

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:	717
Name of Service Area:	Galway/Roscommon
Date of inspection:	16-25 June 2015
Date of response:	31 August 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 1

Requires improvement

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

Action required:

Not all children's identity or ethnicity was recorded.

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:

- **All children in care files will be audited to ensure the ethnicity of the child is clearly recorded in the Personal Details section of the file. Q4 2015**
- **All children's cultural identity will be considered at point of entry to care. Q3 2015**
- **Ethnicity will be recorded for all children/young people on the Fostering Register.Q2 2016**

Proposed timescale:
Q2 2016

Person responsible:
PSW CIC

Standard 2

Requires improvement

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

- Access was not facilitated in foster carer's homes for the majority of children
- The rationale for supervised access and the frequency/duration of the access for a number of children was not reflected in their records

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:

- **The provider will review access arrangements and try to ensure access takes place in the foster home where possible (unless there are clear reasons why this cannot occur). Q2 2016**
- **If there are reasons why this is not possible these will be recorded on the child's file. Q2 2016**
- **Placement plans will specify access arrangements including frequency, duration, location, transport arrangements, supervision and support. Q3 2016**
- **The rationale regarding the access plan, including supervision arrangements where relevant, will be documented on the child's file and reviewed at subsequent care plans. Q3 2016**

Proposed timescale:
Q3 2016

Person responsible:
PSW CIC

Standard 3

Requires improvement

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

Records did not adequately reflect that all children were informed of and facilitated to exercise their rights.

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:

- **Each child coming into care will be provided with an age appropriate TUSLA "Coming into Foster Care Information Pack". The Social Worker receiving the children into care will explain the UN Convention (on the rights of the child) and 'Speak Up Speak Out' Complaints Procedure. Commenced Q3 2015**
- **This will be recorded on the child/young person's file. Commenced Q3 2015**
- **Children will continue to be encouraged/facilitated to attend reviews. Commenced Q3 2015**
- **The review forms to elicit their views and hear their voice will continue to be an integral part of their review. Complete for all by Q3 2016**
- **Where appropriate case files will document structured and supported re-unification plans and where not pursued, reasons recorded by Q1 2016**

Proposed timescale:
Q3 2016

Person responsible:
PSW CIC

Standard 25

Requires improvement

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

- There were separate complaints management systems in operation which meant there was insufficient oversight of all complaints.
- Not all complaints were captured by the systems in place.

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:

- **All complaints will be notified to the Area Manager via the Principal Social Workers. Commenced Q3 2015**
- **A complaints log for each county will be established and held by the Area Manager. In place Q3 2015**
- **The log will record all complaints by children, young people ,their families, foster carers and others with a bona fide interest in children's welfare. In place Q3 2015**
- **The Area Manager will have oversight of all complaints. All complaints will be reviewed and monitored on a quarterly basis to ensure effectiveness and to assist management in evaluating the quality of service provided. Q1 2016**
- **An audit will be conducted to ensure all existing complaints have been identified and logged by the Principal Social Worker Q1 2016**

Proposed timescale:
Q1 2016

Person responsible:
Area Manager
PSWs

Theme 2: Safe and Effective Services

Standard 5

Requires improvement

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

Action required:

- Not all children had an allocated social worker.
- Not all children were visited in line with the frequency outlined in Regulations.

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:

- **All children are currently allocated. Q3 2015. Children in care will be prioritised for allocation. This is subject to staff vacancies and replacements but Children in Care are considered priority one in relation to allocation. Q3 2015**
- **All children will be visited in line with the statutory visiting requirements and this will be recorded on the child/young person's file). Files will be audited by Team Leader at 6 monthly intervals to ensure compliance. Q1 2016**
- **Dates of visits will continue to be recorded in the Child in Care Feedback form for the care Plan Review and placed on file. Completed Q3 2015**

Proposed timescale:
Q1 2016

Person responsible:
Area Manager
PSW CIC

Standard 6

Requires improvement

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

A number of assessment formats were in use and these were not always clearly identified as assessments of need in some children's records.

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:

- **Area Manager will discuss the requirement of an assessment of needs format at national level. In the meantime we will continue to use assessments that already exist i.e. Initial Assessments, CPC reports etc. Q4 2015**
- **Assessments will be clearly identified as Assessment of Need. Commenced Q3 2015**

Proposed timescale:
Q1 2016

Person responsible:
Area Manager
PSW CIC

Standard 7

Requires improvement

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

- Some care plans were of a poor quality and did not adequately reflect children's needs or the actions in place to address these.
- Some care plan reviews were not carried out in line with Regulations.
- Placement plans were not in place for all 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:

- **Care Plans will be completed in keeping with the Standard Business Process, Foster Care Regulations 1995 and Standards in Foster Care 2003 and will comprehensively reflect the needs of the Child, actions, timeframes and persons responsible. Q4 2015**
- **All existing care plans will be reviewed to ensure they are in line with the Standards. Deficits will be addressed. Q3 2016**
- **A separate placement plan will be completed for each child in care. Q1 2016**

Proposed timescale:
Q3 2016

Person responsible:
PSW CIC

Standard 8

Requires improvement

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

- Matching for some children was not based on a carer's ability to meet their needs, but on the placements available to the service.
- The numbers placed in several foster care placements exceeded those outlined in standards.

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:

- **The child's needs are paramount and placements in as much as possible are matched so that Foster Carers ability can meet these needs. The matching process will be recorded in the minutes of the matching committee and on the child's file. Q4 2015**
- **Where possible the numbers of children in a placement will not exceed standards. However there will be exceptional circumstances and in these incidences the rationale for the decision for the placement will be evidenced on the child's file. Q2 2016**

Proposed timescale:
Q2 2016

Person responsible:
PSW CIC

Standard 9

Requires improvement

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

- The risks to safety associated with the environments of some foster care placements had not been adequately assessed or considered
- A health and safety assessment of the home and environment was not evident in all foster carer's records.

Action required:

Under **Standard 9** you are required to ensure that:

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

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

- **An audit of Health and Safety Assessments for all Foster Carer households will be conducted and where deficits exist a Health and Safety check will be carried out. Commenced and Q3 2016 to complete**
- **The outcome of such assessments will be placed on file. Q3 2016**
- **Farm safety has been identified as an issue and a meeting took place between Teagasc National Health & Safety Officer and the Senior Management Team Tusla in Q3 2015. Teagasc will carry out training with existing Foster Carers who are farmers. Q4 2015**
- **All future Foster Carers, who are farmers, will be required to submit a mandatory health and safety environs risk assessment. Q4 2015**
- **All animals in a Foster Carers household will also be considered in the Health and Safety Audit Q1 2016**

Proposed timescale:
Q3 2016

Person responsible:
Area Manager
PSW, SWTL

Standard 10

Requires improvement

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

The record of allegations did not reflect all allegations, which meant that oversight of these may be not fully informed.

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:

Same as Standard 25

- **All allegations will be notified to the Area Manager via the Principal Social Workers. Commenced Q3 2015**
- **6 Monthly audits will be conducted of child's file to ensure all complaints are recorded and logged with Principal Social Worker. Q2 2016**
- **An allegations log for each area (Galway and Roscommon) will be established and held by the Area Manager. Q4 2015**
- **The log will record all allegations by children, young people, their families, foster carers and others with a bona fide interest in children's welfare. Q4 2015**
- **The Area Manager will have oversight of all allegations. All allegations will be reviewed and monitored on a quarterly basis to ensure effectiveness and to assist management in evaluating the quality of service provided. Q1 2016**

Proposed timescale:
Q2 2016

Person responsible:
Area Manager and
PSW

Standard 14

Requires improvement

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

The approval type of foster carers was not specified, resulting in some carers providing short and long term placements to children at the same time.

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:

- **The approval type of foster care will be specified in the minutes of the FCC and in the letter of approval to foster carers. Q4 2015**
- **Where not specified on existing foster carer files the fostering social worker will retrospectively record approval type. Q2 2016**

Proposed timescale:
Q2 2016

Person responsible:
FCC Chairperson
PSW, SWTL

Standard 15

Requires improvement

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

- The supervision and support provided to some carers was not adequate at times
- Visits to some carers by link workers were not in line with regulations
- There was no peer support group in place for foster carers

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:

- **All Foster Carers have an allocated Social Worker who visit on a regular basis and record each visit on the foster carer's file. Q3 2015**
- **All foster carers will be encouraged to join IFCA which is extending a support/ mentoring service. Q1 2016**
- **The Agency has met with and scheduled a further meeting with the National board of IFCA to review matters of mutual interest including support to Foster Carers. Q1 2016**
- **Support issues will be discussed at Care Plans and Review of Foster Carers. Q2 2017**
- **New Carers will be paired with an experienced Foster Carer. A new initiative to develop a Foster Carer Mentoring Support Programme will be established in Galway & Roscommon. Q1 2016**

Proposed timescale:
Q2 2017

Person responsible:
Area Manager
PSW

Standard 16

Requires improvement

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

Action required:

- Foster carer's participation in training was not at an optimum.
- There was no essential training identified for foster carers outside of Foundation training (such as first aid and Children's First)

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:

- **The Area will set up a group with Foster Carers, IFCA and the Fostering Team to discuss what should be mandatory, desirable and optional training. The discussions will prioritise First Aid and Children First training. Q1 2016**
- **The Areas are making Children First mandatory for all foster carers. Q1 2016**
- **Discussions are on-going with the Training Department about integrating Children First into the Foundations for Foster Care Training. Q3 2016**

Proposed timescale:
Q3 2016

Person responsible:
Area Manager
PSW, SWTL

Standard 17

Requires improvement

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

- Not all foster carers had been reviewed
- Not all reviews adequately reflected significant events, training offered or concerns regarding placements

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:

- **All Foster Carers Reviews will be carried out as per National Standards. Q3 2016**
- **The summary of Foster Carers Reviews will record significant events, training and concerns regarding placements in all cases. Q3 2016**

Proposed timescale:
Q3 2016

Person responsible:
PSW

Standard 22

Requires improvement

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

There was no special care foster service in operation in the area.

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:

- **A Regional Special Foster Care Project has been established which is chaired by the Area Manager and reports to Regional Director. Commenced Q4 2015**
- **A Business Plan for a Special Foster Care Project will be submitted to the Regional Director by December 2015. Q4 2015**
- **Anticipated implementation Q3 2016**

Proposed timescale:
Q3 2016

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:

- Medical reports were not in place for all children following their admission into care.
- Records of childhood immunisations were not in place for all children.

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:

- **Medical assessment and reports will be on the agenda at the child's first care plan meeting. Commenced and Q3 2016 to completion**
- **All children will receive a medical within 48hrs of being received into care. A group has been formed to liaise with GP unit. Q4 2015**
- **PSW will link with the Director of Public Health Nursing regarding immunisation records and ensure that this record is on the child's file. Q1 2016**

Proposed timescale:
Q3 2016

Person responsible:
PSW CIC

Theme 4: Leadership, Governance and Management

Standard 18

Requires improvement

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

- Not all aspects of the national procedure for Foster Care Committees were implemented.
- The inter area transfer policy was not fully implemented by all CFA areas, which led to waiting list of cases of children that had moved area.

Action required:

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

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.

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

- **A Review of compliance of the FCC Standards and Guidelines has taken place. Deficits have been identified and rectified. Completed Q3 2015**
 - **All cases awaiting transfer are alerted to the Regional Director on a monthly basis. This issue is discussed by the National Office on a regular basis. Tusla inter-area transfer policy is currently being revised and will be finalised in Q4 2015 and will be fully implemented in all areas.**

Proposed timescale:
Q1 2016

Person responsible:
Area Manager
PSW CIC
Regional Director

Standard 19

Requires improvement

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

- There was no formal monitoring in place for the foster care service.
- The resolution of some identified risks was not timely.
- There was insufficient evidence of the audit and monitoring of records by managers.

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:

- **The Area Manager has progressed this issue with the Regional Director of Service. The Quality Assurance directorate within Tusla is committed to strengthening formal monitoring of fostering services nationally. Currently there are no specific plans for Galway / Roscommon as developments are resource dependent but this area is a priority in service development under the Tusla QA Inspection and Monitoring umbrella. Q3 2016**
- **The Risk Register for the Area will be integrated and updated at Senior Management Meetings. Health and Safety risk assessments for Foster Carers will be added to the Register. Q1 2016**
- **The SWD will consult with the Regional Quality and Risk Manager with a view to analysis of risks and notifications in the area to inform planning and practice. Q1 2016**
- **Audits will be conducted every 6 months by Principal Social Workers to ensure compliance. Q2 2016**
- **The PSW Fostering and PSW CIC are devising an audit tool. The SWD has an Alternative Care Quality Assurance Group which meets on a bi-monthly basis to monitor and address quality issues within the service. Q2 2016**

Proposed timescale:
Q3 2016

Person responsible:
Area Manager
PSW

Standard 23

Requires improvement

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

The FCC's were not notified of all significant events such as all allegations against carers and placement disruptions.

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:

- **A Review of compliance of the FCC Standards and Guidelines has taken place, in addition to current practice of notifying FCC of outcome of allegations. Completed Q3 2015**
- **FCC will be notified of new allegations against foster carers, significant events and placement disruptions. This has commenced Q3 2015.**
- **We will review this practice and ensure all foster carers are informed of significant events Q2 2016**

Proposed timescale:
Q2 2016

Person responsible:
PSW

Theme 5: Use of Resources

Standard 21

Requires improvement

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

There were insufficient foster carers available to meet the needs of all children.

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:

- **Targeted recruitment towards the needs of the service - an additional 20 placements by Q2 2016.**
- **Specialised Fostering Project – A proposal will be finalised by November 2016 to Regional Office. If this is accepted 10 placements will be available by Q3 2016**
- **Culturally Competent Placements - A recruitment drive within the African Community will commence in Q1 2016 with a target of 4 placements by Q4 2016.**
- **Shared Rearing Project for an identified ethnic group – 4 placements- Q3 2015**

Proposed timescale:
Q4 2016

Person responsible:
PSW

Standard 20

Requires improvement

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

Action required:

- Personnel records were fragmented and stored at different locations which meant there was no complete oversight of employee's records.
- Social work vacancies in the service impacted on service delivery.
- Administrative staff vacancies impacted on service delivery.
- The frequency of supervision was not always in line with the national policy
- Not all supervision records demonstrated adequate accountability.

Under **Standard 20** you are required to ensure that:

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.

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

- **Area Manager will bring to attention of the Regional Director. Q4 2016**
- **Due to ongoing delays within the current recruitment process a pilot scheme has been approved by Tusla Senior Management Team for the management of Recruitment and Selection within Tusla. In that regard a specialist partner CPL has been sourced and will be trialled in the coming months. Q2 2016**
- **All vacancies are processed through the Regional & National Office, delays are discussed with Regional and National HR. Since the formation of TUSLA on 1st January 2014, all personnel administration is being managed centrally by NPR Shared Services, Merchants Quay, Dublin. For new appointments after this date, Personnel files containing key employment data are retained electronically by Shared Services, and arrangements are being put in place to provide remote electronic access to files, with appropriate authorisation for designated staff. In addition, a project is being rolled out by TUSLA to identify, audit, collate and scan Personnel records for existing staff, so that ultimately the sole repository for employment related personnel files will be within Shared Services. Q2 2016.**
- **Vacancies in administrative grades have been brought to the National Director and 4 additional posts have been approved. 1 person is in place and another 2 staff are being processed. Q1 2016**
- **Regional PSW's & SWTL will conduct an audit of the National Supervision Policy and will report to Senior Management Group and Q&A Group - all deficits will be identified and addressed. This will be monitored by the local Q& A group. Q2 2016**
- **All files will be in line with the National Policy and will be addressed reflect clear accountability. Q2 2016**

Proposed timescale: Q2 2016	Person responsible: Area Manager PSW SWTL
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