify any allegations to the Child Care Manager.</p> <p>Persons responsible: Child Care Manager</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors were provided with written information including a new policy to notify the placing HSE area or private agency of their responsibility to report to the Acting General Manager (formerly child care manager) any child protection allegations. Inspectors found evidence that the Acting General Manager was familiar with all cases where there were child protection concerns.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 5.10 Investigate further an allegation of assault made by one young person in foster care in the Area.</p> | <p>HSE actions The General Manager is now notified of any concerns or complaints about a family in the area. The allegation of assault made by one young person in foster care in the area has been fully investigated and is now concluded.</p> | <p>Recommendation met</p> |

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--------------------------------------|--|--|
| | <p>Persons responsible: Principal Social Worker, Team leader</p> <p>Timescale: Completed</p> | |

This recommendation was met. The HSE action plan indicated that this allegation of assault had been further investigated by the HSE. The Authority also received an updated report from HSE Dublin North. Further to the completion of the inspection of Dublin North fostering service in 2010 the Principal Social Worker in Dublin North informed the Principal Social Worker in HSE Dublin North Central of this recommendation and a further, comprehensive investigation was conducted. The HSE report concluded that it was now satisfied that the young person was not assaulted in this case.

5.4 Follow-up findings on governance and management

Recommendation 6

Standard 19: Management and Monitoring of Foster Care Services
Regulations: Part IV s.12, 13, 17 and Part VI

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>To meet this Standard and the regulations the HSE must:</p> <p>Recommendation 6.1 Ensure that foster care services are managed in accordance with legislation, the regulations and National Standards and are child centred in every aspect of their delivery.</p> | <p>HSE actions Foster Care Services in Dublin North are managed in accordance with the National Standards and Regulations and they are child centred in their delivery (see 1.4.4 and 1.4.5 above).</p> <p>The roles and responsibilities of all relevant staff from the social worker, team leader, principal social worker, child care manager, general manager, local health manager, regional director of operations, national director, trainers and the monitoring officer are defined and</p> | <p>Recommendation met</p> |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| | <p>understood by all relevant parties.</p> <p>The monitoring function is separate from the line management function and is being strengthened.</p> <p>Local policies and procedures have been updated on an interim basis pending the implementation of standard business processes.</p> <p>An up-to-date local register of all children in foster care and in care with relatives is maintained.</p> <p>Demographic information is available from several sources such as Census data, the National Disabilities Database, the local authorities, the CSO, etc..</p> <p>The data collection and analysis function in respect of fostering services is being developed in line with the requirements of Standard 19 (19.7, 19.8).</p> <p>Service Level Agreements are signed when external agencies are contracted to provide fostering services.</p> <p>Social workers are employed in accordance with budget allocations, service development approvals and the employment control framework.</p> | |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| | <p>Contingency plans are being reviewed in the context of the child's allocated social worker being unavailable for an extended period.</p> <p>All children in care will have a care plan by the end of 2010 and all reviews will be conducted in accordance with the Regulations and the Standards.</p> <p>A standard assessment framework is being introduced as part of the implementation of Standard Business Processes.</p> <p>All information requested for the annual Review of Adequacy of Child Care and Family Support Services (Section 8, Child Care Act, 1991) is provided.</p> <p>Persons responsible: Local Health Manager, General Manager, Principal Social Worker</p> <p>Timescale: Ongoing</p> | |

This recommendation was met. In the 2009-2010 inspection, inspectors found that the foster care service was well managed in accordance with legislation and the regulations. Inspectors found at the time of the follow-up inspection that the foster care service continued to be staffed by a capable and dedicated team who were child centred in their approach to their work. The senior local health management team met on a regular basis, there was evidence of service planning and managing risks, the area had developed good policies to support foster care services, and there was good communication between the teams. Dublin North Local Health Area had an independent monitoring system in place which assessed adherence to Standards and regulations pertaining to the foster care service. Other evidence collected by the

inspectors during this follow-up inspection support the view that the local Area had met this recommendation.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|---|
| <p>Recommendation 6.2 Review the governance of all social work departments in order to satisfy itself that they:</p> <ul style="list-style-type: none"> ▪ are fit for purpose ▪ have high quality leadership ▪ have suitably qualified staff ▪ have a senior managerial structure to which they are accountable and which provides clear support to them in the execution of their duties. | <p>HSE actions Dublin North social work services were found to be fit for purpose. Leadership was found to be of high quality; staff were suitably qualified and had an average of four years' experience. The area management team reflects a senior management structure that is accountable and supportive of the social work service in the completion of their duties.</p> <p>Implementation of the recommendations in the PA Consulting Report[†] will further strengthen governance in our social work department and childcare services generally.</p> <p>Persons responsible: General Manager, Principal Social Worker</p> <p>Timescale: Completed</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found during the original full inspection of Dublin North LHA that they were satisfied with the governance and leadership of the Social Work Department in the area. There had been significant structural change to the management of the Social Work Department since the last inspection. This had resulted in a period of change and uncertainty for the staff teams. Dublin North Area needs to form a management / staff coalition in the strategic management of this change.

[†] A report commissioned by the HSE based on a review of the delivery and management of child and family services.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 6.3 Establish a <i>national</i> register of all foster carers and introduce appropriate systems that ensure it is:</p> <ul style="list-style-type: none"> ▪ accurately maintained ▪ dependable ▪ up to date ▪ contains names of any carer(s) found to be unsuitable to care for children. | <p>HSE actions A local up-to-date, accurate and dependable Register of all Foster Carers and Relative Carers is maintained. It includes details of those de-registered.</p> <p>All relevant information will be submitted to a national register, when established.</p> <p>Persons responsible: AND, Principal Social Worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors found that Dublin North maintained a local register of all foster carers including relative carers. This included those who were de-registered. A National register of foster carers was not established by HSE nationally at the time of the inspection.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 6.4 Ensure that all foster carers are approved on the basis of a thorough registration process in the case of first time applicants and that registration status is verified for all other applicants.</p> | <p>HSE actions All Foster Carers must be approved by the Foster Care Committee and registered. The local register is up-to-date in this regard. The establishment of a National Register will strengthen this process.</p> <p>Persons responsible: Principal social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors found that all foster carers were assessed and approved by the Foster Care Committee. A register of carers was maintained locally and updated regularly, however, there was no national register to address the potential of foster carers transferring to another HSE area.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 6.5 Ensure that no child is placed with a carer who is not registered</p> | <p>HSE actions No child is placed with an un-registered carer.</p> <p>Persons responsible: Principal Social Worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors viewed the register of children in foster care and found evidence that all children in foster care in the Dublin North Area were placed with registered carers. This was subsequently verified by the principal social work social work team leader.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| <p>Recommendation 6.6 Establish a <i>national</i> register of children in care and introduce appropriate systems that ensure it is:</p> <ul style="list-style-type: none"> ▪ accurately maintained ▪ dependable ▪ up to date. | <p>HSE actions A local up-to-date, accurate and dependable register of all children in foster care is maintained. All information will be submitted to the National Register, when established.</p> <p>Persons responsible: AND, Principal Social Worker.</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors were provided with a copy of a comprehensive local register of children in foster care. This was updated on a regular basis. However, this recommendation cannot be fully met until a register is established by HSE nationally.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of this inspection |
|---|--|---|
| <p>Recommendation 6.7 Review and amend as necessary the systems for collecting, recording, filing, day-to-day storage of and archiving of information on children and families so that all records are accountable, coherent, complete, secure, up to date, reflective of practice, maintained in accordance with legislation and accessible to those with a right to access them.</p> | <p>HSE actions Filing systems in Dublin North were found to meet the required standard. All aspects of the system are reviewed on an ongoing basis to ensure that it meets all requirements.</p> <p>Persons responsible: Principal Social Worker, General Manager</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found the standard of social work record keeping was very good. Inspectors found a good standard of recording in the carers' case files. All the sample files had copies of the required documentation. Inspectors found assessment reports comprehensive. There continued to be good recording systems in place. The files were regularly monitored by the social work team leaders. In the sample group all the case files had comprehensive care plans and statutory reviews and all the documentation required by regulation and the National Standards. Inspectors noted again that the professional aspects of record keeping were complemented by a sympathetic, insightful and respectful tone. This was apparent in all files and reflected a culture of respect and awareness that the children may seek sight of their records now or in the future.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 6.8 Introduce governance and management systems to quality assure the information systems implemented, and all information held by the HSE in relation to children and families.</p> | <p>HSE actions A process for auditing files has commenced in North Dublin to quality assure the information recorded. The system will also be the subject of external audit.</p> | <p>Recommendation met in part</p> |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| | <p>Persons responsible: Local Health Manager, General Manager, Principal Social Worker, Regional Director of Operations</p> <p>Timescale: Ongoing</p> | |

This recommendation was met in part. From a review of sample files, inspectors found the standard of social work recording was good as outlined in recommendation 6.7. The Area needed to complete an audit of its social work records to ensure that the information held was of a consistently high standard.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 6.9 Ensure and demonstrate the effective monitoring of foster care services by the HSE appointed Monitoring Officer, and take any actions necessary to address any shortcomings.</p> | <p>HSE actions An additional monitor is being appointed to strengthen the function. Monitoring is undertaken in the context of the Standards and regulations and in accordance with a formal programme and work plan. This work plan also facilitates monitoring in circumstances of an emergency situation arising. A monitoring report is produced which requires local management to prepare and implement an action plan to address the monitors' recommendations. The local management team monitors implementation of the action plan as does the Monitoring Officer. Also, the RDO monitors progress at the monthly performance meeting</p> | <p>Recommendation met</p> |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| | <p>with the LHM. Copies of the Monitors reports and action plans are submitted to HIQA.</p> <p>Persons responsible: Regional Monitoring Officer</p> <p>Timescale: (no time line was provided to the Authority by the HSE)</p> | |

Inspectors found that this recommendation was met. An additional monitoring officer had been appointed since the original full inspection. Inspectors received copies of a comprehensive monitoring report on the formal supervision of social workers in the Dublin North Area which found generally that this was an ingrained part of social work practice in the area of supervision, and it was regular and frequent. The HSE Monitoring Officer also issued a monitoring report on serious concerns and allegations in foster care services. Dublin North Area submitted an action plan to the monitoring officer in response to recommendations from this report. The monitoring officer also issued an interim report on progress made to address the recommendations.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| <p>Recommendation 6.10 Review the HSE policy on supported lodgings and undertake an audit nationally to ensure the safety and welfare of all children in supported lodgings.</p> | <p>HSE actions</p> <p>All children in Supported Lodgings in North Dublin have an assigned social worker and are placed in accordance with policy.</p> <p>Persons responsible: Principal Social Worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors found that all children in supported lodgings in North Dublin had an assigned social worker and were placed in accordance with local policy. A national supported lodgings audit was undertaken in 2010 by the HSE. However, the recommendations from the audit had not been implemented by the HSE at the time of the inspection.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|---|
| <p>Recommendation 6.11 Review and implement the HSE's national policy on the transfer of children's cases across HSE areas.</p> | <p>HSE Action: Feedback in relation to the transfer policy has been forwarded to the National Office to inform the review process.</p> <p>Persons Responsible: Principal social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation not met</p> |

This recommendation was not met. Inspectors found that the policy on the transfer of children's cases across HSE areas was not reviewed and therefore an agreed, revised policy had not been implemented by the HSE at the time of the inspection. The HSE Office of the National Director of Children and Family Services was confident that this policy would be revised and implemented by the end of June 2011.

Recommendation 7

Standard 23: Foster Care Committee

Regulations: Part III s.5(3)(4)

Child Care Act, 1991: Part II (s.8)

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|--|
| <p>To meet this Standard and the regulations the HSE must:</p> <p>Recommendation 7.1 Review the functions of the Foster Care Committee to ensure that it:</p> <ul style="list-style-type: none"> ▪ maintains an up-to-date panel of all foster carers ▪ contribute to foster care service planning ▪ functions effectively and efficiently ▪ is child centred ▪ has defined duties in respect of allegations made against foster carers. | <p>HSE actions LHO North Dublin will revert back to a local foster care committee in October 2010. This committee will maintain an up-to-date panel of foster carers, contribute to foster care service planning, function effectively and efficiently, be child centred and will have defined duties in respect of allegations against foster carers. Training for members of the new committee is scheduled for September 2010.</p> <p>Persons responsible: Local Health Manager</p> <p>Timescale: October 2010</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors found evidence that Dublin North maintains a register of foster carers which is updated on a regular basis. Inspectors were told by local managers that all information requested for the annual Review of Adequacy of Child Care and Family Support Services (Section 8, Child Care Act, 1991) is provided. The Foster Care Committee is responsible for ensuring that children are appropriately placed with suitable foster carers through a matching process. The Committee has a clearly defined role and duty in relation to allegations against foster carers and the foster carer reviews and de-registration process. Inspectors were told that foster carer reviews had not commenced at the time of the inspection and this is further addressed in recommendation 2.6.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 7.2 Ensure that senior managers receive minutes of the Foster Care Committee's meetings.</p> | <p>HSE actions The minutes from the Foster Care Committee meetings are now forwarded by the secretary of the meeting to the PSW, ACM and GM</p> <p>Persons responsible: Principal social worker and secretary of foster care committee</p> <p>Timescale: Completed</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors received written evidence that this was occurring on a regular basis and in a timely manner. This was also confirmed at interview by the Principal Social Worker for fostering and the Acting General Manager.

5.5 Follow-up findings on day-to-day experiences of foster children in the sample group

Recommendation 8

Standard 2: Family and Friends
Regulations: Part IV s.16 (2)(9)

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| <p>To meet this Standard and the regulations the HSE must:</p> <p>Recommendation 8.1 Ensure that all children are aware of their care status and family background. Where this is not the case, the HSE must satisfy itself that decision-making is transparent and based on a robust risk assessment, is lawful and is recorded on the child's case file.</p> | <p>HSE actions With the exception of one child, all children in the care of HSE Dublin North are aware of their care status and family background. In the one exception where this is not the case the reasons are clearly outlined in the file and have been outlined to the Placement Committee.</p> <p>Persons responsible: Principal Social Worker, Team leader, social worker</p> | <p>Recommendation met</p> |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|-----------------------------|--|
| | Timescale: Ongoing | |

This recommendation was met. Inspectors found that it was practice in the Area for children to be aware of their care status. Inspectors found through a review of a sample of case files and interviews with children, social workers and foster carers that there was a practice of promoting a high degree of awareness of family background. Inspectors found that social workers maintained good contact with birth parents and the children's siblings and relatives. There was also evidence on file of good quality life-story work with the children.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| Recommendation 8.2 Satisfy itself that any risk assessment model used by the social work department is robust enough to ensure that the decision to take any child into care is based on their need for care and protection. | HSE actions HSE Dublin North is satisfied that the decision to take a child into care is based on his/her need for care and protection and will be taken by Senior Managers. Persons responsible: Principal Social Worker Timescale: Ongoing | Recommendation met |

This recommendation was met. During the original full inspection, inspectors were satisfied that the Area had a robust assessment model to identify care and protection needs of children. During the follow-up inspection, inspectors found that Dublin North Local Health Area had implemented a standardised assessment model as part of the implementation of the Differential Response Model.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 8.3 As a matter of priority, review access arrangements for children not assigned a social worker.</p> | <p>HSE actions All children in care in Dublin North have an assigned social worker and access is in accordance with their care plan.</p> <p>Persons responsible: Principal Social Worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation from the original full inspection report emanated from parallel inspections of HSE foster care services in two other HSE local health areas, and was not applicable to HSE Dublin North LHA, as a review of assessment arrangements was not required. Inspectors found that all children in foster care in the area continued to have an assigned social worker during the follow-up inspection.

Recommendation 9

Standard 1: Positive Sense of Identity

Regulations: Part III (s.8)

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 9.1 Develop practice standards for all social work departments that are child centred, respectful and responsive to need.</p> | <p>HSE actions HSE LHO North Dublin is satisfied that social workers operate to best practice standards which are child centred, respectful and responsive to need. Social work managers ensure that standards are monitored through training, development, support, monitoring and supervision.</p> <p>Persons responsible: Principal Social Worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Social workers interviewed by inspectors presented again on this occasion as skilled, child centred and committed to the ongoing safety, care and protection of the children. They visited children frequently and regularly and displayed a comprehensive knowledge of their needs.

Inspectors found that social workers were motivated and engaged in their work. For example in order to enhance the social work service for 50 children, some of the social work team became involved in a community summer scheme, which involved sports, arts and other activities. A subsequent evaluation of this project found that the children felt that their relationship with their social workers had greatly improved. The children also said it was good to know that other children had social workers too.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 9.2 Develop a policy that prevents the changing of children's names whilst they are in foster care without the authority of a court.</p> | <p>HSE actions This has never been an issue in LHO North Dublin.</p> <p>Persons Responsible:</p> <p>Timescale:</p> | <p>Recommendation met</p> |

This recommendation, arising from parallel inspections in other HSE fostering services, was not applicable to Dublin North Local Health Area as inspectors found during the original full inspection that the practice of changing the names of the children while in foster care did not occur at the time of the inspection.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 9.3 Ensure that each child's case record has a copy of his/her birth certificate and that all records refer to the child by the name on the birth certificate.</p> | <p>HSE actions The majority of children in care have birth certificates on their files. A birth certificate will be sought for every child where this is not the case. It is practice in Dublin North for children to be called by their given name as detailed on their birth certificate unless called something different by their parents prior to being received into care.</p> | <p>Recommendation met</p> |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|--|
| | <p>Persons responsible: Team leader, social worker</p> <p>Timescale: December 2010</p> | |

This recommendation was met. Inspectors found from a perusal of sample files that that all children in the sample group had a birth certificate on file. The practice of changing a child's name was not occurring in Dublin North as referenced in recommendation 9.2.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 9.4 Develop a non-discriminatory policy on the care of children with disabilities that makes clear to social workers their role and responsibilities to them.</p> | <p>HSE actions Social workers in North Dublin are non-discriminatory in their practice and are aware of their responsibility towards children with a disability. Any national policy in this regard will be fully implemented.</p> <p>Persons responsible: Team leader</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found from a review of a sample number of files and interviews with social workers and foster carers that there was a good knowledge and practice in regard to the care and protection of children including those with special needs. In two specific cases inspectors found a multidisciplinary approach to supporting the care and development of children in foster care. Dublin North Local Health Area has established a working group to look at issues for children and young people with disabilities. A local guide has also been developed which will reflect a non-discriminatory and inclusive approach to children with disabilities.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 9.5 Develop policies and clear practice guidelines for social workers on the promotion and facilitation of the child in care's right to access information about services and about his/her own life history.</p> | <p>HSE actions All children in care were provided with a copy of the Children's Book about Foster Care. The children's social workers explained to the children their rights to access their files. Also, every child was given an information leaflet from IAYPIC about their rights to access services and information on their files, etc..</p> <p>Persons responsible: Social worker Timescale: Complete</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found social workers and children were aware of children's rights. Inspectors were told that all children in Dublin North had been informed of their right to access their file. Inspectors found the social workers were committed to supporting children to do this. Inspectors were told that all children received the children's version of the standards in foster care issued by the Department of Health and Children which details these rights. There was a practice of completing life-story books with the children in conjunction with the birth parent where feasible and appropriate.

A further development was the finalisation and publication of findings from a forum for young people in care in Dublin North report entitled *Our side 2010 forum for young people in care*. The aim of the forum was to promote the participation of and to give a voice to young people in foster care in the north Dublin region about issues that affect their care. This was a joint project between the Irish Association of Young People in Care (IAYPIC) and the HSE. There was a high level of participation by young people in foster care. The published document reflected the young people's experience of care. The young people's views were of unique value in further enhancing the practice and development of the social work services in the area. Of particular note was the availability of senior managers in Dublin North who met with and listened to the views of young people in care. This is commendable practice.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|--|---|
| <p>Recommendation 9.6 Ensure that social workers are always aware of who is looking after the child in foster care and ensure that the appropriate checks are undertaken.</p> | <p>HSE actions Social workers are aware of the primary carer for young people in foster care and all appropriate checks are undertaken. Foster carers will be reminded on a regular basis to inform the social work department if someone other than the approved carer is looking after the child for a period of longer than 72 hours in line with Child Care Regulations. All checks and clearances will be undertaken as appropriate.</p> <p>Persons Responsible: Fostering team leader, Team leader, social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Dublin North area had systems in place to safeguard children in foster care. The Foster Care Committee approved carers for respite care. Regular child minders were interviewed by social workers and where appropriate Garda Síochána checks was sought as per recommendation 5.7. Inspectors were told that where a person other than the approved carer was looking after a child for a period of longer than 72 hours, checks will be undertaken as appropriate.

| HIQA local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|---|
| <p>Recommendation 9.7 Ensure that one person has access to specialist support services.</p> | <p>HSE actions The young person referred to is now in receipt of specialist services.</p> <p>Persons responsible: Team leader.</p> <p>Timescale: Completed</p> | <p>Recommendation met</p> |

This recommendation was met subsequent to the follow-up inspection fieldwork. During the inspection, inspectors interviewed the foster carers, the fostering link workers, the child's social worker and the Principal Social Worker and found that this recommendation had yet to be completed. Inspectors found evidence that the professionals involved in this case and the foster carers themselves undertook extensive research to identify a service, which might meet the complex needs of this child. A particular specialist service was finally identified but it became unavailable for reasons outside the Social Work Department's control.

The Dublin North Local Health Area then put a service in place as a provisional measure. A further specialist service was sourced at the time of the follow-up inspection and inspectors subsequently were told by the social work team leader that this service had been approved and had commenced.

Recommendation 10

Standard 3: Children's Rights

Regulations: Part II s.4(ii) and Part IV s.18(5)(d)(i) and s.16(1)(2)(e)

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|--|
| <p>Recommendation 10.1 Ensure that there is a robust complaints process in place which children and foster carers have confidence in.</p> | <p>HSE actions North Dublin now has a robust complaints process for children in care and foster carers. Complaints are managed in accordance with the HSE's Complaints Management Policy 'Your Service, Your Say'. A child-centred leaflet is being developed in this regard.</p> <p>Persons responsible: General Manager</p> <p>Timescale: Completed</p> | <p>Recommendation met in part</p> |

This recommendation was met in part. Inspectors found that there was a complaint process in place for children in foster care. Inspectors were told that Dublin North was involved in the development of a child-friendly complaints management policy. A draft guide of this policy was issued for local consultation. Following consultation the final version needed to be approved.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 10.2 Ensure that the needs of all children with disabilities are assessed and addressed immediately, paying particular attention to providing a supportive framework for foster carers that enables them to care and provide for these children in an effective manner.</p> | <p>HSE actions Any child with a disability in care in Dublin North has been assessed so as to inform their placement requirements and support their carers.</p> <p>Persons responsible: Team leader, social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. This recommendation should be read in conjunction with recommendation 9.4. Inspectors found it was practice that children with a disability in foster care in Dublin North had an assessment and this informed the care plan. Inspectors found that social workers were highly focused on ensuring that these children were appropriately placed and got access to services that supported the placement and the children's needs.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| <p>Recommendation 10.3 Ensure that children have access to their case files and this access is encouraged and facilitated as appropriate.</p> | <p>HSE actions Children can access their file at any time and are informed of this by their assigned social worker.</p> <p>Persons responsible: Team leader, Social worker</p> <p>Timescale: (no time line provided to the Authority by the HSE)</p> | <p>Recommendation met</p> |

This recommendation was met and should be read in conjunction with recommendation 9.5. Social workers interviewed by inspectors were well informed about children's rights and it was their practice to inform and facilitate the children in relation to their right to access their care file.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|--|---|
| <p>Recommendation 10.4 Ensure that all children in care are made aware of their rights, and that all foster carers and social workers are clear of their duty to promote, protect and facilitate them.</p> | <p>HSE actions All children in care have been made aware of their rights by their assigned social worker and have been provided with a copy of the Children's Book about Foster Care Services. Social Workers are aware of their responsibility in this regard and foster carers will continue to be supported in promoting, protecting and facilitating the children in their care.</p> <p>Persons responsible: Team leader, social worker</p> <p>Timescale: Ongoing</p> | <p>Recommendation met</p> |

This recommendation was met. Inspectors found that it was practice for social workers to inform children of their rights and to ensure that these rights were promoted. It was also practice to ensure that the children were clear about the role of the social worker in relation to their protection and welfare. Children and young people interviewed by inspectors had an understanding of the role of the social worker in this regard.

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|---|---|
| <p>10.5 Ensure that complaints made by children in foster care are centrally recorded and that the complaints system is regularly monitored.</p> | <p>HSE actions Complaints made by children in foster care are centrally recorded, analysed and regularly monitored by the Child Care Manager and the overall system will be monitored by the Local Senior Child Care Management Team.</p> <p>Persons responsible: Team leader, Monitor, Local Management Team, Child Care Manager</p> | <p>Recommendation met</p> |

| HIQA national and local recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|---|-----------------------------|--|
| | Timescale: Ongoing | |

This recommendation was met. Inspectors found that complaints made by children in foster care were centrally recorded in a register. Inspectors interviewed the Acting General Manager and were told that complaints were regularly monitored by her and the overall system was being monitored by the Local Senior Child Care Management Team. Inspectors perused a sample of complaints made by children since the last full inspection and found they were responsive to the needs of the children and had been dealt with in a comprehensive yet sensitive manner.

5.6 Follow-up findings on conclusion of previous inspection reports

Recommendation 11[‡]

| HIQA national recommendation, July 2010 | HSE Action Plan August 2010 | Status of recommendation at time of inspection |
|--|---|--|
| Recommendation 11 The Board of the HSE should nominate a national director with direct accountability and authority for the provision, by or on behalf of the HSE, of safe and high quality services for children. | HSE action The HSE is actively considering the optimal structures for the management and delivery of children and family social services at national, regional and local levels. Persons responsible: National Director Timescale: December 2010 | Recommendation met |

This recommendation was met. The HSE appointed a National Director who took up the post in January 2011.

[‡] Refer to *Follow-up inspection on the implementation of national recommendations on Health Service Executive foster care services*, Health Information and Quality Authority (2011).

Recommendation 12[¥]

| <p>HIQA national recommendation, July 2010</p> | <p>HSE Action Plan August 2010</p> | <p>Status of recommendation at time of inspection</p> |
|---|---|--|
| <p>Recommendation 12 Progress made against the implementation of the recommendations contained in this report, and the findings of associated reviews requested by the Authority, should be reported to the Board of the HSE, the Authority, Minister for Children and Youth Affairs, and published.</p> | <p>HSE action The Board of the HSE and the Risk Committee of the Board of the HSE receive briefings and progress reports on the implementation of recommendations from HIQA. Progress will be reported to HIQA at intervals to be agreed. Progress will be reported to the Minister for Children and Youth Affairs at the regular scheduled monthly meetings already underway. The HSE is committed to publishing progress reports and are currently reviewing the communications process.</p> <p>Persons responsible: National Office</p> <p>Timescale: Ongoing</p> | <p>Recommendation met in part.</p> |

The implementation of this recommendation was partly met. Inspectors found that the HSE Office of the National Director of Children and Family Services intended to provide reports to the Authority on progress made against the implementation of these recommendations and recommendations of other reviews and reports on a monthly basis. At the time of this inspection, progress reports as outlined in the action plan had yet to be received from the HSE. The HSE Office of the National Director of Children and Family Services confirmed to inspectors that at the time of inspection that it was also reporting progress made to the Board of the HSE, the Risk Committee of the HSE and the Office of the Minister for Children and Youth Affairs.

6. Conclusions

This follow-up inspection found that the HSE Dublin North Local Health Area continued to provide a good foster care service for children in the Area. Overall, inspectors found that there was a high level of compliance with the National Standards, regulations, and relevant recommendations made in the original full inspection report in July 2010 at local level. This inspection found that all children in foster care in the HSE Dublin North LHA had an assigned social worker, and that all foster carers had an allocated fostering link social worker. Inspectors also found that systems were in place to assess and manage risks associated with child protection and welfare.

The vast majority of children had an up-to-date care plan, however, some did not. Inspectors found also that some foster carers needed to increase their attendance at ongoing fostering training.

Those small number of recommendations that were not met related to the provision of guidelines in relation to the Child Care (Amendment) Act 2007, the ongoing review of foster carers, the development of a national out-of-hours social work service, the development of a national register of allegations by children against foster carers, the implementation of a national transfer policy of children's cases between HSE local health areas, and the development of a national register of all foster carers.

Since the last full inspection, there had been significant changes in the organisation of foster care services, including governance, management and staffing, the piloting of the Differential Response Model for child protection and welfare, and the reconfiguration of care teams into three functions: intake referral, welfare, and alternative care and fostering.

The staff team interviewed by inspectors said that while they were supportive of these changes, the rapid introduction had significantly increased the time they spent on administration to the detriment of time available to children, their families, and their carers. Inspectors found that this had adversely affected staff morale. While inspectors acknowledge that these major changes are in the early stages of development, it is imperative that the management and staff team work together in the management of these changes to ensure that the service continues to function well.

Overall, despite these challenges, inspectors found a dedicated and skilled management and staff team in the foster care service in Dublin North LHA, and there continued to be a child-centred approach to their work.

7. Next steps

From the time of the publication of this report, the Authority requires the HSE to provide it with quarterly reports on the progress made on the unmet and partly met recommendations. The HSE is also required to continue to provide the Authority with all foster care monitoring reports.

In order to verify progress, and to ensure that children in foster care are receiving a safe service compliant with the requirements of regulations and Standards, and consistent with current best practice, the Authority will carry out further inspections of the HSE Dublin North Local Health Area fostering service as it deems appropriate.

The Authority will also:

- report to the Minister for Children on the findings of all inspections of the HSE Dublin North fostering service
- continue to carry out and publish inspections of foster care services provided by the HSE in its 32 local health areas
- review progress at a national and local level on an ongoing basis through the foster care monitoring reports, the quarterly written reports from the HSE to the Authority, and updated national and local foster care action plans.

8. References

- Child Care Act, 1991. Dublin: The Stationery Office; 1991
- Children Act, 2001. Dublin: The Stationery Office; 2001
- Child Care (Placement of Children in Foster Care) Regulations 1995 SI No. 260 of 1995. Dublin: The Stationery Office; 1995
- Child Care (Placement of Children with Relatives) Regulations 1995 SI No. 261 of 1995. Dublin: The Stationery Office; 1995
- Data Protection Act, 1988. Dublin: The Stationery Office; 1988
- Data Protection (Amendment) Act 2003. Dublin: The Stationery Office; 2003
- Department of Health and Children. *Children First: National Guidelines for the Protection and Welfare of Children*. Dublin: The Stationery Office; 1999
- Department of Health and Children. *National Standards for Foster Care*. Dublin: The Stationery Office; 2003
- Freedom of Information Act 1997. Dublin: The Stationery Office; 1997
- Freedom of Information (Amendment) Act 2003. Dublin: The Stationery Office; 2003
- Health Act 2004. Dublin: The Stationery Office; 2004
- Health Act 2007. Dublin: The Stationery Office; 2007
- Health Service Executive. *Review of Adequacy of Services for Children and Families*. Dublin: Health Service Executive; 2008

9. Glossary of terms

Care orders: under the Child Care Act, 1991 there are a number of procedures, which the Health Service Executive (HSE) can use when dealing with children who are at risk or who are in need of care. The HSE may apply to the courts for a number of different orders, which give the courts a range of powers including decisions about the kind of care, and the access to the children for parents and other relatives. The HSE must apply for a care order if a child needs care and protection which he / she is unlikely to receive without an order. The district court judge may make an interim care order while the decision on a care order is pending. This means that the child is placed in the care of the HSE for eight days. It may be extended if the HSE and the parents agree. Generally the parents/guardians must be given notice of an interim care order application. A care order may be made when the court is satisfied that:

- the child has been or is being assaulted, ill-treated, neglected or sexually abused or that the child's health, development or welfare has been or is likely to be impaired or neglected
- the child needs care and protection which he/she is unlikely to receive without a care order.

When a care order is made the child remains in the care of the HSE for the length of time specified by the order or until the age of 18 when he / she is no longer a child. The HSE has the rights and duties of a parent during this time.

Emergency approval: under the child care regulations, foster carers are approved for placements by a foster care committee. However, emergency placements are sometimes made prior to this approval when there are limited options for the care of the child.

Foster care: where possible the HSE places children with foster parents. The Child Care (Placement of Children in Foster Care) Regulations 1995 require that a care plan for the child be drawn up which sets out, among other things, the support to be provided to the child and the foster parents and the arrangements for access to the child in foster care by parents or relatives. If there is a shortage of foster parents, and / or it is assessed as meeting a child's needs, children may be placed in residential care instead.

Link social worker: the social worker assigned by the HSE to be primarily responsible for the supervision and support of foster carers.

Placing children with relatives: the Child Care (Placement of Children with Relatives) Regulations 1995 make provision for relatives to receive an allowance for caring for a child placed with them by the HSE. The child care regulations set out the arrangements for the placement and are broadly similar to the foster care regulations.

Preparation for leaving care and adult life: these centres prepare young people for leaving care. The young people in these centres are generally 16 or over. Leaving

care and aftercare centres that accommodate young people under 18 require registration as children's residential centres.

Residential care: residential care can be in a home run by the HSE, a children's residential centre registered under the Child Care Act, 1991, a school or other suitable place of residence. The Child Care (Placement of Children in Residential Care) Regulations 1995 state the requirements for the placing of children in residential care and the National Standards for residential centres, which are registered with the HSE. The centres are subject to inspection by the Health Information and Quality Authority.

Supported lodgings: according to HSE policy, supported lodgings is the provision of support and accommodation to children in care aged 15 and over who require less supportive environments than younger or more vulnerable children. Providers of supported lodgings are vetted in accordance with HSE policy but are not assessed to the same criteria as foster carers.

Voluntary care: if a child is in need of care and protection and is unlikely to receive it at home, then the HSE must take them into care. In other cases, where parents are unable to adequately care for their children, for reasons such as serious illness or other difficulties, they may agree to their children being taken into the care of the HSE. This is known as voluntary care. In such cases, the wishes of the parents as to how care is provided to the children must be considered. The HSE is under obligation to maintain the children for as long as their welfare requires it.

Ward of court: when a child is made a ward of court all matters affecting the ward's up-bringing become the responsibility of the court. The court determines matters such as the child's residence, education, maintenance, holidays, etc. A third party can seek custody of a child against a parent, or seek to obtain protection for a child against the actions of a parent, by bringing wardship proceedings.

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