

Report of a Private Foster Care Service

Name of provider:	Origins Foster Care Service
Tusla Region:	Dublin Mid Leinster
Type of inspection:	Announced
Dates of inspection:	15 – 16 March 2021
	18 – 19 March 2021
	23 March 2021
Inspectors:	Pauline Clarke Orohoe
	Bronagh Gibson
Centre ID	OSV-0005881
Fieldwork ID	MON-0032083

About monitoring

The purpose of monitoring is to safeguard vulnerable children of any age who are receiving foster care services. Monitoring provides assurance to the public that children are receiving a service that meets the requirements of quality Standards. This process also seeks to ensure that the wellbeing, welfare and safety of children is promoted and protected. Monitoring also has an important role in driving continuous improvement so that children have better, safer lives.

The Health Information and Quality Authority (HIQA) is authorised by the Minister for Children, Equality, Disability, Integration and Youth under Section 69 of the Child Care Act, 1991 as amended by Section 26 of the Child Care (Amendment) Act 2011 to inspect services taking care of a child on behalf of the Child and Family Agency (Tusla) including non-statutory providers of foster care.

In order to drive quality and improve safety in the provision of foster care services to children, the HIQA carries out inspections to:

- **Assess** if the service provider has all the elements in place to safeguard children and young people and promote their well-being while placed with their service
- Seek assurances from service providers that they are safeguarding children through the mitigation of serious risks
- Provide service providers with the findings of inspections so that service providers develop action plans to implement safety and quality improvements
- Inform the public and promote confidence through the publication of the HIQA's findings.

Monitoring inspections assess continuing compliance with the regulations and Standards, can be announced or unannounced.

This inspection report sets out the findings of a monitoring inspection against the following themes:

Theme 1: Child-centred Services	
Theme 2: Safe and Effective Services	
Theme 3: Health and Development	
Theme 4: Leadership, Governance and Management	
Theme 5: Use of Resources	
Theme 6: Workforce	\boxtimes

1. Inspection methodology

As part of this inspection, inspectors met with the relevant professionals involved in Origins foster care service and spoke with foster carers.

Inspectors reviewed documentation such as case files, foster carers' assessment files, and relevant documentation relating to the areas covered by the standards assessed. During this inspection, the inspectors evaluated the:

- assessment and approval of foster carers,
- safeguarding processes,
- management and monitoring of the service
- training and qualifications of staff
- supervision, support and training of foster carers,
- reviews of foster carers.

The key activities of this inspection involved:

- the analysis of data,
- interviews with two directors of the company, the assessing social work supervisor, the social work team leader
- focus group with assessing social workers and fostering link social workers
- interviews with five foster carers
- review of the relevant sections of foster carers' files as they relate to the standards
- interviews with four children in care social workers.

Acknowledgements

HIQA wishes to thank the staff and managers of the service for their cooperation with this inspection, and foster carers who participated in interviews with inspectors.

2. Profile of the foster care service

The Service Provider

Origins Foster Care service provides a range of fostering services including respite, short term, medium term and long term placements. The aim of the service is to provide a professional range of foster care services which are tailored to meet the range of needs of children placed in foster care.

At the time of the inspection Origins Foster Care service was managed by two company directors who were also the company owners. They were directly involved in the management of the service, and held the roles of head of operations and head of fostering respectively. The service had a social work team leader for fostering with responsibility for two senior practitioner link social workers and three sessional link social workers. There was also a temporary social work supervisor in place for assessments, with responsibility for the panel of sessional social workers who completed assessments of foster carers. The service had carried out a recruitment campaign, and had identified a candidate who was due to commence with Origins in June 2021 to carry out the role on a permanent basis. The service had six further staff members who provided business, administration and accounts support. A foster care recruitment coordinator was also in the process of being recruited for the service. The service had contracted a compliance consultant and an external social work supervisor. The compliance consultant completed audits on specific areas of practice every three months. The external supervisor provided support to the directors in relation to practice and the development of a specific model of practice across the service, while also providing monthly clinical mentoring sessions to the social work team and additional support on specific cases as needed.

Data provided by Origins Foster Care service prior to the inspection showed that the service had 15 foster care households and provided foster care placements for 19 children. These foster care households were located across Ireland in various geographical areas.

Placements in Origins Foster Care service are commissioned by the Child and Family Agency (Tusla) service area teams.

Summary of inspection findings

Child and family services in Ireland are delivered by a single dedicated State Agency

– The Child and Family Agency (Tusla) which is overseen by the Department of
Children, Equality, Disability, Integration and Youth. The Child and Family Agency Act
2013 established the Child and Family Agency with effect from 1 January 2014.

Tusla have responsibility for a range of services, including the provision of a range of care placements for children such as statutory foster care services.

Children's foster care services may also be provided by non-statutory foster care agencies following agreement with Tusla. Tusla retain their statutory responsibilities to children placed with these services and approve the foster carers through their foster care committees. The foster care agency is required to adhere to relevant standards and regulations when providing a service on behalf of Tusla. Both services are accountable for the care and wellbeing of children.

Private foster care services are monitored by the Child and Family Agency. Origins Foster Care service was last inspected by Tusla's monitoring service in October 2020 and the report was made available to inspectors.

This report reflects the findings of the monitoring inspection relating to seven standards. These are set out in Section four of this inspection report and include safeguarding, assessment and approval, supervision and support, training, reviews of foster carers, management and monitoring, and training and qualifications. The provider is required to address a number of recommendations in a compliance plan which is attached to this report.

In this inspection, HIQA found that of the seven national standards assessed:

- Six standards were compliant
- One standard was substantially compliant.

This was HIQA's second inspection of Origins Foster Care service. An inspection of four standards was conducted in February 2019. At that time the service was found to be compliant in one standard, and substantially compliant in three standards. This inspection found that the service was adequately resourced and well managed. Foster carers were supported by the service to provide good quality care to children. Additional therapeutic support and training was provided to foster carers when required, and where appropriate, supports were put in place to ensure that the needs of children in foster care were appropriately addressed.

The service was well led, with a competent management team who demonstrated good leadership. There were clear lines of accountability, and staff were clear on their

roles and responsibilities. The service had robust management, reporting and governance systems in place that provided effective oversight of the services provided. There were effective communication systems throughout the service. Staff members told inspectors that communication within the service was effective. Foster carers told inspectors that the service were responsive to their needs. There were effective mechanisms in place to monitor the quality of the service. The service completed internal audits, while also having recruited a compliance consultant to audit and review specific aspects of service provision. The Origins Foster Care service had a risk management framework in place which identified relevant risks in relation to the services provided. At the time of the inspection Tusla did not have a service level agreement in place for the Origins Foster Care service.

Safeguarding systems were in place, and were effective in ensuring children in foster care were protected from abuse and neglect. Staff were aware of the policies and procedures that guided their work, and ensured that children were kept safe. Foster carers received appropriate training in relation to safeguarding practices. Origins had a tracker in place to provide oversight of the Garda Síochána (police) vetting process for staff and foster care households. The service completed quarterly reviews to ensure that Garda vetting was in date. The service held a register in order to track the progress of child protection and welfare referrals reported to Tusla. The service had systems in place to monitor non-compliance with Children First, and discussed the role of the Origins social work team in relation to reporting child protection and welfare concerns at reflective practice meetings.

Origins had a policy in place for the management of allegations of abuse and neglect and serious concerns regarding foster carers. This policy was in line with the Tusla 'Interim protocol on the management of serious concerns and allegations'. Serious and adverse incidents were promptly notified and appropriately managed by the service. Appropriate actions were taken to address the issues identified. Complaints received were investigated and managed in a timely manner. The service maintained a complaints register which monitored and recorded the progress and outcome of the complaint.

Assessments of prospective foster carers were detailed, comprehensive and of good quality. The assessments provided in-depth analysis of the foster carers history and ability to provide good quality care for children. Assessments were not always completed in line with the 16 week timeframe required by the Foster Care (Placement of Children in Foster Care) Regulations, 1995. The service maintained a register to track the progress of assessments, and reasons for delays were noted on this register. There was good management oversight of the assessment process. There was a clear process for the approval of foster carers, and due process was followed when foster carers transferred into the service.

Foster carers were supported and supervised by a professionally qualified link social worker. The Origins Foster Care service provided good quality support to foster carers. There was evidence of good formal supervision in line with the service's policy. Supervision visits were found to be supportive, detailed and were well recorded. However, where visits to foster carers included supervision of the foster carer, there was difficulty in identifying these visits on the electronic filing system. The management team of Origins Foster Care service had identified issues in the timely recording and uploading of case records. The service carried out a review of the relevant files, and put additional audit systems in place to provide increased management oversight and governance regarding the standard of social work recording on foster care files.

There had been delays in completing home visits to foster carers due to the public health restrictions arising from COVID-19. Appropriate actions had been identified to manage this risk in a timely and appropriate manner including monitoring the impact of these restrictions on a monthly basis, and developing safety plans for families who had not been visited within three months which included a timeframe for the next visit.

There was good practice in relation to the support provided to foster carers who were caring for children with complex needs. The service also held monthly meetings with an external social work supervisor who also provided clinical mentoring sessions with the social work team in relation to challenges arising on cases. Twenty-four hour support was available to foster carers. This support service was operated on a rotational basis by the service directors, the social work team leader and a link social worker. Foster carers felt they received a high level of support from Origins Foster Care service, and that staff were responsive and available. Foster care support meetings had commenced across four counties in December 2020 and were scheduled to take place every two months.

Foster carers participated in training prior to their approval. Origins provided a good level of on-going training to foster carers. The management team maintained appropriate oversight of this training, and the learning and development needs of foster carers.

There was evidence of good practice and management oversight of the foster care review process. Foster care review reports were comprehensive and considered the current circumstances of the foster carers, their ability as foster carers and any concerns raised. The foster care committee had been informed of the outcome of the reviews. Additional reviews were completed following serious complaints or allegations where required.

The Origins Foster Care service was staffed by a skilled, knowledgeable and experienced team. The service had a tracker in place to monitor and identify when

Garda vetting for staff was due to be updated. The service had a comprehensive induction programme for new staff and sessional workers. Staff received good quality supervision by trained supervisors. There was a culture of learning and development across the service, where value was placed on providing adequate training for both staff and foster carers.

3. Summary of judgments under each standard and or regulation

During this inspection, inspectors made judgments against the National Standards for Foster Care. They used four categories that describe how the national standards were met as follows. We will judge a provider to be compliant, substantially compliant or non-compliant with the regulations and or national standards. These are defined as follows:

- **Compliant**: a judgment of compliant means that no action is required as the provider or person in charge (as appropriate) has fully met the standard and is in full compliance with the relevant regulation.
 - **Substantially compliant:** a judgment of substantially compliant means that some action is required by the provider or person in charge (as appropriate) to fully meet a standard or to comply with a regulation.
- **Non-compliant**: a judgment of non-compliance means that substantive action is required by the provider or person in charge (as appropriate) to fully meet a standard or to comply with a regulation.

5881-Origins-Private-Foster-Care **Health Information and Quality Authority**

National Standards for Foster Care	Judgment				
Theme 2: Safe and Effective Services					
Standard 10: Safeguarding and child protection	Compliant				
Standard 14a: Assessment and approval of foster carers	Compliant				
Standard 15: Supervision and support	Substantially compliant				
Standard 16: Training	Compliant				
Standard 17: Reviews	Compliant				
Theme 4: Leadership, governance and management					
Standard 19: Management and monitoring of foster care agency	Compliant				
Theme 6: Workforce					
Standard 20: Training and Qualifications	Compliant				

This inspection was carried out during the following times:

Date	Times of inspection	Inspector	Role
15 March 2021	10:00hrs to 16:00hrs	Pauline Clarke Orohoe	Lead Inspector
15 March 2021	10:00hrs to 16:00hrs	Bronagh Gibson	Inspector Manager
16 March 2021	08:00hrs to 15:00hrs	Bronagh Gibson	Inspector Manager
16 March 2021	08:00hrs to 16:00hrs	Pauline Clarke Orohoe	Lead Inspector
18 March 2021	08:00hrs to 16:00hrs	Pauline Clarke Orohoe	Lead Inspector
19 March 2021	11:30hrs to 16:00hrs	Pauline Clarke Orohoe	Lead Inspector
23 March 2021	11:00hrs to 12:30hrs	Pauline Clarke Orohoe	Lead Inspector

4. Findings and judgments

Theme 2: Safe and Effective Services

Services promote the safety of children by protecting them from abuse and neglect and following policy and procedure in reporting any concerns of abuse and or neglect to the relevant authorities. Effective services ensure that the systems are in place to promote children's welfare. Assessment and planning is central to the identification of children's care needs. In order to provide the care children require, foster carers are assessed, approved and supported. Each child receives the supports they require to maintain their wellbeing.

Standard 10: Safeguarding and child protection

Children and young people in foster care are protected from abuse and neglect.

Summary of inspection findings under Standard 10

Safeguarding systems were in place, and were effective in ensuring children in foster care were protected from abuse and neglect.

Origins had a child protection policy and safeguarding policy which set out how staff and foster carers should work together to safeguard children in foster care, and promote their welfare in accordance with the statutory guidelines and standards. The designated liaison person was named within this policy. The service had a clear policy on protected disclosures. Staff were familiar with the protected disclosures policy and procedures. The policy outlined the process for making a protected disclosure and identified an independent social work consultant as the contact person. Staff told inspectors that they were updated on changes to this policy as they occurred. Staff were aware of the policies and procedures that guided their work, and ensured that children were kept safe.

Data provided to HIQA by the service indicated that there had been no allegations made against foster carers in the 12 months prior to the inspection. Origins had a policy in place for the management of allegations of abuse and neglect and serious concerns regarding foster carers. This policy was in line with the Tusla 'Interim protocol on the management of serious concerns and allegations'. The service also held a register in order to track the progress of the child protection and welfare referrals reported to

Tusla in relation to children in care. The service maintained a serious concerns log. Data provided by the service in advance of the inspection indicated that there had been one serious concern made against foster carers in the 12 months prior to the inspection. Inspectors reviewed this file and found that the service had followed the policies and procedures for the management of the concern. The serious concern had been appropriately investigated in line with the relevant policies and procedures. The foster care committee had been informed of the concern and also of the outcome of the investigation.

An audit of supervision and support provided by link social workers completed in December 2020 found that there had been delays in completing a child protection and welfare referral through the Tusla portal in line with the service's child protection policy. However, the relevant Tusla social work department had been informed of the concerns. Following this audit, the service directors developed a Children First register in January 2021 to record non-adherence to the requirements of Children First. The service directors told inspectors that this situation had been reflected upon with Origins compliance consultant, and the role of the Origins social work team in relation to reporting child protection and welfare concerns had been discussed and clarified. The service shared the learning from this with the teams. This incident had been discussed at the directors monthly meetings, and a decision was made to introduce reflective practice meetings. The reflective practice meetings, led by the external social work supervisor created a forum where social work staff could bring complex issues or challenges that had arisen within cases for discussion with managers and the wider team. This forum also provided an additional level of management oversight to ensure that any issues arising were reported to Tusla.

Serious and adverse incidents were promptly notified and appropriately managed by the service. Appropriate actions were then taken to address the issues identified. The service maintained a register of significant events. This was reviewed monthly at the directors meeting. Inspectors found that the register had not been kept up to date as there was an error in the date format on a small number of notifications recorded, and the status of three notifications had not been recorded. While the register was reviewed on a monthly basis, the service directors could not be assured that the information recorded on the register had been kept up to date. This was brought to the attention of one of the service directors who confirmed that all three notifications were closed, and agreed to have both issues corrected on the register.

Data provided by the service indicated that the service had not received any complaints in the 12 months prior to the inspection. Inspectors reviewed the one complaint that had been closed during the 12 months prior to the inspection. This complaint was discussed with foster carers, investigated and managed in a timely manner. The service

maintained a complaints register which monitored and recorded the progress and outcome of the complaint. This register was reviewed at the monthly directors meeting, providing management oversight of the complaints process. Origins had a complaints policy which was outlined within the information booklets provided to children and foster carer.

Safety plans were in place where required, and set out the appropriate actions needed to keep children safe. The service maintained a log in order to provide oversight of foster carers and children where safety plans were required. The actions, date of completion, person responsible and outcome were recorded on this log. Foster carers had safe care plans for children who were placed with them. These safe care plans provided details on how children would be cared for and included information and practical considerations in relation to the dress code within the home, visitors to the home and privacy. Safe care plans also included details on any specific care issues that were relevant for the child. Child in care social workers told inspectors that they were aware of the safe care plans in place for children, and were promptly informed of any significant events that arose for children.

Origins Foster Care Service was proactive in ensuring that all staff and foster carers received training in child protection and safeguarding practices. Foster carers received training in relation to their role as mandated persons. Child protection training was included in the preparation for fostering training that was provided to potential foster carers. The service maintained a tracker to monitor the training attended by foster carers and staff. At the time of the inspection all foster carers had attended the safeguarding training, and there were two foster carers who were due to complete the Children First e-learning module. All staff had completed the Children First training, and this was monitored through a staff training tracker. The service directors maintained management oversight of child protection training through the electronic trackers, monthly team meetings and the monthly directors meetings. Training meetings were also held on a monthly basis to discuss and plan for the training needs of foster carers. Foster carers told inspectors that they received training and information regularly in relation to keeping children safe.

Origins Foster Care Service had a tracker in place to provide oversight of the Garda vetting process for staff and foster care households. At the time of the inspection, Garda vetting for all members of foster care households was in date. Actions identified during audits of Garda vetting were discussed and followed up promptly through the monthly audit meetings. The service completed quarterly reviews to ensure that Garda vetting was in date. Management oversight of Garda vetting was provided through the monthly team meetings, service development team meetings, audit and file review meetings and the monthly directors meetings.

Origins had appropriate policies in place to safeguard children in foster care, and promote their welfare. There was evidence of management oversight in relation to the progress of the child protection and welfare referrals reported to Tusla. Serious concerns were managed appropriately. An audit of supervision and support records identified that there had been delays in completing a child protection and welfare referral through the Tusla portal in line with the service's child protection policy. The service directors had put additional oversight systems in place to following this audit. Serious and adverse incidents were promptly notified and appropriately managed by the service. Inspectors found that the register of significant events which was reviewed monthly by the service directors had not been kept up to date. When brought to the attention of the service directors, the register was amended. Origins had a complaints policy which was outlined within the information booklets provided to children and foster carer.

Judgment: Compliant

Standard 14a: Assessment and approval of non-relative foster carers

Foster care applicants participate in a comprehensive assessment of their ability to carry out the fostering task and are formally approved by the health board³ prior to any child or young person being placed with them.

Summary of inspection findings under Standard 14a

The Origins Foster Care service had a written policy in place which provided detailed guidance for social workers completing foster care assessments. The foster care assessments were carried out by independent social workers who were employed on a contractual basis by the service provider. The assessment supervisor and the service director with responsibility for the recruitment and assessment of foster carers had oversight of all completed assessments for the purpose of quality assurance. At the time of the inspection there were no applicants on a waiting list for assessment. Information provided prior to the inspection reflected that the service had commenced 23 assessments in the twelve months prior to the inspection. Five of these foster carers had been approved, five assessments were ongoing and the remaining 13 did not progress. The service had completed one assessment of an applicant, despite them not meeting the criteria as set out in the Tusla Foster Care Committee Policy, Procedures and Best Practice Guidance (2017). Therefore the service needed to strengthen their screening process, to be assured in relation to the applicants' eligibility before undertaking assessments in the future.

Fostering assessments were detailed, comprehensive and of good quality. The assessments provided in-depth analysis of the foster carers history and ability to provide good quality care for children, including the educational, financial, health and employment history of the family. There was evidence on file that the assessing social worker had visited and interviewed the foster carers and their birth children several times. References for the foster carers were available on files. All of the files reviewed for the quality and timeliness of assessments contained the necessary documents for approval. Four of the five files reviewed by inspectors contained a foster care contract. The service maintained a tracker to provide management oversight in relation to the completion of foster care contracts. Inspectors reviewed the tracker and found that ten general foster care contracts were outstanding. This had also been identified as a risk on the risk register for the service. Inspectors found that where foster care contracts had been requested and not been received, the issue had been escalated to the fostering monitor by the Origins Foster Care service.

Assessments were not always completed in line with the 16 week timeframe required by the Foster Care (Placement of Children in Foster Care) Regulations, 1995. The service director with responsibility for assessments told inspectors that delays have

occurred in the completion of assessments due to events which had taken place for foster carers. When cases were allocated to a social worker for the completion of the assessment, the start date and completion date were entered on the electronic filing system to provide oversight of the process. The service maintained a register to track the progress of assessments, and this register was updated at the weekly recruitment and assessments meeting. Weekly updates were added to the register, and the reason for delays in relation to relevant assessments was also noted. Decisions relating to the individual assessments were noted on the register.

Management oversight of the fostering assessment process was good. The service director with responsibility for assessments maintained oversight of assessments, and reviewed completed assessments. The assessment supervisor provided supervision and support to the assessing social workers. Assessments were reviewed at the weekly recruitment and assessment meetings, and at the monthly directors meetings.

There was a clear process for the approval of foster carers. Foster carers were given the opportunity to read and sign their assessment reports. Assessment reports were presented to the foster care committee which operated with the geographical area where the foster carers were living. Foster carers were notified in writing of the decision in relation to their approval as foster carers. Foster carers told inspectors that they were aware of what was taking place at each stage of the assessment process. The foster carers said that the assessment was completed through home visits and also video calls due to COVID-19, and the service were responsive to any questions that the foster carers had during the process.

The Origins Foster Care service had a policy in place that detailed the procedures to be followed for foster carers transferring from another service. Origins Foster Care service had received the relevant information in relation to the foster carers and observed due diligence in the transfer of foster carers to the service.

The Origins Foster Care service had a written policy in place which provided information to guide the foster care assessment process. Fostering assessments were detailed, comprehensive and of good quality. Delays in the completion of assessments were noted, and the service director maintained appropriate oversight of the assessment process. There was a clear process for the approval and transfer of foster carers to the service.

Judgment: Compliant

³ These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla)

Standard 15: Support and Supervision

Approved foster carers are supervised by a professionally qualified social worker. This person, known as the link worker, ensures that foster carers have access to the information, advice and professional support necessary to enable them to provide high-quality care.

Summary of inspection findings under Standard 15

Foster carers were supported and supervised by a professionally qualified social worker, referred to as the link social worker. All foster carers were allocated to a link worker who was responsible for ensuring that foster carers had access to information, advice and professional support necessary to enable them to provide high quality, safe care.

The Origins Foster Care service provided good quality support and supervision to foster carers. The service had a policy in place which described the minimum level of supervision which was expected to be afforded to foster carers by link social workers. The policy stated that foster carers will receive at least monthly social work visits for the first six months from when they join the agency or in the case of a new placement. Following this fostering link worker visits will be made at least once every three months, with a minimum of four visits taking place in a year. Due to the public health restrictions in place during COVID-19, the service developed a policy providing practice guidance on the provision of support and supervision to foster carers during COVID-19. This policy outlined that formal supervision will continue to take place with foster carers in person or through video call every two to three months. Inspectors reviewed six files for the quality and frequency of supervision and support. In five of the six files reviewed, there was evidence of good formal supervision in line with the service's policy. In the remaining file reviewed by inspectors, there was a gap of four months between visits where a child had been placed with the foster carers within the previous six months. For all others, supervision visits were found to be supportive, detailed, well recorded, and the frequency was in line with the policy of the service. The head of fostering told inspectors that there have been delays in completing home visits to foster carers due to the public health restrictions in place due to COVID-19. The compliance officer had identified this issue during the December 2020 audit of the support and supervision provided to foster carers by the service. This had been added to the risk register, and appropriate actions had been identified to manage this risk in a timely and appropriate manner. These actions included monitoring the impact of the restrictions through monthly team meetings and directors meetings, and safety plans were being put in place for families not visited within three months and a timeframe for the next visit was agreed.

Inspectors found that where visits to foster carers included supervision of the foster carer, there was difficulty in identifying these visits on the electronic filing system. This may create difficultly in the management oversight of home visits and supervision provided to foster carers. The management team of Origins Foster Care service had identified issues in the timely recording and uploading of case records. A review of relevant files was completed, and additional audit systems were put in place by the service directors to provide increased management oversight and governance regarding the standard of social work recording. The service directors told inspectors that this was being monitored by the compliance officer on an ongoing basis. In addition, actions had been added to the electronic filing system to identify oversight provided by the principal social worker and social work team leader.

The Origins Foster Care service provided good support to foster carers who were caring for children with complex needs. These supports included play therapy, psychology, and access to additional training specific to the needs of the child. There was also evidence of good inter-agency working with the child in care social workers in order to address the needs of the child, and to support the foster carers. However, inspectors found that up-to-date care plans and placement plans were not consistently available on children's files. The service had requested this documentation from the child in care social workers. At the time of inspection, inspectors found that care orders and voluntary consents were not available on children's files. The service director took immediate action to request these documents from Tusla. During the inspection the service director provided assurance that care plans and care orders were being received from the relevant child in care social workers. The file audit system provided management oversight of the documentation that was not available on children's files.

Foster carers were provided with opportunities to attend training remotely due to the public health restrictions. Foster carers told inspectors that this allowed them to gain additional knowledge and theory in relation to certain topics, and it also allowed them to learn from other foster carers who attended the training. The service also held monthly meetings with an external social work supervisor who provided clinical input and direction in relation to challenges arising on cases. Child in care social workers told inspectors that the service provided supports for the children based upon their needs, and that information regarding attachment and trauma was provided to foster carers in an appropriate manner.

Twenty-four hour support was available to foster carers. This support service was operated on a rotational basis by the service directors, the social work team leader and a link social worker. Foster carers who spoke to inspectors said they

were encouraged to use the out-of-hours support, and felt they received a high level of support from the Origins Foster Care service. Foster carers told inspectors that the service was always available to offer support and information, and the staff were responsive to the needs of foster carers. The head of fostering told inspectors that the service were also completing a feedback process with foster carers, where foster carers were interviewed individually regarding their experience of the service. This process was due to be completed in March 2021, and the learnings from the process were going to be used for future service development and delivery.

At the time of the inspection, the service had commenced foster care support meetings across four counties. The head of fostering told inspectors that these supports meetings were being provided online due to the public health guidelines, and that they will become face-to-face meetings when the public health restrictions are removed. These meetings had begun in December 2020 and were scheduled to take place every two months.

The Origins Foster Care service provided good quality support and supervision to foster carers. However, where visits to foster carers included supervision of the foster carer, there was difficulty in identifying these visits on the electronic filing system. The service had identified issues in the timely recording and uploading of case records, and additional systems were put in place to provide increased management oversight and governance regarding the standard of social work recording. Up-to-date care plans and placement plans were not consistently available on children's files. The service had requested this documentation from the child in care social workers. Care orders and voluntary consents were not available on children's files at the time of inspection. The service director took immediate action to request these documents from Tusla. During the inspection the service director provided assurance that care plans and care orders were being received from the relevant child in care social workers.

Judgment: Substantially compliant

Standard 16: Training

Foster carers participate in the training necessary to equip them with the skills and knowledge required to provide high-quality care.

Summary of inspection findings under Standard 16

Origins Foster Care service ensured that foster carers took part in the training necessary to equip them with the skills and knowledge required to provide high-quality, safe care to children. Foster carers were required to attend the pre-approval training 'Foundations for Fostering' as part of the assessment process. Following approval, foster carers were required to complete the core training modules delivered by Origins which were child safeguarding including the role of mandated persons, safe care, attachment and developmental trauma, first aid, record keeping and the protocols for responding when a child goes missing from care. Foster carers were asked for feedback following training sessions. A member of the Origins Foster Care service also attended each training event as a means of evaluating the quality of training provided. The service maintained a register of training completed by foster carers which identified the training they had completed, and the modules that were outstanding. The service directors had oversight of the training required and delivered through the training register, monthly training meetings, team and senior management meetings.

Origins Foster Care service had developed learning and development plans for foster carers. The learning and development plans were reviewed every six months, and a training schedule was developed to meet the training needs identified. The principal social worker told inspectors that the learning and development plans were also reviewed annually to consider the training which each foster carer had completed, and what additional training they may need. Training meetings took place on a monthly basis to identify and schedule training for the foster carers. These meetings also provided management oversight of the training that was provided, attended and needed by foster carers. Training was an agenda item on team and management meetings, and the training schedule was reviewed regularly to ensure that training provided met the changing needs of children and foster carers.

Foster carers were provided with additional training to support them to care for children in line with the service model of the organisation. Inspectors reviewed foster carers files, and found that where foster carers had requested or needed additional support, information of training, this was provided by Origins Foster Care service. Foster carers told inspectors that they had received regular training from the service which had been helpful in preparing and supporting them in their role. During COVID-19 and the public

health restrictions, training events had been provided through video conferencing and social media platforms. Foster carers told inspectors that this had been helpful. The Origins Foster Care service had also provided foster carers with training to support them in using video conferencing facilities during training sessions.

Judgment: Compliant

Standard 17: Reviews of foster carers

Foster carers participate in regular reviews of their continuing capacity to provide high-quality care and to assist with the identification of gaps in the fostering service.

Summary of inspection findings under Standard 17

Reviews of foster carers were carried out in line with the standards and regulations. The Origins Foster Care service had a policy in place that detailed the review process and timelines in line with the national standards and regulations. The policy set out that the first review was to take place one year after the first placement had been made, with subsequent reviews taking place at three yearly intervals. In situations where foster carers transferred over from another agency, a review was to commence within one year of the transfer. Additional reviews should take place following an allegation or a serious complaint. Data provided by the service in advance of the inspection showed that two foster carers had a review in the 12 months prior to the inspection.

Inspectors found evidence of good practice in relation to the foster care review process. Management oversight of foster care reviews was evident through monthly team and management meetings. Monthly file audit meetings tracked the dates of foster care reviews, and noted when the next review was due to be completed. Inspectors were told that the administrator placed the next review date on the electronic recording system, which then created a prompt to social workers of when a foster carer's review process was due. Link social workers and managers told inspectors that updates on the progression of foster care reviews and reports were discussed in staff supervision.

Foster care review reports and documentation were found to be of good quality. The reviews and reports were comprehensive and considered the current circumstances of the foster carers, their ability as foster carers and any concerns raised. Additional support and training needs were reviewed, and recommendations were followed up on. Reviews included the views of the children, the foster carers and the Tusla child in care social workers. Child in care social workers told inspectors that they had been sent out forms in order to provide feedback to the foster care reviews. The service maintained a checklist of documents required to be submitted to the Tusla foster care committees. The foster care committee had been informed of the outcome of the reviews.

The Origins Foster Care service carried out additional reviews following serious complaints or allegations where required. At the time of the inspection, one review had

been completed and was awaiting updated Garda vetting, and a second review process had began. While there had been delays in completing these reviews, inspectors found that the reasons for the delays were appropriate and were documented. There was evidence of good inter-agency working in relation to the timing of these reviews.

Judgment: Compliant

Theme 4: Leadership, Governance and Management

Effective governance is achieved by planning and directing activities, using good business practices, accountability and integrity. In an effective governance structure, there are clear lines of accountability at individual, team and service levels, and all staff working in the service are aware of their responsibilities. Risks to the service as well as to individuals are well managed and the system is subject to a rigorous quality assurance system. Services provided on behalf of the area are robustly monitored. The Foster Care Committee is a robust mechanism for approving both placements and foster care applications.

Standard 19: Management and Monitoring of Foster Care Services.

Health boards have effective structures in place for the management and monitoring of foster care services.

Summary of inspection findings under Standard 19

The service directors demonstrated competent leadership and were accountable for the services delivered. The Origins Foster Care service had a clear business and service development plan which mapped out areas of potential growth over the coming three years, and identified the resources needed to achieve this growth. The service directors told inspectors that they have a common vision and set of values in relation to the support and service that they want foster carers to experience.

Foster carers were supported by the service to provide good quality care to children. Additional therapeutic support and training was provided to foster carers when required. Child in care social workers told inspectors that the children placed with Origins Foster Care service received good care from foster carers who received relevant training, therapeutic support and advocated on their behalf. However, the lack of the necessary up-to-date placement documentation created a challenge for the service. Inspectors found that the service had a system in place to monitor the documentation available on children's files, and to request these documents from the relevant child in care social worker. Assurances were provided that care plans and care orders had been requested, and were being received from the relevant child in care social workers.

There were clear lines of accountability, and staff were clear on their roles and responsibilities. The Origins Foster Care service was owned by two service directors who had direct involvement in the management of the service. They had clearly defined roles and areas of responsibility, and had significant experience as social workers for children. The head of operations had responsibility for business support, accounts,

engagement with Tusla and the recruitment and assessment of foster carers, including the supervision of the assessment supervisor. The head of fostering had responsibility for administration, and provided support and supervision to the social work team leader. The social work team leader had responsibility for two full time link social workers and three sessional link social workers. Social workers for children in care told inspectors that they had a good experience of working with the Origins Foster Care service. They said that foster carers were provided with relevant training and support, and that they were kept updated in relation to relevant information as needed.

The service had robust management, reporting and governance systems in place that provided effective oversight of the services provided. Serious incidents and significant events were promptly notified and appropriately managed. Inspectors found evidence of discussions and relevant action in relation to key practice areas such as risk management, child protection, serious concerns, foster care assessments and reviews, supervision and support and training needs throughout the minutes of team and management meetings. These systems ensured that the service directors had oversight of the quality of the service, and the level of support provided to foster carers.

There were effective communication systems throughout the service. Team and management meetings took place regularly and recordings of the meetings had decisions outlined, and the person responsible and timeframes for completion. Staff members told inspectors that communication within the service was effective. Foster carers told inspectors that the service were responsive to phone calls, and there was always a staff member available to offer support.

There were effective mechanisms in place to monitor the quality of the service. The Tusla monitoring service had completed a monitoring visit of the service in October 2020. They had identified actions for the service in relation to the implementation of actions arising from internal audits, sign off on files, policy development regarding the supervision of the service directors, updating the risk register to identify the accountable person and the reinstatement of quarterly governance meetings with Tusla. At the time of the inspection, inspectors found that the Origins Foster Care service had taken steps to address these areas of concern. A quarterly governance meeting had taken place with Tusla in October 2020. A governance meeting scheduled for January 2021 had not taken place. A date had been agreed with Tusla for a quarterly governance meeting at the end of March 2021.

The service completed internal audits, while also having recruited a compliance consultant to audit and review specific aspects of service provision. Following these audits, reports were developed outlining recommendations for actions where required. Inspectors reviewed a sample of these actions and found that the service followed up in a prompt and timely manner as required. Learnings from these audits

and review processes were shared across the staff teams, and additional monitoring and oversight systems were implemented as needed. Reflective practice meetings had been established with an external social work supervisor who provided clinical support to address complex issues that may arise within cases, and to share learnings within practice.

The Origins Foster Care service had a risk management framework in place which identified relevant risks in relation to the services provided. Inspectors reviewed the risk register for the service and found that it was up to date, and had appropriate measures in place to control risks. The service also had a clear system in place to escalate issues to Tusla where required. Escalation meetings were held and a log was maintained detailing the issues that had been escalated and the progress and outcome of the escalation. The service had an email reminder system in place to ensure that escalations were followed up on in a prompt manner where no response was received within two weeks of the escalation.

At the time of the inspection Tusla did not have a service level agreement in place for the Origins Foster Care service.

Judgment: Compliant

Theme 6: Workforce

Each staff member has a key role to play in delivering child-centred, effective and safe services to children. Children's agency recruit and manage their workforce to ensure that staff has the required skills, experience and competencies to respond to the needs of the children.

Standard 20: Training and Qualification.

Health boards ensure that the staff employed to work with children and young people, their families and foster carers are professionally qualified and suitably trained.

Summary of inspection findings under Standard 20

The Origins Foster Care service was staffed by a skilled, knowledgeable and experienced team. Social workers recruited by the organisation were experienced, and the service directors told inspectors that the service recruits social workers who are at senior practitioner skill level. The service had effective recruitment processes in place. This included the completion of relevant Garda vetting and reference checks for each staff member. Recruitment information was well recorded in electronic format. The service had a tracker in place to monitor and update Garda vetting for staff. Relevant members of staff were registered with the appropriate professional body, and copies of this registration were held on staff members' individual files.

The service had a comprehensive induction programme for new staff and sessional workers. Social workers told inspectors that they were provided with reading materials prior to commencing employment with the Origins Foster Care service, and that they received a good induction and orientation to the service. The service had an employee handbook and a clear staff induction policy which set out the procedures to be followed when a new staff member began working with Origins. Inspectors reviewed staff files, and found that the induction checklist had been completed for staff who were new to the service.

Staff received good quality supervision by trained supervisors. Supervision sessions covered the areas of foster carer's cases and professional development. The service had a supervision policy which detailed the procedures to be followed in relation to the process and frequency of supervision. Inspectors found that staff supervision took place in line with the policy of the service. However, supervision provided to the head of operations was not in line with the provisions of the policy. Inspectors were told that the gaps in these supervision sessions were due to the external supervisor taking on the role of assessment supervisor, and a new supervisor was identified to provide

clinical supervision. The service directors told inspectors that the area of supervision had also been raised by the monitoring officer, and an additional supervisor has been identified to provide external supervision in relation to the governance of the organisation. These sessions were taking place bi-monthly.

Staff received appropriate training that enabled them to provide care that reflected upto-date, evidence-based practice which enabled them to meet the needs of children and foster carers. Staff told inspectors that there was a culture of learning and development across the service, where value was placed on providing adequate training for both staff and foster carers. Staff were supported to attend training sessions that were developed for foster carers to ensure that they could share in the foster carers learning, and reflect on the training provided. The Origins Foster Care service also provided staff with specific training focused on core therapeutic principles which guided the work of the service. Continued professional development was considered as part of staff supervision, and the annual appraisal process. However, appraisals were not completed with the service directors who held the roles of principal social workers, or with the sessional social workers employed by the service. The service had completed a training needs analysis, and had scheduled relevant training throughout 2021. Service directors maintained oversight of staff training through the staff training tracker that was maintained and team meetings.

Judgment: Compliant

Appendix 1 — Standards and regulations for statutory foster care services

National Standards for Foster Care (April 2003)

Theme 1: Child Centred Services

Standard 1: Positive sense of identity

Children and young people are provided with foster care services that promote a positive sense of identity for them.

Standard 2: Family and friends

Children and young people in foster care are encouraged and facilitated to maintain and develop family relationships and friendships.

Standard 3: Children's Rights

Children and young people are treated with dignity, their privacy is respected, they make choices based on information provided to them in an age-appropriate manner, and have their views, including complaints, heard when decisions are made which affect them or the care they receive.

Standard 4: Valuing diversity

Children and young people are provided with foster care services that take account of their age, stage of development, individual assessed needs, illness or disability, gender, family background, culture and ethnicity (including membership of the Traveller community), religion and sexual identity.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part III Article 8 Religion

Standard 25: Representations and complaints

Health boards⁵ have policies and procedures designed to ensure that children and young people, their families, foster carers and others with a bona fide interest in their welfare can make effective representations, including complaints, about any aspect of the fostering service, whether provided directly by a health board* or by a non-statutory agency.

⁵ These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla).

Theme 2: Safe and Effective Services

Standard 5: The child and family social worker

There is a designated social worker for each child and young person in foster care.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part IV, Article 17(1) Supervision and visiting of children

Standard 6: Assessment of children and young people

An assessment of the child's or young person's needs is made prior to any placement or, in the case of emergencies, as soon as possible thereafter.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part III, Article 6: Assessment of circumstances of child

Standard 7: Care planning and review

Each child and young person in foster care has a written care plan. The child or young person and his or her family participate in the preparation of the care plan.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part III, Article 11: Care plans

Part IV, Article 18: Review of cases

Part IV, Article 19: Special review

Standard 8: Matching carers with children and young people

Children and young people are placed with carers who are chosen for their capacity to meet the assessed needs of the children or young people.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part III, Article 7: Capacity of foster parents to meet the needs of child

Child Care (Placement of Children with Relatives) Regulations, 1995

Part III, Article 7: Assessment of circumstances of the child

Standard 9: A safe and positive environment

Foster carers' homes provide a safe, healthy and nurturing environment for the children or young people.

Standard 10: Safeguarding and child protection

Children and young people in foster care are protected from abuse and neglect.

Standard 13: Preparation for leaving care and adult life

Children and young people in foster care are helped to develop the skills, knowledge and competence necessary for adult living. They are given support and guidance to help them attain independence on leaving care.

Standard 14a — Assessment and approval of non-relative foster carers

Foster care applicants participate in a comprehensive assessment of their ability to carry out the fostering task and are formally approved by the health board⁶ prior to any child or young person being placed with them.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part III, Article 5 Assessment of foster parents
Part III, Article 9 Contract

⁶ These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla).

Standard 14b — Assessment and approval of relative foster carers

Relatives who apply, or are requested to apply, to care for a child or young person under Section 36(1) (d) of the Child Care Act, 1991 participate in a comprehensive assessment of their ability to care for the child or young person and are formally approved by the health board*.

Child Care (Placement of Children with Relatives) Regulations, 1995

Part III, Article 5 Assessment of relatives

Part III, Article 6 Emergency Placements

Part III, Article 9 Contract

Standard 15: Supervision and support

Approved foster carers are supervised by a professionally qualified social worker. This person, known as the link worker, ensures that foster carers have access to the information, advice and professional support necessary to enable them to provide high-quality care.

Standard 16: Training

Foster carers participate in the training necessary to equip them with the skills and knowledge required to provide high-quality care.

Standard 17: Reviews of foster carers

Foster carers participate in regular reviews of their continuing capacity to provide high-quality care and to assist with the identification of gaps in the fostering service.

Standard 22: Special Foster care

Health boards⁷ provide for a special foster care service for children and young people with serious behavioural difficulties.

⁷ These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla).

Standard 23: The Foster Care Committee

Health boards* have foster care committees to make recommendations regarding foster care applications and to approve long-term placements. The committees contribute to the development of health boards' policies, procedures and practice.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part III, Article 5 (3) Assessment of foster carers

Child Care (Placement of Children with Relatives) Regulations, 1995

Part III, Article 5 (2) Assessment of relatives

Theme 3: Health and Development

Standard 11: Health and development

The health and developmental needs of children and young people in foster care are assessed and met. They are given information, guidance and support to make appropriate choices in relation to their health and development.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part III, Article 6 Assessment of circumstances of child Part IV, Article 16 (2)(d) Duties of foster parents

Standard 12: Education

The educational needs of children and young people in foster care are given high priority and they are encouraged to attain their full potential. Education is understood to include the development of social and life skills.

Theme 4: Leadership, Governance and Management

Standard 18: Effective policies

Health boards* have up-to-date effective policies and plans in place to promote the provision of high quality foster care for children and young people who require it.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part III, Article 5 (1) Assessment of foster carers

Standard 19: Management and monitoring of foster care agency

Health boards⁸ have effective structures in place for the management and monitoring of foster care services.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part IV, Article 12 Maintenance of register

Part IV, Article 17 Supervision and visiting of children

Standard 24: Placement of children through non-statutory agencies

Health boards* placing children or young people with a foster carer through a non-statutory agency are responsible for satisfying themselves that the statutory requirements are met and that the children or young people receive a high-quality service.

Child Care (Placement of Children in Foster Care) Regulations, 1995

Part VI, Article 24: Arrangements with voluntary bodies and other persons

Theme 5: Use of Resources

Standard 21: Recruitment and retention of an appropriate range of foster carers

Health boards* are actively involved in recruiting and retaining an appropriate range of foster carers to meet the diverse needs of the children and young

⁸ These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla).

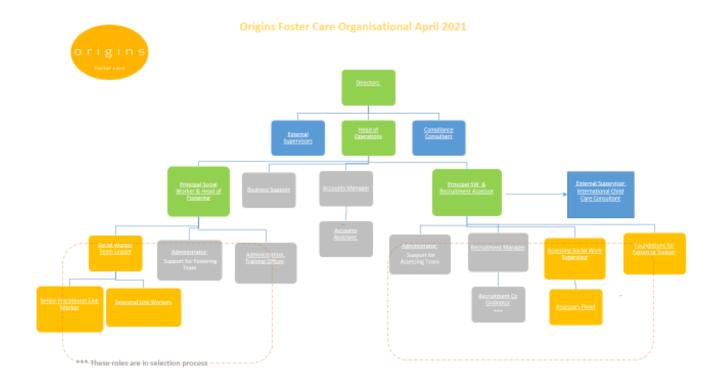
people in their care.

Theme 6: Workforce

Standard 20: Training and Qualifications

Health boards' ensure that the staff employed to work with children and young people, their families and foster carers are professionally qualified and suitably trained.

Appendix 2 — Organogram



5881-Origins-Private-Foster-Care **Health Information and Quality Authority**