



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

Regulation of  
Health and Social  
Care Services

# Governance of Foster Care Services Thematic Programme

## Guidance and Assessment- Judgment Framework

March 2021

*Safer Better Care*

## About the Health Information and Quality Authority (HIQA)

The Health Information and Quality Authority (HIQA) is an independent statutory authority established to promote safety and quality in the provision of health and social care services for the benefit of the health and welfare of the public.

HIQA's mandate to date extends across a wide range of public, private and voluntary sector services. Reporting to the Minister for Health and engaging with the Minister for Children, Equality, Disability, Integration and Youth, HIQA has responsibility for the following:

- **Setting standards for health and social care services** — Developing person-centred standards and guidance, based on evidence and international best practice, for health and social care services in Ireland.
- **Regulating social care services** — The Chief Inspector within HIQA is responsible for registering and inspecting residential services for older people and people with a disability, and children's special care units.
- **Regulating health services** — Regulating medical exposure to ionising radiation.
- **Monitoring services** — Monitoring the safety and quality of health services and children's social services, and investigating as necessary serious concerns about the health and welfare of people who use these services.
- **Health technology assessment** — Evaluating the clinical and cost-effectiveness of health programmes, policies, medicines, medical equipment, diagnostic and surgical techniques, health promotion and protection activities, and providing advice to enable the best use of resources and the best outcomes for people who use our health service.
- **Health information** — Advising on the efficient and secure collection and sharing of health information, setting standards, evaluating information resources and publishing information on the delivery and performance of Ireland's health and social care services.
- **National Care Experience Programme** — Carrying out national service-user experience surveys across a range of health services, in conjunction with the Department of Health and the HSE.

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## Section 1 — Overview

### Introduction

The Director of Regulation within the Health Information and Quality Authority (HIQA) has produced this guidance to assist service providers and commissioners of Foster Care services and service areas to promote quality improvement in the governance of foster care services.

Thematic inspection programmes aim to promote quality improvement in a specific area of a service and to improve the quality of life of people receiving services. They assess compliance against the relevant national standards, in this case the *National Standards for Foster Care* (2003).

This thematic inspection programme primarily focuses on the governance structures of foster care services provided by the Child and Family Agency (Tusla).

In a well governed service, overall accountability for the service is clearly defined and the governance arrangements ensure a safe, sustainable service is delivered within a child-centred culture. Effective governance structures ensure the best interests of the child are protected and promoted at every level of the organisation. They enhance and improve practice that is already in place and allow providers of a foster care service to be assured of its quality of care, confidence that they can respond to identified risk and future challenges, and satisfy that they can consistently sustain an effective, child-centred and safe service.

Service providers should use this guidance to assess their level of compliance with the *National Standards for Foster Care* (2003). This guidance should also be used as a tool to promote governance structures that are characterised by strong leadership, efficient planning and directing activities, using good business practices, accountability and integrity.

#### **Programme aim**

The aim of this thematic inspection programme is to promote the identification, implementation and continuous improvement of effective governance structures in foster care services, thus improving the quality of lives and the safety of children in foster care.

## Scope of thematic programme

This thematic programme will promote quality improvement through the assessment of compliance with *National Standards for Foster Care 2003* (hereby referred to as the National Standards).<sup>(1)</sup>

Through this quality improvement framework, the providers of foster care services can assess their performance against relevant standards relating to their governance arrangements.

The Child and Family Agency (Tusla) has 17 service areas across Ireland, which provide foster care services to children and families. This thematic programme is the third and final phase of a 3-phased schedule of inspection programmes monitoring foster care services. It focuses on assessing the efficacy of governance arrangements across these foster care services, and the impact these arrangements have for children in receipt of foster care.

The previous two inspection programmes were as follows:

- Phase 1 (completed in 2018) - Assessed the efficacy of recruitment procedures, foster carer supervision, and assessment of foster carers.
- Phase 2 (completed in 2020) – Reviewed the arrangements in place for assessing children’s needs, the care planning and review process, preparations for children leaving care, and safeguarding of children.

As this inspection programme is focusing on service quality improvement, only those areas deemed to have previously had a high level of compliance with standards, will be included in this inspection programme. All other areas will continue to be monitored and inspected in line with our risk-based monitoring approach.

The inspection team will schedule inspections based on data from self-assessment questionnaires, information known to HIQA about the service or held by HIQA, and Tusla’s published performance data. Thematic inspections will be announced in advance, and services will receive 20 working days notice of such inspections.

This inspection programme is commencing in the context of what has been a challenging time nationally for fostering services, including children in care and their families, foster carers and local social work teams arising from the COVID-19 pandemic. In this context, HIQA acknowledges that services have had to adapt their service delivery in order to continue delivering the essential service to children in care. This inspection programme will review these arrangements within the overall governance of the service.

## The purpose of this thematic programme

Thematic inspections endeavour to focus the attention of service providers on certain critical aspects of care and service delivery. Thus, this thematic programme will focus that attention onto how effective governance should ensure that children in receipt of foster care experience care that is person-centred, promotes their rights and safeguards them against all forms of abuse.

When reading this guidance, providers should also be cognisant of other relevant legislation pertaining to the service they are providing,<sup>\*</sup> including GDPR, and Health and Safety legislation.

## What is effective governance of foster care services?

Effective governance arrangements across foster care services assure the provider and commissioner of foster care services (Tusla) that children placed in foster care receive an effective, safe and person-centred service, as evidenced by outcomes for children.

Governance of foster care services requires an organisational framework that incorporates arrangements, systems, processes and behaviours that:

- enables the workforce to do the right thing or make the right decision at the right time
- provides assurance to the executive, board and stakeholders on the safety, quality, effectiveness and efficiency of the services provided or commissioned by Tusla
- responds appropriately and in a timely manner when something goes wrong and
- embeds organisational learning to support continuous improvement in outcomes for children.

A well governed organisation has a clearly defined organisational structure, within which staff have clearly defined roles and responsibilities. The purpose and

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<sup>\*</sup> Foster care services in Ireland are governed by legislation including the Child Care Act 1991, the Child and Family Act 2013, the Child Care (Amendment) Act 2015 and 2017 and the Children First Act 2015. The framework for the regulation of foster care services is reflected in the Child Care Placement Regulations 1995, which outlines the regulatory requirements concerning the provision of foster care services.

functioning of the service is communicated and understood by all internal and external stakeholders.

A well governed organisation is accountable for the actions it takes, learns from its successes and mistakes and always works within its legislative framework, adhering to nationally mandated standards, policies, best evidence-based practices and implements recommendations from statutory agencies.

Staff working within a well governed organisation are supported by effective human resources, professional development, appropriate supervision and support, as well as ongoing training. Staff are held accountable for their practices. Where foster services are provided or commissioned, Tusla must be assured that staff and foster parents are appropriately supervised, trained and supported.

A well governed foster care service is always assured that children, their families and foster families are heard, listened to and responded in a timely and appropriate manner. Children's rights are always upheld and protected.

## National Policy

The Department of Children and Youth Affairs' *Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People 2014-2020* is the current national policy that sets out the government's key commitments to children and young people in Ireland. The policy outlines the government's intentions to strengthen the leadership and co-ordination of policy and strategic planning across government departments, statutory and non-statutory services. The policy outlines a number of key accountabilities for Tusla and its partner agencies to help improve outcomes for children in care, including:

- Early identification of 'at risk' children and families
- Supporting children and young people in care to meaningfully participate in care planning and decision-making about their lives
- Prioritising access to health, education and therapeutic services for children in care
- Addressing harms associated with discrimination and intolerance, and inequalities in health outcomes for identified vulnerable groups
- Ensuring all young people leaving care are adequately prepared and supported to negotiate the system and transition
- Strengthening data capture to enhance knowledge and understanding of abuse and of children's experience of the Court system.

## Review of literature

In preparation for this thematic programme, a literature review was conducted to better understand current trends and best practice in relation to the governance of foster care. The research conducted included a review of the current status of foster care governance in Ireland, an international review of foster care governance measures in other jurisdictions, and a review of academic and grey literature.

The key messages from the literature review can be summarised under seven themes:

- effective leadership and strategic direction;
- commissioning and procurement;
- performance and risk management;
- workforce development; quality assurance;
- learning from things going wrong and from research;
- placement of children through non-statutory agencies.

The best practice identified by the research contributed to the development of this guidance and assessment-judgment framework. The literature review outlining all of the above research and evidence is available on the HIQA website: [www.hiqa.ie](http://www.hiqa.ie)

## Self-assessment questionnaire

Prior to the start of the inspection programme, a self-assessment questionnaire will be issued to the Tusla service areas who provide foster care services to children, that have been deemed eligible on the basis of previous HIQA inspections, Tusla metrics, and other business intelligence held by HIQA, for this inspection programme. Managers of services should use the questionnaire in conjunction with this guidance and assessment judgment framework document, which describes what a good service looks like.

Each service area will be required to complete the self-assessment, which will help identify areas of good practice and where improvements are required. Services will be given 10 working days notice of when the questionnaire needs to be submitted to HIQA. The completed self-assessments will help to inform the inspections carried out by HIQA.

On the completion of the self-assessment questionnaire, each Tusla service area must develop a quality improvement plan to address any deficits identified. Inspectors may ask to view this plan when carrying out an inspection. A *Quality Improvement Plan* template is provided as part of this programme; however, service areas do not have to use this template if they have one of their own, nor are service areas required to submit the completed improvement plans to HIQA.

### **Risk management and escalation**

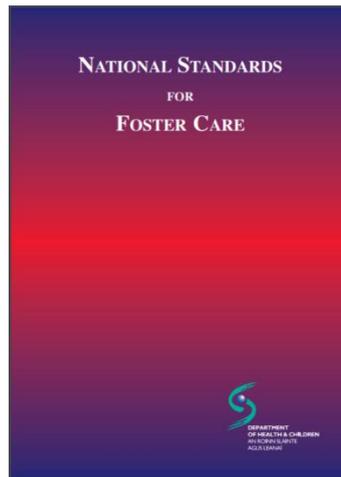
During the fieldwork part of the thematic programme, inspectors may form the view that there is significant risk in the service. In such circumstances, the lead inspector, in consultation with their line manager, may decide to cease the thematic inspection against the national standards and proceed to a risk-based inspection of that service area. The lead inspector will inform the area manager of the rationale for this decision.

If an inspector identifies a specific issue that may present an immediate and or potential serious risk to the health or welfare of children, then these risks will be assessed and escalated to Tusla senior management, if required.

## Section 2 — The National Standards

This section of the guidance document will outline the key *National Standards for Foster Care* selected for review as part of this thematic programme. The full standards are available to download on the HIQA website, [www.hiqa.ie](http://www.hiqa.ie).

**Figure 1. National Standards for Foster Care**



The national standards are grouped into three sections:

- Section 1 focuses on children and young people,
- Section 2 on foster carers and
- Section 3 on the Health Boards, now Tusla.<sup>†</sup>

Under each section, standard statements are provided with a list of criteria describing what a good service looks like and how the standard may be met.

### Standards for review under the thematic programme

#### Section 3: The Health Boards (now Tusla)

The lines of enquiry for this Governance of Foster Care Services thematic programme will focus on **eight specific national standards** within Section 3: The Health Boards (now Tusla) of the standards. The standards reflect the essential components of a well governed service and the trends identified in the literature review.

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<sup>†</sup> Tusla was established 1 January 2014 under the *Child and Family Agency Act 2013*.

These standards focus on the leadership and management of the service and how effective they are in ensuring that a good quality and safe service is being provided to children and families. They consider how people who work in the service are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service. The standards are:

- Standard 18: Effective Policies
- Standard 19: Management and Monitoring for Foster Care Services
- Standard 20: Training and Qualifications
- Standard 21: Recruitment and Retention of an Appropriate Range of Foster Carers
- Standard 22: Special Foster Care
- Standard 23: The Foster Care Committee
- Standard 24: Placement of Children through Non-Statutory Agencies
- Standard 25: Representation and Complaints.

In the next section, the standards are set out along with guidance on what a service meeting these standards looks like. Service Directors and Area Managers should use this guidance to assess their own service, in the development of their improvement plans and in the ongoing review of the governance of foster care services.

### Judgment Descriptors

The following table shows the levels of compliance — which we term ‘judgment descriptors’ — which are used to assess performance against each of the standards.

Compliant	Substantially Compliant	Moderate Non-Compliant	Major Non-Compliant
A judgment of compliant means that no action is required as the service has fully met or has exceeded the standard.	A judgment of substantially compliant means that some action is needed in order to meet the standard. The action taken will mitigate the non-compliance and ensure the safety, and health and welfare of the children using the service.	A judgment of moderate non-compliant means that substantive action is required by the service to fully meet the standard. <b>Priority action</b> is required by the provider to mitigate the non-compliance and ensure the safety, and health and welfare of children using the service.	A judgment of major non-compliant means that the services have not met the standard and may be putting children at risk of harm. <b>Urgent action</b> is required by the provider to mitigate the non-compliance and ensure the safety, and health and welfare of children using the service.



## Section 3 — Guidance and Assessment-Judgment Framework

### Effective Policies

#### Standard 18

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.

#### What a service meeting this standard looks like

Tusla have governance arrangements in place to oversee the implementation of organisational wide policies, procedures and guidance (here after collectively referred to as 'policies') at local level. Resource, operational and workforce policies and practices are standardised across foster care services and adapted when required, in response to, for example, public health risks such as Covid-19. Tusla ensures that through the implementation of their policies, there is sufficient organisational capacity to effectively meet local needs and priorities. They are assured that staff demonstrate high levels of understanding of policies, procedural and practice requirements.

Tusla and local management teams ensure that the policies in place guide and support staff in providing a child-centred service. There is a plan for the development and delivery of a range of foster care services for all children who require such services, which is underpinned by the policies. Managers and staff consult with all interested parties when planning the development and delivery of services. Managers and staff use the policies and procedures to drive continuous service improvement.

All who work in the service take a partnership approach towards the care of children. Policies and procedures promote the involvement of children (in accordance with their age and stage of development), their families, foster carers and professionals employed by Tusla, and other agencies in the development and delivery of foster care services. Policies are documented in a language and format that is easily understood and are accessible to all the children and young people in care. Where required, staff support children in accessing and understanding the policies that affect them.

There are systems in place to ensure policies are up to date, relevant to the changing needs of children in care and implemented in practice. Care practices within the organisation are consistent and in compliance with their policies and procedures. Managers, especially in light of changing needs of children in care,

inspection findings, development in best practice and learning from past mistakes or incidents, review policies regularly.

Tusla and service areas have a plan to adequately address the number of appropriate placements needed, paying particular attention to the diverse and changing needs of children. This service plan should be informed by an analysis of the current and future populations of children in care.

A panel, or panels, of approved persons who are willing to act as foster carers are maintained in each service area. Structures are in place that require and enable foster carers to develop and demonstrate the necessary knowledge and skills required to provide safe and effective care, and for the regular review of foster carers capacity to provide high-quality care in line with standards and best practice. Arrangements are in place to ensure access for their foster carers to ongoing training and support within the geographical area in which the foster carers reside. The service ensures that children are placed in foster placements close to their families, in order to best support each child or young person to maintain their social and community networks with their friends and family. In circumstances where this is not achieved, the rationale for the decision is clearly documented in the child's record.

Through the implementation of policies and best practice guidance, management and staff advocate for and raise awareness of the particular needs of children in foster care with other agencies involved in their welfare. Tusla and services area managers work in partnership with other agencies to ensure the best outcomes and experiences for children in care.

Tusla and service area managers are mindful of the need for formal arrangements and intersecting policies for interagency working and clear understanding of its roles, responsibilities and referral pathways within these arrangements. To facilitate improved case management, the formal arrangements in place with other agencies include mechanisms such as meetings, to address complex cases for example, for children with additional needs requiring multiagency involvement.

Protocols are in place for the safe transfer of children to other agencies, such as private foster care agencies, or service areas. Such protocols includes situations where one service area has responsibility for the child in care, but whose foster carers receive support from another service area.

### What this means for the child

Children and young people in care are protected by evidence-based policies, procedures and guidance. They are confident that those who care for them and those who oversee the service know what they are doing. Through the implementation of the policies, children in care know they will be consulted and involved in the development and delivery of foster care services. Children and young people are aware of the organisation's policies, can access them if they wish, and are supported to understand them, if required.

### Lines of enquiry

There are policies in place that guide the management and provision of foster care services at organisational and local level and these policies:

- are consistently implemented and regularly reviewed
- promote a partnership approach to the development and delivery of services
- are available and accessible to all interested parties.

Children in care are supported to access and understand policies that affect their care.

There is a plan for the appropriate delivery of foster care services that;

- provide a range of foster care services, including relative foster care responds to the needs of current and future populations of children in care.

The service area maintains a panel or panels, of approved persons who are willing to act as foster carers if needed<sup>‡</sup>.

There are systems in place to assess the capacity of foster carers at different points in their fostering career.

There are strong interagency working relationships in place with clearly outlined roles, responsibilities and referral pathways.

<sup>‡</sup> *Child Care (Placement of Children in Foster Care) regulations 1995, Part III, Article 5 (1)*

Management and staff advocate for and raise awareness of children in foster care with other agencies involved in their welfare

The area enables children to be placed close to their family in order to maintain their social and community network.

There are formal arrangements in place with other agencies to facilitate the management of specific cases as required.

There are protocols in place for;

- the transfer of children to and from other agencies or service areas
- the transfer of foster carers between agencies and service areas
- the management of children in care where one service area has responsibility for the care of children who are placed in another service area.

### **Sources of evidence**

- Review of the service area's self-assessment and quality improvement plan
- Information received from the service area regarding plans for the service area
- Policies, procedures and guidance documents
- Minutes of interagency meetings and management meetings
- Case files
- Focus groups with:
  - Relevant advocacy agencies, such as EPIC and IFCA, GAL's
  - Social workers and child care leaders involved in providing services to children in foster care
  - Social work team leaders
  - Relevant community service providers.
- Conversations with a sample of
  - Parents
  - Children
  - Foster carers  
(selected from the files sampled).
- Interviews with:
  - principal social workers
  - area managers
  - service area directors.

## Management and monitoring of foster care services

### Standard 19

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

#### What a service meeting this standard looks like

Overall, accountability for the service is clearly defined and governance arrangements ensure a safe and sustainable service is delivered within a child-centred culture. The culture and provision of the service is informed by the lived experiences and voice of the child receiving the service. The best interests of the child in care is served at every level in the organisation.

Management systems are in place that provide oversight of decision-making, risk management and quality assurance. The service is responsive to managing risks and implementing continuous quality improvements. There are clear escalation routes through regional and national levels within Tusla for risks that cannot be resolved locally. This ensures delivery of a high-quality foster care service.

Tusla and local managers have clear systems in place to meet their legal obligations under the Child Care Act 1991, the Child and Family Agency Act 2013, the Child Care (Amendment) Act 2015 and the Children First Act 2015 and the Child Care Placement Regulations 1995. Tusla and service areas have set out clear organisational priorities in line with the legislation, for delivery of the service, together with the organisational structures to deliver. Management and staff are clear as to their individual and collective roles and responsibilities. Managers at all levels effectively and ethically lead the foster care service to ensure the best possible outcomes for each fostered child.

Staff and foster carers are supported and confident in the delivery of safe, consistent and quality care to children in care and their families. Managers actively promote training and participatory practice for all staff from induction onwards.

The service is well planned and monitored effectively. There are quality assurance systems in place that are separate from the line management structures for foster care services, to ensure compliance with statutory requirements and standards. It also aims to achieve continuous improvement, consistency, and equity in relation to the quality of the service provided through the implementation of actions identified. Tusla and local managers ensure that policies, procedures and guidelines, which guide and support staff, are implemented. Staff are confident in their knowledge of and can consistently adhere to these policies and procedures.

The area's information system gathers appropriate data about the service which supports both service planning and delivery for current and future service needs.

The systems used for the recording and storing of information is secure, in line with legislative requirements and allows for easily retrievable information when required.

Tusla and local service areas promote a learning culture. Regular quality reviews and analysis of the quality of national and local arrangements should be conducted. These reviews should include areas such as investigations, risk identification and preventative measures, the support systems in place for staff and foster carers and regional and local variations in care service delivery. In addition, and as part of their annual *Adequacy of the Child Care and Family Support Services* report, the service should report on all aspects of their foster care services including:

- Recruitment and retention of foster carers
- The number of placements made
- The number of children in need of placements
- The appropriateness of current placements
- Representations and complaints in relation to foster care services, the procedures followed in resolving these and the outcomes achieved.

Resources within Tusla and local service areas are well managed, including financial and human resources. Resource allocation matches the needs of the service and children who require out-of-home placement. Recruitment practices, induction and professional development aim to safeguard children in care. There are sufficient number of social workers employed to fulfil the duties of the child and family social worker and link worker. In a good foster care service, there are no waiting lists for children and families to receive a service, but where waiting lists occur, these are limited and are well managed to ensure that waiting times are as short as possible.

A well-managed service has contingency arrangements in place to address any unforeseen short-term resource deficits.

### **What this means for the child**

Children in care receive an appropriate, well governed good quality service that meets their needs in a timely way. The service is child centred taking into account the lived experiences and voice of the child who uses the service.

Children in care benefit from a quality improvement approach to the delivery of foster care services and a service that learns from its successes and mistakes.

<p>Children feel secure knowing that Tusla has sufficient resources and allocates them appropriately to ensure that they receive a quality and safe service.</p>
<p><b>Lines of enquiry</b></p>
<p>Tusla has clearly defined governance arrangements and structures that set out lines of authority and accountability, and specific roles and responsibilities.</p>
<p>These governance arrangements ensure the delivery of a high-quality foster care service, and a commitment to continuous improvement.</p>
<p>There are strategic and operational plans for the service area, implemented at organisational, regional and local levels.</p>
<p>The fostering service is well led, organised, managed and staffed in a manner that delivers the best possible outcomes for children placed in foster care.</p>
<p>Managers and staff implement monitoring, oversight and quality assurance systems at national, regional and local levels and report regularly on the compliance of the service area with legislation, regulations, national policies and standards.</p>
<p>Managers and staff ensure that all relevant staff understand their roles and responsibilities and the needs of children that they provide a service to.</p>
<p>The service area has policies, procedures and guidelines that guide and support staff to deal with all aspects of foster care including complaints, incident reviews and quality of service.</p>
<p>The service area learns from its successes and mistakes and shares its achievements and good practice with other areas, and takes the necessary actions to address any deficits.</p>
<p>The service area maintains a register of all children in foster care in compliance with statutory requirements.</p>
<p>The service area has information systems that provide up to date and timely data about their foster care service and uses this information to plan, deliver and improve services.</p>

There are systems in place to identify and address any resource requirements including situations where a child's allocated child and family social worker and/or fostering link worker is unavailable for an extended period.

Tusla and local service areas are assured that assessment, care planning, resource allocation, recruitment and staff training programmes are effective to meet the needs of children in care.

### Sources of evidence

- Completed self-assessment and quality improvement plan
- Governance structure
- Service area plans and foster care strategy
- Management and staff meeting records
- Quality reviews
- Recruitment practices
- Staff development and supervision
- Data set information per service area
- Assessments and care plans
- Case files
- Waiting list management (if relevant)
- Register of children in care
- SLA's and monitoring arrangements of services provided
- Complaints record
- Records of adverse events
- Serious incident records
- Annual *Adequacy of the Child Care and Family Support Services* report.
  
- Focus groups with:
  - Relevant advocacy agencies, such as EPIC and IFCA, GAL's
  - Social workers and child care leaders involved in providing services to children in foster care
  - Social work team leaders
  - Relevant community service providers.
  
- Conversations with a sample of
  - Parents
  - Children
  - Foster carers

(selected from the files sampled)

- Interviews with:
  - Principal social workers
  - Area managers
  - Service director.

## Training and qualification

### Standard 20

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.

### What a service meeting this standard looks like

Recruitment practices support the employment of staff who have the necessary skills and competencies to work with children in care and deliver a high-quality foster care service. To ensure safe recruitment methods, a child safety statement and policy are in place and staff are provided with training in how to recognise indicators of abuse and respond to these appropriately. There is evidence that all staff have been vetted by An Garda Síochána or other police services and this vetting is held on their personnel files. Tusla ensures that they have evidence of professional registration for staff who require it to practice.

The service maintains clear job descriptions for all staff and members of fostering teams and ensures each staff member and foster carer is aware of their roles and responsibilities.

Tusla promotes a culture of learning and supports local service areas staff through the identification of their training and development needs in relation to the delivering of the foster care service. Appropriate training is provided to ensure a safe quality service which includes joint training initiatives with foster carers. There is an appropriate induction programme for staff relative to their role. Ongoing in-house and formal training responds to organisational and developmental needs. Staff training and development plans are reviewed and updated at regular intervals to remain relevant to the needs of the service and the demands on the foster care service. Management seeks input from children and young people to inform components of a staff training programme. There are systems in place to ensure that the needs of children are at the centre of training development and delivery. Formal supervision is a part of staff development.

Staff are supported to engage and help children and young people to meaningfully participate in care planning and decision-making about their lives, for example, through the completion of Tusla's Child and Youth Participation Training.

Through training, development and support, staff are able to provide skilled interventions to work with multiagency networks on complex casework. The service also facilitates joint training between foster carers and social workers in order to enable consistency in the approach to caring for children. The service recognises the importance of collaboration with professionals from different agencies in promoting consultation, learning from shared experiences and improving foster care experiences for the child especially in relation to complex case planning. This collaboration is evident at all levels in the organisation.

**What this means for the child**

Children and young people in care engage with experienced, qualified, vetted and registered (where appropriate) staff. The child is encouraged and supported to participate in a meaningful way in decisions about their care.

Children can talk to the staff charged with their care easily, openly sharing their experiences of the service. Staff are skilled at communicating with children and ensuring that the child’s experience and voice is heard.

**Lines of enquiry**

Recruitment practices safeguard the child.

The service area recruits and has sufficient staff with the required skills, knowledge, qualifications, registration (if required) experience and competencies.

Staff have an up-to-date An Garda Síochána and or other police services vetting disclosure.

Accurate and contemporaneous secured personnel files are maintained for all staff.

Tusla, regional and local managers actively review retention initiatives.

The service area has appropriate contingency plans in place in the event of a shortfall in staffing levels.

Staff training and ongoing development based on training needs assessment is promoted and facilitated for all staff (including link workers), and joint training with foster carers.

There are arrangements in place to promote staff member’s wellbeing.

Collaboration with other agencies is encouraged, in particular for complex case planning.

### **Sources of evidence**

- Completed self-assessment and quality improvement plan
- Recruitment practices
- Staff personnel files
- Training and development records
- Data and information provided by the service area
- Information on wellbeing programmes
  
- Focus groups with:
  - Relevant advocacy agencies, such as EPIC, IFCA and GAL's
  - Social workers and child care leaders involved in providing services to children in foster care
  - Social work team leaders
  - Relevant community service providers.
  
- Conversations with a sample of
  - Parents
  - Children
  - Foster carers(selected from the files sampled)
  
- Interviews with:
  - Principal social workers
  - Area managers
  - Service director.

## Recruitment and retention of an appropriate range of foster carers

### Standards 21

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 people in their care.

### What a service meeting this standard looks like

An effective foster care service relies on the availability of an appropriate range of foster carers that can respond to the diverse needs of children in care. In addition, Tusla and local service areas also must ensure that through a cultural framework, structured child assessments and matching processes, that each child's current and future needs are taken into account when considering the most appropriate foster carers.

Information on fostering is readily available to interested parties. Enquiries about becoming a foster carer are acknowledged within one week and followed up in a timely manner. The service monitors the response times to these enquiries to ensure that potential applicants are identified. Targeted campaigns are carried out to recruit foster carers. The service has well documented and transparent recruitment and selection criteria to ensure potential new foster carers are sufficiently skilled to support children in care taking into account:

- The diverse and sometimes complex needs of children
- The need to prioritise placement in the child's local community
- The need to avoid moving children away from their family networks
- The cultural backgrounds of children requiring care
- Geographical needs of the service
- Changing demographic profile.

The service supports the retention of foster carers by:

- Providing full and open information on the child's circumstances and care needs prior to and during their placement
- Supporting foster carers to feel positive about their roles
- Including foster carers in decision-making around their foster child
- Keeping foster carers informed of important information
- Supporting foster carers to access additional support services for the child

- Supporting and facilitating continuous development for foster carers to enable them to confidently care for the child
- Providing specialised training and support as required especially in times of crises or challenge
- Promoting opportunities for peer support.

Existing foster carer panels are reviewed regularly to identify gaps in the service and recruitment campaigns are targeted to address these shortfalls. Recruitment strategies are varied to ensure they reach a wide range of audiences to attract and retain as large a number of foster carers as possible. It is recognised that the experiences of existing foster carers is important for the continued successful recruitment of new foster carers, so too is providing realistic information, targeting specific groups in the population and in locations where the need is highest. Therefore, these experiences and information are incorporated into recruitment and selection programmes. Services regularly evaluate their recruitment campaigns and retention strategies in order to assess their efficacy and effectiveness.

Exit interviews with foster carers who leave the service are routinely carried out and the information gained is used to inform the service's approach to the training, support, supervision, recruitment and retention of foster carers. Data is regularly reviewed and researched on recruitment and retention and the levels of support required to attract and retain foster carers.

### **What this means for the child**

Children can expect to be placed with foster carers who are sufficiently skilled in supporting their needs, including complex needs and cultural backgrounds. Children are provided with suitable foster carers within their local community, where this is consistent with meeting their assessed needs. The diverse current and future needs of the child are recognised. Children receive a structured assessment and matching process with their foster carer.

### **Lines of enquiry**

There is an effective recruitment and retention system in place to attract and retain an appropriate number and diverse range of foster carers.

<p>The service area ensures they recruit carers with the necessary skills and knowledge to care for children with complex needs, and various cultural backgrounds.</p>
<p>The service area has a structured assessment and matching process in place to inform the delivery of their service.</p>
<p>Where appropriate, relatives are considered as potential foster carers for each child in need of placement.</p>
<p>Recruitment strategies are informed by prioritising the placement of children in care in their local community.</p>
<p>The service area regularly reviews foster carers panels and actively recruits to address any shortfall.</p>
<p>The experiences of existing foster carers are included in the development of recruitment campaigns of new foster carers.</p>
<p>Enquiries are promptly acknowledged and followed up.</p>
<p>Information on fostering is readily available to interested parties</p>
<p>The service area supports the retention of foster carers, through a variety of retention strategies, developed based on feedback from foster carers and reviewed regularly.</p>
<p>Exit interviews are routinely carried out and the information used along with data and research to inform future recruitment, retention and training strategies.</p>
<p><b>Sources of evidence</b></p>
<ul style="list-style-type: none"> <li>▪ Completed self-assessment and quality improvement plan</li> <li>▪ Data and information provided by the area</li> <li>▪ Foster care recruitment plans and strategies</li> <li>▪ Foster carer retention initiatives</li> <li>▪ Initiatives for supporting new and existing foster carers</li> <li>▪ Foster carer wellbeing initiatives</li> </ul>

- Case files
- Exit interviews
- Focus groups with:
  - Relevant advocacy agencies, such as EPIC, IFCA and GAL's
  - Social workers and child care leaders involved in providing services to children in foster care
  - Social work team leaders
  - Relevant community service providers.
- Conversations with a sample of
  - Parents
  - Children
  - Foster carers(selected from the files sampled)
- Interviews with:
  - Principal social workers
  - Area managers
  - Service area directors.

## Special Foster Care

### Standard 22

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

### What a service meeting this standard looks like

At times, children in care require special foster care services that can care and respond to their complex needs. Special foster care requirements should be considered and incorporated into the service's current and future plans, including a plan for development or commissioning of this service, where required. Tailored recruitment processes focus specifically on attracting multiskilled specialist foster carers, who are capable of dealing with varied and complex needs of children in care. The service ensures that there is at least one full-time carer available in each special foster care placement.

Tusla and service areas have appropriate policies, procedures and guidance specific to provision of special foster care that guides the support of children with complex needs. These policies should include provision for:

- how best to support children with complex needs and respond to any risks to their safety
- appropriate placement of children within their local area
- review of the quality of the service and
- value for money.

Special foster care requires a multidisciplinary team approach. Each child has a plan in place that identifies any additional needs the child may have and measures put in place to meet these needs including the benefit of appropriate education or specific healthcare needs. Tusla and the service area should have systems in place to review the planning for and oversight of this multidisciplinary team approach to ensure optimal outcomes for the child in care.

Special foster carers are specifically trained, skilled, experienced and supported to care for and respond to children who may need this type of care and support. Tusla and service areas provide ongoing training, as required, to support these foster carers. Tusla and service areas provide regular and emergency respite breaks as agreed with the special foster carer.

<b>What this means for the child</b>
Children with complex needs are supported and have their needs, including educational needs, met. They can be confident that the people who care and support them have the necessary knowledge and experience. They are assured that a multidisciplinary team are working together to ensure they receive the best care within their local community.
<b>Lines of enquiry</b>
Special foster care requirements are incorporated into foster care development or commissioning arrangements at national, regional and local areas.
There is a tailored recruitment process for special foster carers.
Each special foster care household has at least one full- time carer available in each placement.
There are appropriate policies, procedures and guidance to guide staff and carers on how best to support children with complex needs.
There is a multidisciplinary team approach for children with complex needs that takes into account all aspects of their care needs and appropriate supports are in place both for the child and their foster carer.
Special foster carers are specifically trained, skilled and experienced to provide special foster care.
The service area plans and agrees regular and emergency respite breaks for special foster carers.
<b>Sources of evidence</b>
<ul style="list-style-type: none"> <li>▪ Completed self-assessment</li> <li>▪ Recruitment practices</li> <li>▪ Information and data set provided by the area</li> <li>▪ Case files for purposes of triangulation, when and if required</li> <li>▪ Development or business plan</li> <li>▪ Management meetings</li> <li>▪ Training records of foster carers</li> <li>▪ Focus groups with:</li> </ul>

Relevant advocacy agencies, such as EPIC, IFCA and GAL's

- Social workers and child care leaders involved in providing services to children in foster care
- Social work team leaders
- Relevant community service providers.

- Conversations with a sample of

- Parents
- Children
- Foster carers

(selected from the files sampled).

- Interviews with:

- Principal social workers
- Area managers
- Service area directors.

## The Foster Care Committee

### Standard 23

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 board policies, procedures and practices.

### What a service meeting this standard looks like

Foster care committees are in place with membership from people with expertise in child welfare. This should include people with training or experience of foster care and at least one current foster carer, including an adult with direct experience of care. The chairperson is independent from the operational team. Committees should have access to a range of expertise and advice such as medical, psychological and legal, as required, to clarify any aspect of an assessment, review of a foster carer, or placement of a child. Tusla policies on An Garda Síochána (police vetting) and other safeguarding measures, including induction and in-service training, are implemented for members of the foster care committee.

Each foster care committee must have a Terms of Reference with the overarching objective to promote the welfare of children in foster care.

The role of the foster care committee is to:

- consider the assessment reports for foster care applicants
- make timely and appropriate recommendations to the foster care service whether or not to put the applicant's name on their panel of foster carers
- receive notifications of the outcome of foster carer reviews
- recommend endorsement or review of their status
- approve long-term placements planned for a duration of at least six months, whereby the foster carers have been deemed through assessment to match the needs of the child
- provide quality assurance feedback to the fostering service on the quality of reports being presented to the committee.

The number, skills, knowledge and experience of persons on the foster care committee are sufficient to enable the fostering service to make competent recommendations to the fostering service provider, and to ensure that there is

always a sufficient quorum of six in place to convene a foster care committee meeting.

Prospective foster carers, or foster carers, are routinely invited to attend the meeting when their assessment or review is being considered.

In order for a foster care committee to be effective, it requires up-to-date information from the service area on matters, such as the management of the foster care service, relevant research, inspection findings and information on best practice initiatives.

The committee keeps a written record of recommendations and decisions made by them, which are also available to Tusla, regional and local service areas, as required. The relevant managers carefully consider recommendations by the committee. The foster care committee provides oversight by reviewing reports in respect of all allegations and serious concerns against foster carers, placement disruptions, and foster carer reviews. In a good service, the chair of the committee and the area manager have a system in place to ensure that relevant information, including feedback, is shared between the area and the committee in order to drive continuous improvement.

There are appropriate procedures, including an appeals process, in place to respond to recommendations, such as prospective foster carers not being approved. This appeals process is open and transparent. Information on how to make an appeal is readily available to all foster carers or applicants.

Service areas consult with foster care committees in the planning of their foster care services. The committee collectively contribute to the annual *Adequacy of the Child Care and Family Support Services* reports.

### **What this means for the child**

This committee has a core objective to act in children's best interests. Children in care are assured that allegations and serious concerns, placement disruptions, and placements over six months are considered and approved by a foster care committee with members who have expertise in child welfare and foster care.

### **Lines of enquiry**

There is a foster care committee with an agreed terms of reference and a core objective to act in the best interests of children.

The committee membership is made up of people with suitable qualifications and with expertise in child welfare and foster care.

Members of the committee are subject to Tusla's vetting, safeguarding and induction (and training) policies and procedures.

The foster care committee carries out its responsibilities in line with the requirements of the standards and have access to a range of expertise and advice in order to enable it to do so.

Service areas provide the committee with relevant up-to-date information.

Written records of the recommendations and decisions made by foster care committees are maintained and shared with relevant managers to inform decisions regarding the delivery of foster care services.

The foster care committee reviews and considers reports regarding allegations and serious concerns, placement disruptions, and foster carers reviews in a timely manner, and provides oversight of these.

There is a system in place to ensure that relevant information, including feedback, is shared between the area manager and the committee in order to drive continuous improvement.

There is an open and transparent appeals process in place.

The foster care committee contribute to the annual *Adequacy of the Child and Family Support Services* reports.

### Sources of evidence

- Foster care committee terms of reference
- Minutes from foster care committee meetings
- Recruitment and training records for foster care committee members
- Reports sent to committee
- Data set and information provided by the service area
- Waiting lists (if relevant).
  
- Focus groups with:
  - Relevant advocacy agencies, such as EPIC, IFCA and GAL's
  - Social workers and child care leaders involved in providing services to children in foster care
  - Social work team leaders
  - Relevant community service providers.
  
- Conversations with a sample of
  - Parents
  - Children
  - Foster carers(selected from the files sampled).
  
- Interviews with:
  - Principal social workers
  - Area managers
  - Service director
  - Chairperson of foster care committee.

## Placement of children through non-statutory agencies

### Standard 24

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

### What a service meeting this standard looks like

Non-statutory foster care agencies are commissioned where there is a shortfall in available or experienced carers. Tusla and service areas have policies and procedures in place regarding contracting any foster care service, or part of the service, to non-statutory agencies.

A service level agreement is in place, prior to the placement of any child with a non-statutory agency. This agreement clearly details the terms, conditions, compliance expectations and services being agreed to. The service level agreement should also include the monitoring arrangements in place for ensuring ongoing compliance by the non-statutory agency with the relevant national policies, regulations and standards.

Tusla and the service area only enters into a service level agreement with a non-statutory agency when it is satisfied that the agency:

- has an appropriate management structure
- has thorough financial procedures
- has appropriate policies and procedures
- employs a sufficient number of suitably qualified staff
- has suitable arrangements in place for the vetting of staff and foster carers
- applicants conform to legal requirements
- offers a service that complies with national policies, regulations and standards
- has access to foster carers who meet the foster care service's own approval
- can meet the needs of children who require a placement.

Non-statutory agencies may offer experience in specific areas such as:

- Provision for children with disabilities
- Placements for sibling groups enabling them to stay together

- Tailored placements for children with very challenging and complex needs presenting with high levels of risk
- Placements that prepare children for permanent foster care or adoption
- Placements focused on work with the birth family to support reunification
- Unaccompanied asylum seeking separated children.

To ensure proper governance and oversight of the provision of non-statutory foster care, the agencies commissioned by Tusla supply them with an updated list of their foster carers (as defined by service level agreement).

Children placed by non-statutory agencies in foster homes are visited by a Tusla child and family social worker. Visits occur as often as Tusla deems necessary, having regard to the child's care plan, but at a minimum of intervals not exceeding three months for the first two years of the child's placement. The first of these visits has to occur within one month of the child's placement. Children who are two years or more in their placement must be visited a minimum of every six months.

#### **What this means for the child**

Children placed in non-statutory foster care can be assured that Tusla is monitoring and ensuring that the care being delivered is safe and appropriate.

#### **Lines of enquiry**

There is a service level agreement in place for any non-statutory foster care service.

Tusla has policies and procedures in place for the contracting of non-statutory services.

Tusla is provided with an updated list of foster carers by the non-statutory agency.

Tusla and service areas have effective monitoring, oversight and review processes in place to ensure that non-statutory agencies adhere to the service legal agreements and relevant national policy, regulations and standards.

Children placed in non-statutory agency foster homes are visited by Tusla's child and family social workers.

### Sources of evidence

- Data sets and information provided by the service area
- Case files
- National service level agreements
- Waiting lists (if relevant) and management oversight of waiting lists for private placements.
  
- Focus groups with:
  - Relevant advocacy agencies, such as EPIC, IFCA and GAL's
  - Social workers and child care leaders involved in providing services to children in foster care
  - Social work team leaders
  - Relevant community service providers.
  
- Conversations with a sample of
  - Parents
  - Children
  - Foster carers(selected from the files sampled).
  
- Interviews with:
  - Principal social workers
  - Area managers
  - Service area directors.

## Representations and complaints

### Standard 25

Health boards 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.

### What a service meeting this standard looks like

Tusla and the service area welcomes and encourages feedback, including representations and complaints from children in foster care, their families, foster carers, staff and volunteers.

In order to facilitate this, Tusla and service areas have in place processes both formal and informal that are child-focused, by which children in care or other relevant parties can make representations, including complaints, about any aspect of their foster care experience. This process is clear, accessible and written in a way that the child can understand it. Children in care know who they can talk to or who to raise concerns or complaints with. Where required, children in care are supported in making representations or complaints.

Copies of the representations and complaints procedures are given to children (in an age appropriate format), their parents and foster carers. Complaints procedures take account of the particular needs of people with disabilities; access to translation, interpretation and communication services is provided for those who require these services.

Tusla and the service area is committed to responding to such representations or complaints in a child-centred, timely and forthright manner. The policy on representations and complaints sets out clearly the process from the time a concern or complaint is made and each step in the process until the matter is closed. The policy and processes prioritise the safety and wellbeing of children.

Tusla and the service area ensure that the representation and complaints process is fair, transparent and responsive to all parties involved. Anyone who raises a concern or complaint are informed of their right to avail of the services of an advocate or other independent service.

Staff know and understand their roles and responsibilities in relation to representations and complaints including:

- reporting
- data protection
- child welfare
- child protection disclosures.

Through ongoing training, staff are supported to understand the different ways children and young people may express concerns or distress and disclose harm. Staff appropriately support children in raising their concerns or complaints. Children’s representations and or complaints are screened by staff to ensure that the correct process is followed, and that any child protection concerns are identified and reported appropriately, as required.

Representations and complaints are recorded, including the outcome of any investigation. Tusla and the service area monitor and review information received to identify any trends, areas for learning and improvements. This includes adherence to processes, timeliness and record keeping. Outcomes of these reviews or audits are shared with staff and regional and national offices are informed.

### **What this means for the child**

Children in care are encouraged to give feedback about their experiences. They are informed about the complaints procedure and are provided with it in an age appropriate format. They know who to talk to if they are feeling unsafe and know what will happen. They receive timely feedback when they raise a concern or complaint.

Children with particular needs are provided with access to support if they need it, such as access to translation, interpretation and communication services.

Staff are accessible to children when they have a concern or complaint. Children can be assured that staff have a good knowledge of the different ways in which they express concerns or distress and disclose harm.

### **Lines of enquiry**

There are clear representations and complaints procedures in place that are accessible, responsive and written in a way that can be understood by children, young people, their families and other relevant persons.

Copies of the representation and complaints procedure are made available to children and young people in an age appropriate format.
Children, their families, and foster carers are made aware of their right to make representations or a complaint.
Children in care know who to talk to if they want to give feedback on their experiences or make a complaint.
The representation and complaints procedure is clear and outlines how complaints can be made, what support is available and the process once the complaint is made.
Tusla takes into account the particular needs of people with disabilities, or children who may require translation, interpretation and other communication services.
Independent advocacy services are available to support children in care and other relevant parties.
Staff are clear and understand their roles and responsibilities in the complaint procedures.
A written outcome of the complaint is provided to the person who made the complaint in a timely manner.
Written records are maintained of representations and complaints made, including the outcome of any investigations.
The service area monitors and reviews information received to identify any trends, areas for learning and improvements.
<b>Sources of evidence</b>
<ul style="list-style-type: none"> <li>▪ Data set and information provided by the service area</li> <li>▪ Case files for the purposes of triangulation, when and if required</li> <li>▪ Complaints procedures and policies</li> <li>▪ Complaints log</li> <li>▪ Complaints register</li> <li>▪ Audits</li> </ul>

- Focus groups with:
  - Relevant advocacy agencies, such as EPIC, IFCA and GAL's
  - Social workers and child care leaders involved in providing services to children in foster care
  - Social work team leaders
  - Relevant community service providers.
  
- Conversations with a sample of
  - Parents
  - Children
  - Foster carers(selected from the files sampled).
  
- Interviews with:
  - Principal social workers
  - Complaints manager
  - Area managers
  - Service director's.

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