

Action Plan

This Action Plan has been completed by the Provider and the Authority has not made any amendments to the returned Action Plan.

Provider's response to Inspection Report No:	738
Name of Agency:	Fresh Start Fostering Service
Date of inspection:	20,21 & 22 October 2015
Date of response:	19 January 2016

These requirements set out the actions that should be taken to meet the identified child care regulations and *National Standards for Foster Care* as they pertain to the purpose and function of the agency.

Theme 1: Child Centred Services

Standard 1

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Children were placed outside their own community.
- Children's access to information was not encouraged or facilitated.
- Children did not know how to make a complaint.

Action required:

Under **Standard 1** you are required to ensure that:

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

Please state the actions you have taken or are planning to take:

1. Fresh Start Fostering endeavours to place children/young people within their catchment areas and will constantly review this with the TUSLA Referring Agency.
2. A note will be placed on all children's files clarifying the decision to move them out of the catchment area should this occur in the future.
3. A Welcome Book has been developed for all children/young people in Foster Care.
4. Specific child-friendly procedure will be put into the Welcome Book to advise children/young people how to access information.
5. Welcome Book will be forwarded to all Foster Carers for the children/young person in their placement.
6. Link Social Worker/Fostering Support Coordinator to meet all children/young people currently in placement to go through the Welcome Book.
7. Within 2 weeks of a new admission, Link Social Worker/Fostering Support Coordinator will meet with child/young person and go through Welcome Book.
8. Complaints 'Pass It On' will be available to children/young person in placement.
9. Link Social Worker will meet with all children/young people in placement to advise them of how to make a complaint.

Proposed timescale:

1. When Referral/Placement Requests received
2. Completed by 31st December 2015
3. Completed by 31st December 2015
4. To be completed by 15th February 2016
5. To be completed by 31st January 2016
6. To be completed by 31st March 2016

Person responsible:

1. Director of Fostering
2. Director of Fostering
3. Administration
4. Director of Fostering
5. Director of Fostering
6. Link Social Worker

7. To be completed by 31 st January 2016	7. Link Social Worker/Fostering Support Coordinator
8. To be completed by 31 st January 2016	8. Director of Fostering
9. To be completed by 29 th February 2016	9. Link Social Worker

Standard 3

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Children were not being consulted and listened to in decisions about their care in accordance with their age, stage of development and individual needs.

Action required:

Under **Standard 3** you are required to ensure that:

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.

Please state the actions you have taken or are planning to take:

1. A Welcome Book promoting Childrens' access to information has been implemented.
2. Welcome Book will be forwarded to all Foster Carers for the children/young person in placement.
3. Fresh Start Fostering Service will request written correspondence from the Social Work Departments for the children/young people over 12 years of age in all matters that affect them, including Access Plans, Invitations to Care Reviews, decisions regarding Child in Care Reviews, How to Access Information, How to Make a Complaint and Care Plans.
4. Fresh Start will ensure that all children/young people have contact details for their Social Worker.
5. Training will be sourced for all Foster Care Personnel around communicating verbally to children under the age of 12 around decisions that affect their lives.
6. Training will be provided to all Foster Care Personnel around communicating verbally to children under the age of 12 around decisions that affect their lives.
7. All children/young peoples' files will be audited to ensure that Points 1 through 6 have been completed.

Proposed timescale:

1. Completed by 31st December 2015
2. To be completed by 31st January 2016
3. To be completed by 30th April 2016
4. To be completed by 29th February 2016
5. To be completed by 30th April 2016
6. To be completed by 31st May 2016
7. To be completed by 30th June 2016

Person responsible:

1. Director of Fostering/Administration
2. Director of Fostering
3. Director of Fostering/Link Social Worker
4. Link Social Worker
5. Director of Fostering
6. Director of Fostering
7. PA to Director of Operations

Standard 25

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The complaints policy did not name the complaints officer.
- There were significant delays in the management of complaints.

Action required:

Under **Standard 25** you are required to ensure that:

Health boards (sic) 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.

Please state the actions you have taken or are planning to take:

1. The Complaints Officer has been identified and named.
2. The Complaints Policy is being adhered to within the allocated timeframe with a timeline record of all steps taken.
3. Complaints, if any, will be reviewed and discussed at the Monthly Fostering Meeting with the Director of Operations of Fresh Start.
4. Director of Fostering will forward a report to the Director of Operations on a quarterly basis about the patterns of Complaints and expressions of dissatisfaction by children/young people in placement, parents and Foster Carers, to look at trends and service improvements in response to Complaints.

Proposed timescale:

1. Completed by 30th November 2015
2. Completed by 30th November 2015
3. To be completed by 31st January 2016

4. To be completed by 31st March 2016

Person responsible:

1. Director of Fostering
2. Director of Fostering/Link Social Worker
3. Director of Fostering/Link Social Worker/Fostering Support Coordinator/Director of Operations
4. Director of Fostering

Theme 2: Safe and Effective Services

Standard 8

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Freshstart's policy on matching was not being implemented
- The matching process was not properly recorded
- There was no evidence of joint working with the Child and Family Agency social workers to make arrangements for new placements and to draw up an agreed placement plan
- Foster carers were not given full information in writing about children prior to placement.

Action required:

Under **Standard 8** you are required to ensure that:

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

Please state the actions you have taken or are planning to take:

1. Matching Policy has been developed and is in operation.
2. Training will be provided to Fostering Personnel on Matching Policy.
3. Foster Care Matching Form has been implemented and a copy is filed in child/young Person's file.
4. All factors and the basis for decisions, including children and young peoples' needs and carers' capabilities will be recorded and placed on the Foster Carers' and Childrens' Files, when a Matching decision is made.
5. Placement Plan will be in place for each child/young person currently in placement and in line with the child/young person's Care Plan.
6. Proper recording to evidence any delays in drawing up Placement Plans will be identified and advised to TUSLA Social Worker for the child/young person in placement and to the Monitoring Officer in the TUSLA area where the Foster Carer lives.
7. All information provided by Referring Social Worker will be forwarded to Prospective Foster Carers and filed in Foster Carer's file under Referral Correspondence.
8. Placements will be reviewed monthly to ensure effectiveness of the Matching Policy.

Proposed timescale:

1. Completed by 31st December 2015
2. To be completed by 29th February 2016
3. Completed by 31st December 2015
4. To be completed by 31st January 2016
5. To be completed by 29th February 2016
6. To be completed by 29th February 2016
7. Completed by 31st December 2015
8. To be completed by 29th February 2016

Person responsible:

1. Director of Fostering
2. Director of Fostering
3. Director of Fostering/Administration
4. Director of Fostering
5. Link Social Worker
6. Link Social Worker
7. Director of Fostering
8. Director of Fostering/Link Social Worker

Standard 10

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The procedures following an allegation were not always implemented in line with Children First, National Guidance for the Protection and welfare of Children 2011.
- Freshstart did not follow its own safe care guidelines.

Action required:

Under **Standard 10** you are required to ensure that:

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

Please state the actions you have taken or are planning to take:

1. Respective Social Work Departments will be contacted by telephone by the Designated Person/delegate by the next working day, upon receipt of an allegation.
2. All Standard Reporting Forms (SRF) will be forwarded to the Director of Fostering (Designated Person) within 48 hours of notification.
3. All SRFs will be forwarded to TUSLA area with responsibility for the child/young person at the centre of allegation within 24 hours of receipt.
4. All allegations/concerns will be stored in a confidential section of child/young person's file.
5. Child Protection Training will be provided to all Foster Care Personnel.
6. Training in Fresh Start Safe Care Guidelines will be provided to all Foster Care Personnel.

Proposed timescale:

1. Completed by 31st December 2015.
2. Completed by 31st December 2015
3. Completed by 31st December 2015
4. To be completed by 31st January 2016
5. To be completed by 31st March 2016
6. To be completed by 31st March 2016

Person responsible:

1. Designated Person/Delegate
2. Foster Carers/Link Social Worker/Designated Person
3. Director of Fostering
4. Administration/Director of Fostering
5. Training Manager
6. Director of Fostering

Standard 14

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Records did not demonstrate that all adults with regular access to foster families had been vetted by An Garda Síochána.
- There were no minutes of the Freshstart foster care committee meetings.
- There were delays in assessing some foster care applicants.
- Foster care contracts were not consistently signed by both foster carers.

Action required:

Under **Standard 14(a)** you are required to ensure that:

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

Under **Standard 14(b)** you are required to ensure that:

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.

Please state the actions you have taken or are planning to take:

1. All adults who have regular access to the family home and who, on occasions, may be required to assist with the care of foster children will be Garda Vetted.
2. All Foster Care Committee meetings will be minuted and recorded on the Foster Carer's Applicants' Assessment file by Administration.
3. Fresh Start Fostering will comply with Standard 14 timeframe for completion of assessments.
4. Fresh Start Fostering will notify the appropriate TUSLA Foster Care Committee in writing of the reasons for the delay of completion of assessments, where necessary, and the approximate revised completion date.
5. All Foster Care contracts will be signed by both Foster Parents where applicable.

Proposed timescale:

1. To be completed by 29th February 2016
2. To be completed by 29th February 2016
3. To be completed by 31st January 2016
4. To be completed by 31st January 2016
5. To be completed by 31st January 2016

Person responsible:

1. Director of Fostering
2. Administration
3. Director of Fostering/Assessing Social Worker
4. Director of Fostering
5. Fostering Support Coordinator

Standard 15

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- First time foster carers did not receive sufficient support
- Formal supervision of foster carers was insufficient.
- There was no records of the work of the support worker or of the out of hours service.
- The foster carers support group was not effective.

Action required:

Under **Standard 15** you are required to ensure that:

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.

Please state the actions you have taken or are planning to take:

1. A Full-time Link Social Worker has been hired.
2. Link Social Worker will meet with Foster Carers a minimum of once per month.
3. Link Social Worker will provide 1 hour of Supervision every 4-6 weeks and record on Supervision Form.
4. All visits by Foster Care Personnel are being recorded on 'Visitor Log' and stored in Foster Carer's file under 'Out of Hours/Visits' section.
5. All Out of Hours contact, whether by phone or in person, are being recorded on the 'Out of Hours Contact Log' and stored on the Foster Carer's file under 'Out of Hours/Visits' section.
6. Foster Carers Support Meetings will be agendaed to be more structured and targeted towards needs of participants, who will be consulted prior to meeting.
7. Foster Carers Support Meetings will be recorded and a separate Fostering Administration File will be used to collate all records.
8. Files will be audited every 6 months to ensure that this information is on file.
9. A written Action Plan to address any deficiencies, if applicable, will be provided to Director of Fostering for action.

Proposed timescale:

1. Completed by 31st December 2015
2. To be completed by 29th February 2016
3. To be completed by 29th February 2016
4. Completed by 30th November 2015
5. Completed by 30th November 2015
6. To be completed by 31st January 2016

Person responsible:

1. Director of Operations
2. Link Social Worker
3. Link Social Worker
4. Link Social Worker/Director of Fostering/Fostering Support Coordinator/Administration
5. Link Social Worker/Director of Fostering/Fostering Support Coordinator/Administration
6. Director of Fostering/Link Social Worker/Fostering Support Coordinator

7. To be completed by 31 st January 2016	7. Director of Fostering/Administration
8. To be completed by 30 th June 2016	8. PA to Director of Operations
9. To be completed by 30 th June 2016	9. PA to Director of Operations

Standard 16

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- There was no ongoing training programme for foster carers
- Foster carers did not always receive training on key areas relevant to the specific needs of an individual child before the placement.
- The link worker did not maintain records of all training undertaken by foster carers

Action required:

Under **Standard 16** you are required to ensure that:

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

Please state the actions you have taken or are planning to take:

1. Foster Carer Training Programme will be devised for 2016, to identify specific key training needs for Foster Carers, in consultation with Foster Carers.
2. A calendar of Training will be circulated to all Foster Carers.
3. Central system for recording details of training has been implemented.
4. Individual Training Attendance Sheets and Training Certs will be completed and filed in Foster Carer's files.
5. Foster Carers will be funded by the agency to attend specific training courses in response to needs identified.
6. A Needs Analysis will be completed for all children/young people in placement to identify any specific training needs required.
7. Within 1 month of a new admission, a Training Needs Assessment will be completed for all children/young people admitted, with focus on specific training that needs to be provided, if applicable.
8. A Yearly Review will be completed on all Foster Carers in relation to training completed, attendance and a Training Needs Analysis for the following year.

Proposed timescale:

1. To be completed by 31st January 2016
2. To be completed by 29th February 2016
3. Completed by 30th November 2015
4. To be completed by 31st January 2016
5. To be completed by 30th June 2016
6. To be completed by 30th April 2016
7. To be completed by 29th February 2016
8. To be completed by 31st December 2016

Person responsible:

1. Director of Operations/Director of Fostering/Training Manager
2. Administration
3. Administration
4. Training Manager/Administration
5. Director of Operations/Finance
6. Link Social Worker
7. Link Social Worker
8. Training Manager

Standard 17**Requires improvement****The provider is failing to meet the National Standards in the following respect:**

- Foster carer reviews had not been conducted as required.
- Reviews of foster carers were not properly recorded.

Action required:

Under **Standard 17** you are required to ensure that:

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.

Please state the actions you have taken or are planning to take:

1. A Full-time Link Social Worker has been hired.
2. Outstanding Foster Carer Reviews being undertaken will be completed and forwarded to relevant TUSLA Foster Care Committees.
3. All reviews of Foster Carers will be recorded on Foster Care Review Template and filed on Foster Carer's file.
4. All reviews will be completed and recorded as outlined within the National Standards.

Proposed timescale:

1. Completed by 31st December 2015
2. To be completed by 29th February 2016
3. To be completed by 29th February 2016
4. To be completed by 31st December 2016

Person responsible:

1. Director of Operations
2. Link Social Worker
3. Link Social Worker
4. Link Social Worker

Theme 3: Health and Development

Standard 11

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- There was limited medical information on children's files

Action required:

Under **Standard 11** you are required to ensure that:

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.

Please state the actions you have taken or are planning to take:

1. Medical information will be requested prior to admission.
2. All children and young people will receive a Medical Examination within 21 days of admission, should it be required.
3. Fresh Start will seek written updates from all relevant Medical and Allied Health Services at each Child in Care Review.
4. If Medical Information requested has not been received after 21 days, a written request will be made requesting this information and every 21 days after and escalated to Senior Staff in TUSLA.

Proposed timescale:

1. Completed by 31st November 2015
2. To be completed by 29th February 2016
3. To be completed by 30th June 2016
4. Completed by 31st November 2015

Person responsible:

1. Director of Fostering/Administration
2. Link Social Worker
3. Director of Fostering/Link Social Worker
4. Director of Fostering

Theme 4: Leadership, Governance and Management

Standard 18

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Freshstart was not fully implementing its own foster care policies

Action required:

Under **Standard 18** you are required to ensure that:

Health boards (sic) 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.

Please state the actions you have taken or are planning to take:

1. A Full-time Link Social Worker has been hired.
2. All Foster Care Personnel will be required to read the Policies and Procedures document and to sign the document to say that they have completed same.
3. Audit of all files will be conducted to ensure that the documentation is in place to support compliance with the Fresh Start Fostering Policies and Procedures document.
4. All updates or changes to the Policies and Procedures Document will be forwarded to Foster Care Personnel for review.
5. Written confirmation will be provided by Foster Care Personnel to Director of Fostering that they have read and understand Policy changes, if any.

Proposed timescale:

1. Completed by 31st December 2015
2. To be completed by 29th February 2016
3. To be completed by 30th June 2016
4. To be completed by 30th April 2016
5. To be completed by 30th April 2016

Person responsible:

1. Director of Operations
2. Director of Fostering/Link Social Worker/Fostering Support Coordinator
3. PA to Director of Operations
4. Director of Fostering
5. Link Social Worker/Fostering Support Coordinator

Standard 19

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- Management systems were not sufficiently developed
- There were no monitoring and quality assurance systems in place
- Roles and responsibilities of staff were not clearly defined and understood by all relevant parties
- Information systems did not support a quality service
- Recording and filing systems were poor
- Risk management systems were not sufficiently developed.
- There were no quality assurance systems in place.

Action required:

Under **Standard 19** you are required to ensure that:

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

Please state the actions you have taken or are planning to take:

1. Director of Operations will meet with the Fostering Team once a month to improve Management Oversight of the service.
2. Monthly Meetings with Fostering Team will have a set Agenda and will be recorded.
3. Director of Fostering will provide a Quarterly Report to the Director of Operations on the progress of children/young peoples' placements and the Foster Carers' role in same, which will include information about allegations against Foster Carers and placement breakdowns, if applicable.
4. Director of Fostering meets the Business Manager every 2 weeks to ensure appropriate financial management/support is in place.
5. Audit of files will be conducted 3 times per year to ensure all required information is on file and signed and dated accordingly.
6. Job Specifications and reporting procedures will be developed for Director of Fostering Services, Fostering Support Coordinator and Link Social Worker, clearly defining specific roles and responsibilities and reporting procedures.
7. A Full-time Link Social Worker has been hired.
8. Director of Operations and Director of Fostering will meet Foster Carers twice a year to review service.
9. Supervision of Foster Carers will occur every 4-6 weeks.
10. Supervision of Foster Care Personnel will occur every 4-6 weeks.
11. A new recording and filing system has been implemented to facilitate Management Oversight and Governance responsibilities of the service.
12. All Foster Carers will be provided with a stamped addressed envelope to the Director of Operations, should they wish to raise an issue in confidence.
13. Risk Assessment Policy and Procedure will be developed.
14. Monitoring Officer for TUSLA will be provided with the Risk Assessment Policy for his advice regarding same.
15. Upon sign-off by the Monitoring Officer of TUSLA, the Risk Assessment Policy will be implemented.

16. Training will be provided for all Foster Care Personnel regarding Risk Assessment Policy.

Proposed timescale:

1. To be completed by 31st January 2016
2. To be completed by 31st January 2016
3. To be completed by 31st March 2016
4. Completed by 31st December 2015
5. To be completed by 30th April 2016
6. To be completed by 31st January 2016
7. Completed by 31st December 2015
8. To be completed by 30th June 2016
9. To be completed by 29th February 2016
10. To be completed by 31st January 2016
11. Completed by 30th November 2015
12. To be completed by 29th February 2016
13. To be completed by 31st March 2016
14. To be completed by 31st March 2016
15. To be completed by 15th April 2016
16. To be completed by 30th April 2016

Person responsible:

1. Director of Operations
2. Director of Operations
3. Director of Fostering
4. Director of Fostering/Business Manager
5. PA to Director of Operations
6. Director of Fostering/HR
7. Director of Operations
8. Director of Operations/Director of Fostering
9. Link Social Worker
10. Director of Fostering
11. PA to Director of Operations
12. PA to Director of Operations
13. Director of Fostering
14. Director of Fostering
15. Director of Fostering
16. Director of Fostering

Theme 5: Use of Resources

Standard 21

Requires improvement

The provider is failing to meet the National Standards in the following respect:

- The Freshstart fostering service was not sufficiently resourced

Action required:

Under **Standard 21** you are required to ensure that:

Health boards (sic) 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.

Please state the actions you have taken or are planning to take:

1. A Full-Time Link Social Worker has been hired.
2. Director of Fostering meets the Business Manager every 2 weeks to ensure appropriate financial management/support is in place.
3. Another Social Worker will be hired to support the Foster Care Service.
4. Payment requests and the reasoning for same are provided to the Business Manager, who seeks sign-off by Director of Operations and Financial Controller, at their weekly Financial Meeting every Thursday.

Proposed timescale:

1. Completed by 31st December 2015
2. Completed by 31st December 2015
3. To be completed by 31st July 2016
4. Completed by 31st December 2015

Person responsible:

1. Director of Operations
2. Director of Fostering/Business Manager
3. Director of Operations/Director of Fostering
4. Director of Fostering

Theme 6: Workforce	
Standard 20	
Requires improvement	
<p>The provider is failing to meet the National Standards in the following respect:</p> <ul style="list-style-type: none"> • Recruitment was not in line with legislation • There were insufficient staff to fulfill the link worker role • There was no job description for one member of the fostering team. • There was no staff training and development plan. • There were no systems in place to identify the developmental and training needs have all those involved in delivering the fostering service. <p>Action required:</p> <p>Under Standard 20 you are required to ensure that: Health boards (sic) ensure that the staff employed to work with children and young people, their families and foster carers are professionally qualified and suitably trained.</p> <p>Please state the actions you have taken or are planning to take:</p> <ol style="list-style-type: none"> 1. All current staff files have been audited and deficits have been addressed and outstanding paperwork has been requested in writing from relevant individuals. 2. All new recruits will be recruited in line with legislation. 3. A Full-Time Link Social Worker has been hired. 4. Job Specifications and reporting procedures will be developed for Director of Fostering Services, Fostering Support Coordinator and Link Social Worker, clearly defining specific roles and responsibilities and reporting procedures. 5. A Training Plan will be developed for all Foster Care Personnel. 6. A Continuing Professional Development (CPD) Plan will be completed for all Foster Care Personnel. 7. The Director of Operations will meet with the Director of Fostering to devise a CPD Plan for him. 	
<p>Proposed timescale:</p> <ol style="list-style-type: none"> 1. Completed by 31st December 2015 2. To be completed by 31st March 2016 3. Completed by 31st December 2015 4. To be completed by 31st January 2016 5. To be completed by 29th February 2016 6. To be completed by 31st May 2016 7. To be completed by 31st March 2016 	<p>Person responsible:</p> <ol style="list-style-type: none"> 1. Administration 2. HR 3. Director of Operations 4. Director of Fostering /HR 5. Director of Fostering/Training Manager 6. Director of Fostering 7. Director of Operations