

Action Plan

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

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| Provider's response to Inspection Report No: | 716 |
| Name of Service Area: | Cavan Monaghan |
| Date of inspection: | 30 June - 8 July 2015 |
| Date of response: | 04 September 2015 |

These requirements set out the actions that should be taken to meet the identified child care regulations and *National Standards for Foster Care*.

Theme 1: Child Centred Services

Standard 2

Requires improvement

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

- There was a low percentage of children in relative placements and a lack of family welfare conferencing to facilitate such placements.
- Sibling access where appropriate was not maintained for all children.

Action required:

Under **Standard 2** you are required to ensure that:

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

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

1. An information session in relation to Section 36 (relative placements) for all social work staff including the Duty and Intake teams is scheduled for 6th October 2015. This session will brief staff on the guidance around utilising Emergency and planned relative placements and the importance of encouraging staff to maintain and develop family relationships and friendships.
2. All children in care will have a written access plan, including a Plan to ensure sibling access is encouraged and facilitated.
3. The Plan will be monitored by the SWTL in Supervision.
4. A Report of File Audits will be completed by 1^{5th} Jan. 2015.
5. A workshop for foster carers in relation to promoting family and sibling access will be delivered to the foster care support groups by the access team/PSW before 30th Dec 2015.
6. The low level of usage of Family Welfare Conferencing Service is being addressed by contracting ISPCC to promote and to deliver the service in from October 2015 and during 2016.
7. PSWs will issue a reminder to all Cavan Monaghan Child & Family staff advising them that:
 - When a Social Worker believes that reception into care is warranted they must ascertain if there are family members/friends who would be able to offer safe care to the child/young person.
 - All admissions into care must be discussed with the Social Workers line manager who in turn will ensure that no family member/friend is available who could offer safe care.

Proposed timescale:
31st December 2015

Person responsible:
**PSW for Alternative
Care, SWTLs, SWs
and Access Team**

Standard 3

Requires improvement

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

- Children were not aware of how to access their personal information and service information available to them did not outline their right to access their personal information.
- Not all children were fully consulted about decisions affecting their lives as it was not routinely evidenced that they received a copy of their care plan and were invited to attend care plan reviews.

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. Tusla Services in Cavan Monaghan will continue to actively seek young people's views through local Children's Fora throughout 2016.
2. The invitation letter to the child and the names of all Care Plan recipients' are placed on the child's file.
3. All children over 12 years, will receive written correspondence directly in relation to 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 commencing on 30th September 2015.
4. A specific communication will be sent to all children in care outlining to them how they can access their personal information before 30th October.
5. The Social Worker will further strengthen the written communication with verbal communications including verbal communications to all children under 12 years using age appropriate Tactic communication tools.
6. All children in care will be met by the SW prior to Children in Care Reviews.
7. Foster carers will be informed of this change in existing practice in writing before 30th September 2015.
8. All social workers will provide their contact details to each child in care directly to the child commencing on 30th October 2015.
9. Children will be informed by their social worker how to access their information at statutory visits commencing on 30th September 2015. The communication about how to access information will be recorded on the Statutory Visit Record Sheet on the child's file.

Proposed timescale:
31st January 2016

Person responsible:
Sw's, SWTL, PSW.

Standard 4

Requires improvement

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

- Children were not always living with foster carers from their own cultural and ethnic background and not all carers were given specific training in the culture of the child placed with them.
- The needs of children with a disability were not consistently addressed through effective multi-disciplinary planning.

Action required:

Under **Standard 4** you are required to ensure that:

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

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

1. A DNE fostering recruitment and assessment team will be established by 30th September 2015. The responsibility of the Team will be to lead and deliver the assessment recruitment of foster carers in DNE.
2. Link Workers will arrange specific information / training for carers when required to assist the care of the child.
3. The shortage of carers from a range of cultural and ethnic backgrounds will be placed on the Cavan Monaghan risk register including actions being taken in Cavan Monaghan to address the shortage will be written by 30th November 2015.
4. Cavan Monaghan will record the Ethnicity' of children on the Children in Care data base. This information will be taken into account when planning the individual needs of the children.
5. The AM will establish bi-annual meetings with HSE Disability Services when the needs of children in care with a disability will discussed.

Proposed timescale:
31st January 2016

Person responsible:
Service Director,
Area Manager, PSW,
Workforce
Development Team
and the fostering
team.

Standard 25

Requires improvement

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

The complaints system was not sufficiently robust.

Action required:

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

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.

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

1. Tusla are currently developing a new policy Tell Us including information about the appeals process / Ombudsman and this will be discussed with all children in care when it becomes available.
2. Cavan Monaghan Quality and Risk Lead, will be informed of all complaints regarding children in care by the PSW, will maintain management oversight of all complaints and will identify service improvements based on the pattern of complaints.
3. A new Supervision Template for children in care is being devised by the SWTL's and PSW for children in care in September. This template includes a section on complaints by the children, foster carers and parents. This Template will enable SWTL oversight of all complaints relating to or made by children in care.
4. The SWTL will forward a monthly overview of complaints to the PSW for collation on a database for all complaints in Alternative care commencing 30th October 2015.
5. The collated information will then be forwarded to the local Quality and Risk Manager on a monthly basis.
6. The PSW will forward a report to the Area Manager on a quarterly basis about the patterns of complaints and expressions of dissatisfaction by children in care, parents and foster carers including an analysis of trends and services improvements made in response to the complaints.

Proposed timescale:

30th September 2015

Person responsible:

**SWTLs, SW's & PSW,
Q& R manager.**

Theme 2: Safe and Effective Services

Standard 5

Requires improvement

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

- Not all statutory visits to children in care occurred within the timeframes outlined in the regulations and not all visits were documented.
- There was not always evidence that during statutory visits the child was met privately by the social worker to ensure a child could talk freely if they had a concern.

Action required:

Under **Standard 5** you are required to ensure that:

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

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

1. All children in care in currently have an allocated social worker.
2. All statutory visits occur within the required timeframes and this will be evidenced on the monthly supervision record, signed by SWTL and on the child's file.
3. PSW to communicate in writing to the SWTLs before 30th September 2015 that any statutory visits not occurring within the statutory timeframes must be notified to the PSW by the SWTL.
4. All children are met privately by the SW during statutory visits. This is clearly recorded on the statutory visit record / contact sheet. This will be reviewed in supervision by the SWTL.
5. A letter will be issued to all foster carers and all Social Workers advising them the social worker must see the child privately during statutory visits before 30th September 2015

Proposed timescale:
30th September 2015

Person responsible:
SW, SWTL & PSW

Standard 6

Requires improvement

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

Many of the files reviewed were missing social reports pertaining to needs assessment and multidisciplinary input into the assessment was not evident.

Action required:

Under **Standard 6** you are required to ensure that:

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

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

1. An assessment of the child's needs is always undertaken prior to the child's admission into care or as soon as possible thereafter in the event of an emergency placement by the assigned Social Worker, under the supervision of the SWTL.
2. When residential care is required the assigned Social Worker under the supervision of the SWTL submits relevant documentation to the Regional Children's Resource Panel evidencing requirement for care and that the residential care requirement is valid.
3. The PSW has issued Care Plan guidance to all social workers including the assessment of need in relation to the detail required for Care Plans.
4. Multidisciplinary professionals involved with the child are invited to all care planning meetings where appropriate and / or invited to submit a written report by the Assigned Social Worker, under the supervision of the SWTL.
5. When a professional who knows the child does not attend or submit a report the assigned Social Worker contacts the professional in order to obtain their assessment of the child's needs.

Proposed timescale:

The above actions are already in place.

Person responsible:

Assigned Social Worker and SWTL

Standard 7

Requires improvement

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

- Care plans were not always developed within 14 days of an emergency placement and a review held within two months.
- Reports from professionals were not consistently obtained for the child in care reviews.
- Care plans were not always placed in the child's file and did not always refer to placement breakdowns or supports required to maintain the current placement.
- Timely and effective reviews were not always conducted for placements at risk of disruption or after a disruption.
- There were delays both in making referrals to specialist services and in the receipt of such services by children.

Action required:

Under **Standard 7** you are required to ensure that:

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

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

1. SW's will complete care plans as soon as practicable after admission to care for emergency placements. PSW will maintain oversight of this Action.
2. Multidisciplinary professionals involved with the child are invited to all care planning meetings where appropriate and / or invited to submit a written report.
3. When a professional who knows the child does not attend or submit a report the Social Worker contacts the professional in order to obtain their assessment of the child's needs.
4. Since October 2014, a SWTL has been assigned to chair all Child in Care Reviews for children in care to ensure Care Plans are developed in a timely manner. This assignment will continue.
5. Care plans are placed on both the child's and carer's files and include details of placement breakdowns and supports required. A Report outlining the File Audits undertaken will be completed by 30th December 2015 to assure that Care Plans are on the file and quarterly thereafter.
6. Care plan and placement plan guidance has been issued to all social work staff again on 31st August 2015 by the PSW.
7. The PSW will re-issue the Disruption Policy before 30th Sept to all staff informing them that timely and effective reviews / strategy meetings will take place as soon as practicable for placement at risk of disruption or after disruption.
8. PSW will write to Chair of child in care reviews and SWTLs to emphasise that professionals must consistently consider the need for specialist services and the SW will ensure that timely referrals are made when required before 30th September 2015.
9. Access to specialist services will be improved by purchase of specialist services through private services when required.

Proposed timescale:
31st August 2015

Person responsible:
Chair of CIC reviews,
SWTLs, SW's PSW.

Standard 8

Requires improvement

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

The matching process was not robust and was primarily based on the availability of placements rather than assessed needs.

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. A DNE fostering recruitment and assessment team will be established by 30th October 2015. The responsibility of the Team will be to lead and deliver the assessment recruitment of foster carers in DNE.
2. By the end of September 2015, three additional social workers will be assigned to the fostering team. This will assist in the assessment and recruitment of new carers for the area and thereby improve our capacity to match children with suitable families.
3. All factors and the basis for decisions – including children's needs and carers capacities – are recorded by the fostering social worker and placed on the carers and the child's file when a matching decision is made by the Social Work Service.
4. Pre placement meetings will take place for planned admissions, attended by the SW for the child / SWTL for the child, fostering social worker/PSW.

Proposed timescale:
30th September 2015

Person responsible:
Service Director,
Area Manager, PSW
and fostering social
workers

Standard 10

Requires improvement

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

- The system to manage serious concerns regarding foster carers was not sufficiently robust.
- There was no tracking of the level of take up by foster carers of training in line with Children First (2011).
- A number of foster carers had more than two children living with them who were not siblings.

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. All foster carers with more than two children placed with them will be notified to the FCC and Monitors.
2. The area is implementing the DRAFT National policy for the management of complaints and allegations in foster care, whilst awaiting final sign off on the policy from the National office.
3. An information session on this policy is being delivered to alternative care staff and child protection social workers at team meetings before 30th October 2015.
4. When the National Policy is finalised the PSW will write to DNE Training Services requesting Training on the policy for foster carers.
5. The area has collated lists of carers who attended Children First Training during 2014 and 2015.
6. Further Training for Foster Carers will be sought from the appropriate Tusla office by the PSW before 30th September 2015
7. This issue of providing of Children First Training for Foster Carers will be placed on the updated Cavan Monaghan Risk Register before 30th September 2015.

Proposed timescale:
31st October 2015

Person responsible:
Service Director,
Area Manager, PSW
and SW's.

Standard 13

Requires improvement

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

- Not all children at the age of 16 years were being referred to the aftercare service and had a leaving care plan in place.
- After care planning for children with a disability was not effective.

Action required:

Under **Standard 13** you are required to ensure that:

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

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

1. The SWTL chairing child in care reviews for children aged 15 and 16 will ensure that aftercare referral is discussed at each review and ensure that referral to the Aftercare service is recorded in the action plan. PSW will maintain oversight of this Action.
2. The Aftercare Coordinator to notify the PSW of any 16 year olds not referred to aftercare on a by-monthly basis.
3. Disability Services to be invited to all aftercare steering committee meetings, and all child in care reviews for young people who have a disability from age 16 plus to ensure that Disability services are involved in aftercare planning at an early stage.
4. Area Manager to establish biannual meetings with relevant managers of disability services to discuss the aftercare and disability needs of young people in care by 15th October 2015

Proposed timescale:
31st October 2015

Person responsible:
**Sw's, SWTL, PSW
and Aftercare
Coordinator, Area
Manager.**

Standard 14

Requires improvement

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

- Assessments of foster care applicants and relatives was not conducted in a timely manner in order to meet children's needs.
- Some children had been placed with foster carers prior to approval.
- The approval process was not sufficiently robust.

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. The FCC has developed an action plan which includes specific actions to improve the effectiveness and functioning of the FCC in line with the Foster Care Committees: Policies, Procedures and Best Practice Guidance 2012. This plan includes that there clarification of approval issues issued to Social Workers before 30th October 2015.
2. All relative placements receive a preliminary assessment prior to the placement of a child. The preliminary assessment includes reference checks, checks with the local Gardai, checks with the Social Work Service locally and a home visit by Fostering Social Worker and / or child/young person's Social Worker to view the home and discuss care requirements with relative/s.
3. Following the above steps a summary report will be sent to the PSW who makes a decision as per Section 36 that it would be in the child/young person's interests to be placed with carer under emergency approval.
4. The placement will be tracked by the PSW to ensure the full assessment is completed and presented to Foster Care Committee.
5. The capacity of the Fostering Service to deliver a comprehensive assessment service will be enhanced when three new Social Workers take up their posts in September 2015. Each new Social Worker will be assigned a fostering assessment each, along with their Link supervision, review and other fostering duties.
6. The local Risk Register, which includes measures to mitigate risk and the how the risk will be managed and monitored, will be updated regarding the numbers of families waiting assessment. The steps to mitigate the risk includes the allocation of additional Social Worker resources to the fostering team.
7. A DNE fostering recruitment and assessment team will be established by 30th September 2015. The responsibility of the Team includes to lead and deliver the

assessment recruitment of foster carers in DNE.

8. AM will write staff informing them that unapproved general placements are not allowed before 30th September 2015.

Proposed timescale:
30th September 2015

Person responsible:
Service Director,
Area Manager, PSW,
Fostering team

Standard 15

Significant risk identified

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

The majority of foster carer households were not supervised by a professionally qualified social worker.

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. Three additional professionally qualified social workers will be assigned to the fostering team by 30th September 2015. This will increase the number of foster carers with a qualified Link Social Worker to 46 from 18.
2. The shortage of Link Social Workers in Cavan Monaghan will be addressed in the 2016 Tusla Service Plan.
3. The PSW will include the issue of insufficient Link Social Workers on the updated Risk Register before 30th September 2015 including steps being taken in Cavan Monaghan to reduce the risk to children and the role of social care workers in the provision of link support.
4. The Risk Assessment Tool for Unallocated Foster Carers will be applied to all carers who do not have a qualified link worker and cases allocated to social workers according to priority by 31st December 2015.
5. In the event Foster Carers do not have an allocated link worker, the child's social worker provides support to the carer pending assignment of additional staff to the area.

Proposed timescale:
31st December 2015

Person responsible:
Service Director,
area manager, PSW,
Fostering team.

Standard 16

Requires improvement

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

- Individual foster carer training records were not evaluated or an appraisal of training needs completed
- There was no evidence of a training strategy in place for 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. DNE Foster Carers Training needs will be identified before the end of Q 1 2016. This analysis will form the basis of a Strategy to delivery training in DNE during 2016.
2. A Training Needs Evaluation Form will be distributed to all foster carers in the area by 30th September 2015.
3. PSW will continue to organise local training events for foster during 2015 and will continue during 2016.
4. PSW will meet DNE Workforce learning and Development Manager to develop and write a strategy for Cavan Monaghan before 30th October 2015.
5. Deficits in the training strategy for foster carers in Cavan Monaghan will be included on the risk register by the end of September 2015.

Proposed timescale:
30th September 2015

Person responsible:
Service Director,
Area Manager, PSW
and fostering team.

Standard 16

Requires improvement

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

There were no regular reviews of foster carers to ensure their continuing capacity to provide high quality care.

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. Service Director has provided approval for the area to contract a private fostering agency to commence 10 reviews of foster carers during the remainder of 2015. The PSW, with the fostering team has prioritised the 10 reviews for allocation and these are expected to commence by 30th October 2015.
2. A DNE Regional Fostering Team is being established by the Service Director. The DNE Fostering Team will devise a timeframe to complete all Reviews of Foster Carers in Cavan Monaghan before 30th October 2015.
3. The local Risk Register, which includes measures to mitigate, manage and monitor risk, will be updated by the PSW regarding the numbers of carers requiring review by 30th October 2015.

Proposed timescale:
30th October 2015

Person responsible:
Service Director and PSW

Standard 22

Requires improvement

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

There was no special foster care service for children with challenging behaviour.

Action required:

Under **Standard 22** you are required to ensure that:

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

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

1. The lack of a specialist foster care service for children with challenging behaviour will be included on the Risk Register by 30th September 2015 by PSW
2. When a child with challenging behaviours requires special foster care the assigned Social Worker under the supervision of the SWTL currently submits all relevant reports to the DNE Children's Resource Panel who advise on and can access appropriate private services available as required by the child.

Proposed timescale:
30th Sept 2015

Person responsible:
PSW

Theme 3: Health and Development

Standard 11

Requires improvement

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

- There were not sufficiently comprehensive medical records maintained.

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 examinations are currently completed for all children upon admission to care, this is monitored by the SWTLs and placed on the file when the child is admitted into care. Confirmation that medicals have undertaken are available for inspection on File 1 of the series of the child's files.
2. Social Workers currently seek written updates from all relevant medical and allied health services for each child in care review.
3. Any outstanding medical issues or actions required are clearly recorded in the Care Plan by the assigned Social Worker under the supervision of the SWTL.
4. Where appropriate, medical and allied health professionals involved with the child are invited to attend / submit reports the Child in Care Review and any other care planning meetings by the Social Worker under the supervision of the SWTL.

Proposed timescale:

The actions are being currently implemented.

Person responsible:

Assigned SW and
SWTL

Theme 4: Leadership, Governance and Management

Standard 19

Requires improvement

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

- The lack of sufficient team leader resources compromised the delivery of a safe and effective service
- The regularity of fostering team meetings was not sufficient.
- The fostering service was not sufficiently planned and there were inadequate systems to gather and analyse information.
- The service had a number of significant risks with implications for the delivery of a safe and effective service.
- A robust quality assurance system was not in place and there was inadequate managerial oversight of the service.
- There were insufficient staff to deliver a safe and effective service resulting in reassignment of staff members and inconsistency in staff teams.

Action required:

Under **Standard 19** you are required to ensure that:
Health boards 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. The shortage of Link Social Workers in Cavan Monaghan will be addressed in the 2016 Tusla Service Plan.
2. Service Director's Office will complete an analysis of foster care deficits in DNE before February 2016.
3. The recruitment of a SWTL for fostering is currently being processed and is expected to be filled by December 2015. This post will enhance management oversight and planning capacity for fostering services.
4. The current absence of a SWTL for Fostering will be included on the updated Risk Register by 30th September 2015.
5. Monthly fostering team meetings are scheduled for the remainder of 2015 when service planning issues are addressed.
6. The fostering team will continue to receive direct supervision from the PSW as per the National Supervision Policy.
7. AM will develop a Reporting Template for PSW to inform AM to improve management oversight of the service by 30th September 2015 which will include information and analysis about allegations against carers and placement breakdowns,
8. PSW will complete a Report of the Audits undertaken during 2015 including the service learning required before 30th December 2015.
9. The local Risk Register will be updated by 30th September to include all significant risks with implications for the delivery of a safe and effective service including controls to

mitigate the risks.

10. The PSW will access all available information regarding Fostering and Children in Care to inform 2015 Annual Report and 2016 Service Planning process by 30th December 2015.

Proposed timescale:
31st December 2015

Person responsible:
Service Director,
Area manager, PSW.

Standard 23

Requires improvement

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

The Foster Care Committee did not function completely in compliance with regulations and standards and in line with the Child and Family Agency *Foster Care Committees: Policies, Procedures and Best Practice Guidance 2012*.

Action required:

Under **Standard 23** you are required to ensure that:

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

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

1. The FCC has developed an action plan which includes specific actions and timeframes to improve the effectiveness and functioning of the FCC in line with the Foster Care Committees: Policies, Procedures and Best Practice Guidance 2012 for implementation by chair of FCC and AM.

Proposed timescale:
There are a series of timescales extending into Q 1 2016.

Person responsible:
AM and Chair of FCC

Theme 5: Use of Resources

Standard 21

Requires improvement

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

Specific strategies for the recruitment and retention of foster carers were not in place and there was an insufficient range of carers to meet demand.

Action required:

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

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.

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

1. A DNE fostering recruitment and assessment team will be established by 30th September 2015. The responsibility of the Team will be to lead and deliver the assessment recruitment of foster carers in DNE.
2. The increase in Link Worker will enhance will enhance support and retention on which to devise a plan. The Training and Support Needs Analysis being undertaken locally will be used to inform retention strategies for foster-carers before 30th November 2015.
3. The shortage of foster carers will be placed on the updated Risk Register by 30th September 2015.

Proposed timescale:
30th September 2015

Person responsible:
Service Director,
Area Manager, PSW.