



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Health Information and Quality Authority Regulation Directorate monitoring inspection of Non-Statutory Foster Care Services

Name of service provider:	Orchard Fostering
Type of inspection:	Focused
Date of inspection:	17 – 20 November 2025
Lead inspector:	Lorraine O Reilly
Support inspector(s):	Bernadette Neville Sabine Buschmann Sharon Moore Grace Lynam Adekunle Oladejo
Fieldwork ID:	MON-0048370

Safeguarding

This inspection is focused on the safeguarding of children and young people placed in foster care through non-statutory foster care services.

Safeguarding is one of the most important responsibilities of a provider. It has a dual function, to protect children from harm and promote their welfare. Safeguarding is more than just the prevention of abuse, exploitation and neglect. It is about being proactive, recognising safeguarding concerns, reporting these when required to the Child and Family Agency (Tusla) and other relevant authorities and also having measures in place to protect children from harm and exploitation.

Safeguarding is about promoting children's human rights, empowering them to exercise appropriate choice and control over their lives, and giving them the tools to protect themselves from harm and or exploitation and to keep themselves safe in their relationships and in their environment.

About this inspection

The Health Information and Quality Authority (HIQA) monitors services used by some of the most vulnerable children in the State. Monitoring provides assurance to the public that children are receiving a service that meets the national standards. This process also seeks to ensure that the wellbeing, welfare and safety of children is promoted and protected. Monitoring also has an important role in driving continuous improvement so that children have access to better and safer services.

HIQA is authorised by the Minister for Children, Disability and Equality under Section 69 of the Child Care Act, 1991 as amended by Section 26 of the Child Care (Amendment) Act 2011 to inspect foster care services provided by the Child and Family Agency (Tusla)¹, including non-statutory providers of foster care, and to report on its findings to the Minister.

HIQA monitors the performance of the Child and Family Agency against the *National Standards for Foster Care* (2003) and advises the Minister and the Child and Family Agency.

¹ Tusla was established on 1 January 2014 under the *Child and Family Agency Act 2013*.

This inspection was a monitoring inspection of Orchard Fostering to monitor compliance with the National Standards for Foster Care, with a focus on the safeguarding of children in foster care.

The scope of the inspection included standards 09, 10, 11, 14, 17 and 19 of the *National Standards for Foster Care* (2003).

How we inspect

As part of this inspection, inspectors met with the relevant professionals involved with Orchard Fostering and with foster carers. Inspectors observed practices and reviewed documentation such as foster carers' files and relevant documentation relating to the areas covered by the specific standards against which the service provider was inspected.

The key activities of this inspection involved:

- the analysis of data submitted by the service provider
- interviews with:
 - the managing director of the company
 - the quality assurance coordinator and training manager
 - one principal social worker for fostering support (also designated liaison person/ relevant person under Children First Act 2015)
 - one principal social worker for fostering assessments (deputy designated liaison person)
 - social work team leader for assessments
- focus groups with:
 - four social work team leaders for fostering support
 - six link workers
 - five foster carers
- observations of:
 - quality and safety board sub-committee meeting
- the review of:
 - policies and procedures, minutes of various meetings, audits and service plans
 - a sample of 25 foster carer files
 - a sample of 10 supervision files
- conversations or visits with:
 - three children and seven foster carers

- five members of children's external social work teams

Acknowledgements

HIQA wishes to thank children and foster carers that spoke with inspectors during the course of this inspection in addition to staff and managers of the service for their cooperation.

Profile of the Foster Care service

The Service Provider

The information in this section of the report was provided by the service for inclusion in the report.

Orchard Fostering was established in 2008 by a group of experienced social work professionals and has become Ireland's leading independent fostering agency. Orchard Fostering collaborate with Tusla, the Child and Family Agency to provide children and young people with positive care experiences.

Orchard Fostering pride themselves on providing comprehensive support to foster carers, which includes 24/7 support, continuous training, support groups and social events. They are committed to recruiting, training and retaining foster carers throughout Ireland to meet the diverse needs of children requiring safe and nurturing homes.

In 2024, Orchard Fostering grew to a staff of 38. Orchard Fostering supports carers to provide foster and supported lodgings placements to children in care throughout Ireland. These children and young people are aged between 0-18, come from a range of cultural backgrounds and have a variety of different support needs.

Data provided by Orchard Fostering prior to inspection showed that the service had 119 foster care households and, at the time of inspection, they provided foster care placements for 154 children. These foster care households were located in various geographical areas throughout Ireland.

Placements with Orchard Fostering are commissioned by Tusla service area teams. Tusla retain their statutory responsibilities to children placed with this service and approve the foster carers through their foster care committees. The foster care agency is required to adhere to relevant standards and regulations when providing a service on behalf of Tusla. Both services are accountable for the care and wellbeing of children.

Private foster care services are monitored by Tusla, the Child and Family Agency. Orchard Fostering was last audited by the Tusla Alternative Care Inspection and Monitoring Service (ACIMS) in June 2025. Orchard Fostering was found to be committed to the provision and facilitation of training for foster carers and compliant with standard 16 of the *National Standards for Foster Care 2003*.

Compliance classifications

HIQA will judge the service to be **compliant, substantially compliant or not-compliant** with the standards. These are defined as follows:

<p>Compliant: A judgment of compliant means the service is meeting or exceeding the standard and is delivering a high-quality service which is responsive to the needs of children.</p>
<p>Substantially compliant: A judgment of substantially compliant means the service is mostly compliant with the standard but some additional action is required to be fully compliant. However, the service is one that protects children.</p>
<p>Not compliant: A judgment of not compliant means the service has not complied with a standard and that considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of children using the service will be risk-rated red (high risk) and the inspector will identify the date by which the provider must comply. Where the non-compliance does not pose a significant risk to the safety, health and welfare of children using the service, it is risk-rated orange (moderate risk) and the provider must take action within a reasonable time frame to come into compliance.</p>

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

National Standards for Foster Care		Judgment
Standard 9	A safe and positive environment	Compliant
Standard 10	Safeguarding and child protection	Compliant
Standard 14	(a) Assessment and approval of non-relative foster carers	Compliant
Standard 17	Reviews of foster carers	Compliant
Standard 19	Management and monitoring of foster care services	Compliant

This inspection was carried out during the following times:

Date	Times of inspection	Inspector name	Role
17 November 2025	09:00hrs-17:00hrs	Lorraine O Reilly	Lead Inspector
		Sharon Moore	Support Inspector
		Sabine Buschmann	Support Inspector
	10:00hrs-17:00hrs	Bernadette Neville	Support Inspector
18 November 2025	09:00hrs-17:00hrs	Lorraine O Reilly	Lead Inspector
		Bernadette Neville	Support Inspector
		Sabine Buschmann	Support Inspector
	09:00hrs-1300 hrs	Sharon Moore	Support Inspector
12:00hrs-17:00 hrs	Grace Lynam	Support Inspector	
19 November 2025	09:00hrs-17:00hrs	Lorraine O Reilly	Lead Inspector
		Grace Lynam	Support Inspector
		Sabine Buschmann	Support Inspector
		Bernadette Neville	Support Inspector
	16:30hrs-17:30hrs	Adekunle Oladejo	Support Inspector (remote)
20 November 2025	09:00hrs-15:00hrs	Lorraine O Reilly	Lead Inspector
		Sabine Buschmann	Support Inspector (remote)
		Bernadette Neville	Support Inspector (remote)

Children's experience of the service

Children's experiences were established through meeting with and visiting three children in foster care and 12 foster carers. Inspectors also spoke with 15 staff working within the service and with five members of children's external social work teams. A review of 25 foster carer's casefiles, 10 supervision records, and other documents provided evidence about the experience of children residing in foster care with Orchard Fostering.

The inspection found that children and foster carers felt safe, heard and listened to. At the time of the inspection, there were 154 children in care residing in 106 foster care households with the service. Inspectors met or spoke with children and foster carers from 11 households. Inspectors reviewed the records from 25 foster care households. Feedback provided to inspectors was overwhelmingly positive. Foster carers spoke about good working relationships, respect, transparency, feeling valued and safe. These factors contributed greatly to a high-quality service being provided to children and their foster carers. One child summarised the feedback when they said, "I don't think there is anything they can do better".

The service supported the children placed with foster carers in a child-centred way. There were many examples of this from the information gathered and reviewed by inspectors. These included:

- siblings continued to reside together when possible and children spoke about their gratitude for this happening
- a strong emphasis was placed on maintaining relationships with family members and significant others when in the child's best interests
- some foster carers had previously cared for older siblings of those children in their care and had good relationships with extended family members
- children were provided with good quality care within households which prioritised their needs and kept them safe
- foster carers were proactive in meeting the complex health needs of children. Actions taken included foster carers purchasing sensory aids for children, communicating well with children's parents and attending specific training in areas such as sensory processing and visual impairment
- children accessed specialist services in a timely way and recommendations followed up on a daily basis would impact on the child's longer term well-being. For example, while one child was encouraged to wear their prescription glasses every day, others had safety plans with external services to support their well-being

- children and foster carers were provided with enhanced supports based on children's presentations and behaviours that challenge rather than requiring a formal diagnosis
- safety was a priority. The service completed unannounced visits with all foster carers as an additional safeguarding measure.

The service listened to children in their foster care households. They sought the views of children in foster care and those who were birth children of foster carers. A young person's ambassador group was still in place since the last inspection. The aim was to bring children and young people together to express their thoughts, views and opinions on decisions and services that affected them. The name of the group was 'A Young Orchard Voice' and the aim of the group was to support and advocate for children in foster care households. Some members met with HIQA inspectors and spoke about work they had undertaken.

The group had undertaken a number of important projects including the creation of themed booklets for young people. The aim of one booklet was to increase professionals and foster carer's awareness around culture. Children offered their views, tips and perspectives about how foster carer's can support and embrace children's culture. Another booklet involved children writing about why they wanted to join the group and what they liked about Orchard Fostering. The booklet was for children coming into foster care and there was a page in the booklet for other children to write their own views. Children in care and birth children of foster carers made another booklet. This contained short stories from all children about their experiences of foster care, both for children in foster care and birth children of foster carers. Children wrote words of advice for children based on their own experiences. They described creating the booklets as a "really good and enjoyable experience" and said "we learnt a lot". The group presented their booklets to staff at a service event in 2025. Children felt heard. Children really liked the group because "your opinion matters".

Children spoke about other things they liked about Orchard Fostering such as having their own "worker" who took them out to spend time with them and going on various outings. They would like to see more different events for older children. They said events provided them with the opportunity to meet with other children and young people. They told inspectors that when they made suggestions, the service "will try their best to make it happen".

The service shared important information and updates with children, young people and foster carers throughout the year. A colourful, bright newsletter containing photographs, drawings as well as text, was sent to all foster care households. This had information about events and highlighted achievements of children and young people in sports, education and outings. For example, young people attended a 'teen takeover' day with lots of interactive games and described it as having the "best day ever".

The newsletter contained details about the Young Orchard Voice, the foster carers ambassador board and information about new staff joining the service. This showed that the service was committed to sharing information with children, young people and foster carers in an accessible format which would assist and support them.

Children were aware about safety and safeguarding being important aspects when being caring for. Foster carers and various professionals talked to them about keeping safe. This was also reflected in documents reviewed by inspectors and through conversations with foster carers.

Foster carers safeguarded children and advocated for those placed in their care. They were aware of children's views, likes, dislikes and they knew the children in their care very well. They strived to provide the best possible care to children and spoke highly about the support provided by the service. Some foster carers told inspectors, "I feel valued", "I can and have accessed psychotherapy" and "they just support you as long as you need it". Foster carers could access Orchard Fostering support 24 hours a day, seven days per week. One foster carer said that the 24/7 support meant that someone was "always available" to them. Foster carers also said;

- "all you have to do is ask and they will provide you with what you need"
- "always explain to foster carers what they are doing".

When asked about foster carer reviews, one said "I can see the necessity, they keep the children safe". Foster carers told inspectors that although they were invited, some chose not to attend meetings with the foster care committee (FCC). When asked about the discussions during visits, foster carers were clear about the expectations of the service and their responsibilities. Some of the feedback to inspectors was that visits "keeps me on track and reminds me what has been happening". When asked about any improvements the service could make, they told inspectors "absolutely not". Another foster carer described fostering as a "privilege" which they felt supported to do.

Feedback from social workers was very positive. They said children were doing well with their foster carers. Social workers told inspectors that they were “delighted to have the foster carers and Orchard Fostering involved”. They described staff as “very insightful” and that they ensured foster carers were clear about their role in children’s lives and in keeping them safe.

One social worker told inspectors that the service was “a brilliant organisation and they are doing a fantastic job supporting foster carers and providing an excellent service”. They told inspectors that the service maintained exceptional communication with them and were proactive in engaging supports for family. They described the service as being “very responsive” and “on top of things”. They described the service as being good at communicating, planning and sharing information when required. This led to timely action which supported foster carers and kept children safe.

Summary of inspection findings

As previously noted in this report, placements with Orchard Fostering are commissioned by Tusla service area teams. Tusla retain their statutory responsibilities to children placed with this service and approve the foster carers through their foster care committees. The foster care agency is required to adhere to relevant standards and regulations when providing a service on behalf of Tusla. Both services are accountable for the care, wellbeing and safeguarding of children.

Children in foster care require a high-quality service which is safe and well supported by Tusla social workers. Foster carers must be able to provide children with warm and nurturing relationships in order for them to achieve positive outcomes. The service provider must be well governed in order to produce these outcomes consistently.

This report reflects the findings of the monitoring inspection, which looked five of the national standards. These standards focussed on a safe and positive environment, safeguarding and child protection, assessment and approval of foster carers, reviews of foster carers and the management and monitoring of the foster care service.

This section of the report focuses on how the provider ensures that effective systems are in place to support foster carers in providing child-centred and high-quality care to children and young people. It includes how the provider ensures that foster care applicants are assessed in a timely and comprehensive manner and ensures that foster carers care for children in line with their approval status. It

also includes information about how the service completes regular reviews of foster carers in line with the standards and regulations.

There was a strong focus on safeguarding of children in foster care and this was evident when assessing those standards and areas of practice for compliance. Through assessing the capacity and effectiveness of the management and monitoring of the foster care service, safeguarding was a feature discussed at every level of the service from frontline staff to discussions at internal senior management meetings. The responsibility and prioritisation of safeguarding was a feature throughout the service. This was reflected in a review of records, documents, feedback from staff, foster carers, children and external professionals.

In this inspection, HIQA found that, all of the five national standards assessed were compliant.

The service provided a timely and individualised response to the needs of children and foster carers with effective oversight in place which led to the delivery of a high-quality foster care service. The management team and staff were striving exceed the requirements of the national standards. This was evident throughout the inspection by engaging with children, foster carers, staff and management. This approach to practice was strengthened by comprehensive governance to ensure overall compliance with the national standards.

The service had competent and qualified managers who showed leadership and were accountable for providing a safe and effective service to children in foster care. Accountability was featured throughout the service and with oversight being provided by a Board of Directors and the Chief Executive Officer (CEO). This culture of shared responsibility for a safe service was built through promoting safeguarding and child-centred practice and having effective risk-management systems in place at every level.

Children, foster carers and staff were consulted about their experience of the service. The management team and staff strived for excellence by learning from feedback and making improvements for those availing of the service. Children, foster carers and staff were consulted and informed about processes required by standards and regulations. This provided the service with a greater understanding of what foster carers required to keep children safe.

Children in foster care households were provided with safe and nurturing environments. The supports for each household were carefully considered in terms of what children need, and what supports the foster carers need. Consideration at all times was given to valuing and appreciating where children came from and what they bring to the household. Various cultures were spoken about and celebrated, individual needs of children were met and contact with families and other significant people in children's lives was facilitated by the service. In each

household the levels of support was tailored to meet their individual needs. For example, transition to secondary school support was available, as was tutoring for those who required it. Others engaged in psychotherapy, mental health support and direct work with social care staff. There was a policy in place in terms of the number of support and supervision visits to households. Those visits focussed on centred around the individual needs within households and assisted with an individual service being provided to keep children safe.

There was a clear system of managing child protection and safeguarding concerns and ensuring safeguarding policies were followed. Child protection and welfare concerns were responded to and reported in a timely and appropriate manner as required by staff and foster carers. Both staff and foster carers received the necessary training to enable them to respond appropriately to any child protection concerns and they were aware of their responsibilities when speaking with inspectors. There were some areas for improvement to further enhance practice such as more timely review of safety plans following incidents and ensuring foster carers complete incident forms when required. These were a reflection on the documentation on files rather than on the timely interventions and responses which children and foster carers received. These did not impact on the safety of children within placement and no cases were escalated due to immediate risk issues as a result of this inspection.

Foster carer assessments were comprehensive, timely and focussed on the skills and requirements of foster carers to provide safe households for children in foster care. The assessment process was detailed and informative from the initial stages in providing prospective foster carers with information through to being informed about the outcomes of assessments. Assessments of foster carers met the requirements of the standards and demonstrated the service's high standard in assessing their foster carers and subsequently supporting them when their evolving training and support needs.

The reviews of foster carers were timely, of good quality and held in line with requirements of the regulations and national standards. There was good oversight of the process and additional reviews were scheduled when they were required. All relevant parties had the opportunity to contribute their views and take part in the reviews which were timely and child-centred. Reviews were found to be comprehensive, timely and focussed on keeping children safe and foster carers supported with placements. There was an emphasis on foster carers having training available to them, depending on the needs of the children in their care. This meant that foster carers were supported to develop their knowledge and skills to keep children safe within their care.

During this inspection, the areas of good practice which demonstrated the service's continued commitment to a quality service and the safeguarding of children included;

- The management and leadership of the service was proactive in the identification of risk and management of risk through the services risk register. All risk were reviewed, monitored and mitigated against to ensure the service was safe and effective.
- The monitoring and auditing systems in place; ensured a high level of compliance with national standards, regulation and legislation.
- Support provided to foster carers and children in their care was to a high standard and tailored to the needs of the household. This contributed to the safety of the children and ensured the placement met their individual needs. Foster care households were provided with the right supports at the right time specific to their needs.
- Appreciation days and retention visits to acknowledge foster carers and obtain their feedback. This showed a drive to learn from experienced foster carers in terms of how best to support foster carers and to share this learning with others in the service. For example, the delivery of training changed from having a standard roll-out and it was made more dynamic to suit the individual needs of each foster care households.
- The establishment of boards for foster carers and children to hear their voice, support and advocate for children in foster care and this included hearing the voice of foster carers own children. This demonstrated a commitment to a quality service through having service-users represent the service at various events, be available to other foster carers and children and having their voices heard.
- The level of communication with external professionals as well as within the service was to a high standard and feedback was positive.
- The quality of supervision provided was in line with the service's own policy. Orchard Fostering believed the quality of supervision provided had a direct bearing on the quality of the service provided.
- The quality of foster care assessments were to a high standard and timely.

There were some areas for improvement which had been identified by the service prior to and during this inspection. There were effective measures in place to mitigate against any risks and these areas did not pose any identified safety need to children at the time of the inspection.

At the time of the inspection the service was in the process of integrating two new information systems, one which was in the early stages of implementation. While the information system in which records were kept required improvement to provide more readily accessed and retrievable information, this area for improvement did not have an adverse impact on the children residing in foster care

at the time of the inspection. The service had a clear plan in place for the embedding of such information systems and case management systems in 2026.

From what inspectors were told, what they observed and what they reviewed, the service provided to children was safe and of good quality. Through a review of records, the impact of any decisions made on children was documented. When inspectors sought clarity on information that was not easily retrieved on their information system, the team were familiar with the families and accessed the required information for inspectors. One of the findings on this inspection was that in instances when children missing from care occur or when allegations are made against foster carers, records reflecting the most up-to-date information should be readily available on case files.

Standard 9: A safe and positive environment

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

The foster care service ensured that children had their needs met and were cared for in safe environments. Any issues arising within placements were addressed to promote children's safety and were done so in a timely manner. Link workers had regular contact and carried out regular visits to foster carer households. The documents relating to children's daily living environments were completed as required and were of good quality.

The inspection found that the service had a focus on the safety of children throughout all of the information gathered and reviewed by inspectors. For example, casefiles documented discussions between staff and foster carers about children's sense of safety within the foster carer's home particularly in light of any vulnerabilities children may have had. Foster carers encouraged children's progress by providing them with a safe and positive environment. The impact of fostering on all members of the household was also acknowledged. The support provided by the service to foster carers and their families enabled them to meet the needs of children in a safe and nurturing way. This was provided through regular contact, visits, safety checks, discussions with all household members who were also invited to outings and events. These opportunities provided foster carers with avenues to talk with staff about what they and those residing within their household needed to meet the individual needs of children placed in their care and to discuss issues within the placement as required. From the information provided to inspectors, foster carers were supported to discuss issues as they emerged and this subsequently supported foster care placements and the safeguarding of children.

The inspection found that the service aimed to ensure children were provided with a safe and nurturing environment. The service ensured all foster carer's had the required skills and completed relevant training to meet children's needs. For example, all foster carers completed training in paediatric first aid, internet safety and sensory processing. All foster carers completed a smoking declaration during the assessment process which highlighted the importance in providing children with a healthy home environment. This meant that foster carers agreed to no smoking within the household and were aware of the risks in relation to passive smoking. Feedback from foster carers indicated that they felt very well supported and they received additional training when required. They felt supported by their link workers to ensure they provided safe care for children.

Observations and commentary about the home environment relevant to children's needs were recorded on foster carer files. These were mostly from support and supervision visits undertaken with foster carers. These visits occurred on a monthly basis and noted the safety and suitability for children within the household. Where actions were needed to be taken, this information was recorded and plans were put in place.

The service completed health and safety checks on every foster care household on a yearly basis and more often when required. All of the foster carer files reviewed had current health and safety checks completed. For example, relevant up-to-date checks were completed to ensure children were transported safely with foster carers. All foster care files reviewed found that vehicles were safe and the legal requirements were met such as taxation, roadworthiness and insurance.

Questionnaires about pets were completed. There was a strong focus on ensuring children's safety around dogs. Advice was sought from specialists about understanding dog behaviours with children. Foster carers also signed declarations to abide by restricted dog breed regulations.

Children's privacy within the foster care household was respected. This was clearly recorded in safe care plans. These plans covered topics such as affection in the home, clothing, communication, privacy, free time, bedtime, transport, self-care, photographs and videos. There was emphasis on permissions required to take videos and photos which was an example of respecting children's privacy and keeping them safe. Foster carers and link workers signed the safe care plans which were shared with the children's social workers. This showed a collaborative approach in providing safe care to all children placed in this service.

Children residing in foster care households were involved in a range of social activities to develop their social skills and friendship groups. Supports were put in place to help children integrate into their communities which was of particular

importance when children and young people felt isolated and looked for opportunities to interact with others from the same cultural background.

Children's cultural and ethnic identity was promoted and supported. Cultural needs of children were noted in placement plans and safe care plans such as culturally appropriate expressions of affection. Children were supported to pray, listen to music from their own culture and practice their religious beliefs with their families. Children were provided with space, privacy and support to do this with translators available when required. The cultural booklet produced by children was provided to foster carers. Foster carers were interested in learning about cultures and some had previously attended an information session about the experiences of migrants.

Children's relationships with their family were supported. Family contact was reviewed and updated at support visits, and the update on family contact was included in progress reports on the child to the child's social worker. There were examples of family contact occurring on an arranged basis as well as informally between family members and foster carers. The service also provided training to foster carers about managing access and birth family relationships.

From the records reviewed including those of foster care households and management meetings, all children of school-going age were enrolled in education. In the month prior to the inspection, it was reported that 14 young people had accessed additional educational advice and 14 families had worked directly with the education coordinator of the service. Furthermore, the service also noted there were 20 children in pre-school and a further 15 children were not yet of school-going age.

Children had their rights and welfare promoted and safeguarding was promoted while residing with their foster carers and issues within placements were addressed within a timely manner. Children maintained contact with family members and other people of significance to them, when appropriate. They were encouraged and supported to become members of groups and activities which were of interest to them. Their unique needs were met and foster carers felt supported to provide children with a safe, positive and nurturing environment. Several visits and health and safety checks were undertaken to promote a safe and positive environments for children in foster care households. For these reasons, the service was judged as compliant with this standard.

Judgment: Compliant

Standard 10: Safeguarding and child protection

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

Orchard Fostering had clear and robust systems in place to promote the safety and welfare of children in all aspects of service provision. There were safeguarding measures in place and processes to ensure safeguarding policies were followed. Child protection and welfare concerns were responded to and reported in a timely and appropriate manner. This involved working collaboratively with Tusla and foster carers. Both staff and foster carers received the necessary training to enable them to respond appropriately to any child protection concerns as per *Children First: National Guidance for the Protection and Welfare of Children* (2017). From feedback provided to inspectors, all were aware of their role as mandated persons under the Children First Act (2015). However, further improvement was required to ensure that information about cases of abuse was reported by the provider to An Garda Síochána, when required. This obligation is outlined in Children First (2017) and is in addition to any obligations under the Children First Act 2015. This was discussed with management during the inspection and will be addressed by the service in future planning.

There was evidence of retrospective concerns made to staff being appropriately reported to Tusla by the service. Foster carers were provided with information on the service's responsibility to pass on information to statutory authorities relating to child protection and welfare concerns. There was also evidence of foster carers making mandated reports when required and they spoke about this responsibility when engaging with inspectors. At times, they made mandated reports with the support of their link workers and these were documented on the relevant tracking systems.

All foster carers had their own allocated link social worker. Their role was primarily to support and assist foster carers within their caring role. Link workers visited foster carers regularly and also had phone contact with them. The responsibility to keep children safe within placements can often require additional support. Should something arise and the link worker not be available, there was an out of hours and duty call service available to foster carers to access support and advice should a challenging situation arise. As part of the link worker role, their job was to offer training and support to foster carers particularly around safe care for children. Link workers also provided information about bullying, managing behaviours that challenge and what needed to happen should a child make an allegation of abuse. Safeguarding training such as understanding and supporting children who were experiencing behaviours that challenge, mental health, stress and anxiety was facilitated by the service and these sessions were available to foster carers to undertake at a time most convenient for them.

Of particular relevance to this standard was supporting foster carers in understanding the vulnerability of children in care and to report incidents of abuse in a timely manner as mandated persons. When reports were made, they were overseen by management to ensure children were kept safe and there was adherence to policies and procedures.

The Orchard Fostering had safeguarding policies and guidance in place to support implementation of Children First (2017) and for the management of concerns that did not meet the threshold of mandatory reporting to Tusla. These included risk management policy, safe caring policy and procedure, complaints policy and procedure, protected disclosure whistleblowing policy, complaints and feedback policy, child safeguarding statement, child protection and welfare concern policy and procedure for managing concerning information. These policies and procedures adhered to national policies, regulations and guidelines.

The risk of abuse to children in placements was identified on the service provider's fostering risk register. There were controls in place to mitigate against this risk. Controls included the carer assessment policy which included background checks on families, children first training being mandatory for all foster carers, unannounced home visits to all foster family homes, support visits to all families, training provided to foster carers regarding allegation processes. When required, there were safety plans implemented in households. The oversight of these mechanisms to mitigate against the risk of abuse and provide additional safety measures when required was evident through a review of the service's governance register, tracking systems and supervision.

There had been 11 child protection and welfare concerns pertaining to children in foster care in the 12 months prior to the inspection. Ten were ongoing and one had been closed at the time of the inspection. Inspectors sampled six of the allegations or concerns in relation to foster carers.

Of those six, five were managed in a comprehensive and satisfactory manner in line with policy, national standards and regulations. There were delays in the updating of records the sixth file reviewed in line with the service's own policy and procedure and a plan was in place to address this during the inspection. This was due to several complex issues arising at the same time and did not increase the risk posed to children. The mandated reporting of concerns to Tusla was completed in a timely manner. The safety and well-being of children was the priority throughout the management of all cases. Furthermore, additional foster care reviews were scheduled when required and cases were closely monitored prior to additional reviews being completed.

Revised national policies and processes for the management of welfare concerns came into effect in 2025. Senior management of the service ensured all staff received updated information about the changes made. Inspectors spoke with staff

who were aware of the changes and this was also evident in team meeting discussions. The policy was implemented consistently and there was open communication with relevant external stakeholders about the updates to policies. In addition, the service was proactive in inviting agencies to meet with staff and foster carers to provide further training in this area. These actions were being tracked on the risk register.

There were also changes made to the vetting processes in 2025. The change in process was that all documents including identification needed to be validated and completed in person. This meant that there could be possible delays in completion of vetting for foster carers, applicants within the assessment process, birth children who are over sixteen years of age and young people over the age of 18 living in a foster family and foster care support networks. While the validation of documentation continued to add workload pressures due to geographical reasons, additional internal audits were scheduled to ensure continued compliance with this process and as a safeguarding measure for children in foster care.

There was a collaborative approach to safety planning. This included the child's social worker, link worker and foster carer. Inspectors reviewed some of the 23 safety plans in place at the time of the inspection. The vast majority of these were regularly reviewed and updated as required. These were in place for various risk factors impacting upon the safety of children. For example, aggression, mental health concerns and welfare issues. Plans were very clear with regard to how incidents should be managed in a way that prioritised safety. Foster carers and others were included in safety plans and those assigned specific responsibilities were supported in doing so. In some instances, foster carers were required to contact relevant external professionals for advice and this was often supplemented by support offered by their link workers.

The protocol to follow when children were missing in care was implemented by foster carers when required. Updating safety plans following incident of this nature was an area for improvement. While records indicated that previous safety plans were discussed with the foster carer who had adequate information to report to relevant authorities when required to do so, plans were not updated following a missing from care incident. When inspectors asked about this, the service advised that this one incident did not require the plan to be updated and there was not identified risk to the child at the time of the inspection.

Although timely action was taken to address immediate safety concerns, the information was not always recorded on case records. For example, there were delays in updating risk assessments, safety plans or incident forms not being completed at the time of an incident and not followed up in a timely way by staff. These instances are more quality improvement pieces rather than posing risk to children's safety.

The majority of incident reports completed by foster carers were detailed, of good quality and signed by the relevant parties. They included a timeline of events, the foster carer's response, any follow-up required and the dates of when any required notifications were sent to external parties. This demonstrated a good account of events, reflection on what had occurred and a plan to address any challenges arising with the relevant parties being notified. However, there was one incident that required increased oversight to ensure all actions were taken at the time of the event. In this incident all appropriate action was taken to ensure safeguarding.

There were instances when children resided in households which exceeded the standards. This meant that there were more than two children placed in the same household who were not related. If two or more siblings were placed together, they should not be placed with other children in foster care. There were 12 children residing four households which exceeded standards at the time of the inspection. These placements were sampled by inspectors. They illustrated appropriate matching between children and foster carers, they were being monitored, notified and approved by the FCC and adequately supported to meet the children's individual needs. All four households had long term matches between the children and foster carers and had supported the placement of siblings together within the same household. Foster carers were informed of their right to refuse a placement and their decision was respected.

The service ensured that staff and foster carers were aware of their role in keeping children safe. Safeguarding was a feature of many forums and was evident in records reviewed by inspectors. Timely actions to prioritise children's immediate safety were taken in all instances in the sample of records reviewed by inspectors. The timely updating of records such as safety plans and incident report forms required improvement. These were a minority of records out of a large number reviewed and did not pose a risk to children's safety. Delays were addressed during this inspection. In addition, the service was required to report information about a serious offence against a child to An Garda Síochána as well as the mandated reporting of concerns to Tusla. For these reasons, the service has been judged as being compliant with this standard.

Judgment: Compliant

Standard 14a: Assessment and approval for Non-relative foster carers

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

Orchard Fostering had written policies in place for the assessment and approval of foster carers which adhered to Tusla's national assessment framework and national standards. There were established oversight systems in place to track assessment progress and to ensure comprehensive, good quality assessments. There was a clear assessment process in place which enabled the service to approve and match foster carers to the needs of children requiring a placement.

Data provided by the service indicated that 31 assessments had been completed in the 12 months prior to the inspection. Of those 31 assessments, 14 had been approved. A further 12 were in the process of assessments being completed at the time of the inspection and two were waiting to have their assessments presented to the foster care committee. The assessment reports were presented to the foster care committee where decisions were made about approving applicants to become foster carers. From a review of assessment reports, they were clear about the recommendations made for approval.

Prospective foster carers were provided with clear written information about what being a foster carer entailed. They were provided with the service's assessment pack at the start of the assessment process. It included information about the assessment, Garda vetting and other relevant checks undertaken by the service, ensuring child's safety with family pets within the household and other practical information. It also included information about safeguarding and mandated reporting of child protection and welfare concerns. Staff were aware of their role in explaining this to foster carers and were also aware of the role of the designated liaison person within the service.

Safeguarding checks of foster carers and other household members were completed prior to placing children, including Garda vetting. The service was proactive in ensuring safeguarding measures were in place while relevant vetting renewal checks of other people outside of the household were undertaken.

Inspectors reviewed four of the 14 foster care assessments approved in the 12 months prior to the inspection. The assessments reviewed by inspectors were comprehensive and included good verification of information and analysis of the carers' strengths and needs as foster carers. The assessment involved several checks with relevant agencies, medical check-ups, a specific mandatory training course and reference checks. Assessment reports included the feedback of birth children of foster carers. The service offered to meet with birth children to prepare them for children residing with them. This was in line with their recruitment and

assessment policy. Several visits and meetings occurred between foster carers and the assessing social worker. The social worker was suitably qualified and trained to complete assessments. The progress of their work in undertaking and completing assessments was tracked through their supervision with their team leader. Assessments were completed with the approval of social work managers as required by the standards.

The assessment should be completed within 16 weeks of their applicant's formal application, unless more time was required. Of those reviewed, none of the four were found to be completed within the 16 week timeframe. The progress of the assessment was regularly discussed with people applying to become foster carers. When the timeframe was required to extend beyond 16 weeks, applicants were informed of the reasons for this. The rationale for extended periods to complete foster care assessments was documented and this was monitored by the service through their governance and oversight tracker. Inspectors found evidence of good team leader oversight to ensure that assessments concluded as quickly as possible with new provisional dates for completion noted. Of the assessments reviewed, the reasons recorded were not within the control of the service and management were of the view that the service would rather be thorough and complete assessments to a high quality standard over a longer period rather than rush through assessments to meet the 16 week timeframe. This information was reported to the managing director and to the CEO of the organisation.

The process of recommending the approval of foster carers was clear and in line with national policy, procedures and guidance. In order to obtain an approval, the foster care committee required a comprehensive assessment report, Garda vetting, medicals, two reference checks and health and safety checks. These were all present on the assessments reviewed as part of this inspection. The committee then made decisions to approve foster carers or not, and attach any relevant conditions. The foster care applicants had the opportunity to meet with the foster care committee who made the final decision on the approval of their status as foster carers. Attendance at the FCC by applicants was promoted by the social work team leader and it was seen as part of the process. Inspectors saw evidence of this on the foster carer files. Foster carers also received decisions in writing and this was evident on their records.

There were checks in place for foster carers transferring into the service with the requested information being sought and subsequently obtained by Orchard Fostering. This ensured that when Orchard Fostering took over responsibility for providing support and supervision to foster carers, and they had the information they required for any future placements within those foster car households.

Formal contracts or 'placement agreements' were in place for all newly approved foster carers with children in placement. The contract outlined the roles and

responsibilities of foster carers in respect of the individual children placed in their care. These contracts were reviewed by inspectors and met the requirements of the regulations. All children were placed with foster carers with a signed contract in place.

Overall governance by the principal social worker was provided through monthly assessment team meetings. The team discussed items such as preparation training, maintenance of records, interviews, training, referrals, and therapeutic support for foster carers. The 'buddy system' was also discussed. This consisted of mentoring being provided to newer foster carers by those who had more experience in fostering in an informal way. The feedback about the system was positive and it was seen as a valuable support to those commencing foster care.

The service had written policies on the assessment and approval of foster carers which were adhered to. Foster carers received all the relevant information in writing and this was discussed with their assessing social worker. Foster carers were comprehensively assessed in a timely manner in line with regulations and standards. Any delays were accounted for, documented and a clear rationale was provided. Foster carers were kept informed through the assessment process and told about the revision of any scheduled dates for completing the assessment process. Assessment reports were comprehensive and were shared with the applicants prior to presentation to the FCC. Foster carers were encouraged and supported to attend the FCC and this was viewed as a step in the assessment process. Garda vetting was undertaken for all those within the household prior to the placement of children in foster care. There was relevant sharing of information when foster carers transferred into the service in line with policy. Contracts were signed for each child placed within a foster care household. For these reasons, the service is deemed compliant with this standard.

Judgment: Compliant

Standard 17: Reviews of foster carers

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

The service provider carried out foster carer reviews in line with the national standards and regulations. The required information was gathered and assessed which formed part of the foster carer review process in a timely manner. The first review took place one year after a child was in their placement with foster carers. Following this, reviews occurred at three-yearly intervals thereafter, in line with the national standards. These comprehensive three-yearly reviews included

updated Garda vetting as required. Relevant parties were consulted with and invited to reviews as appropriate. Additional reviews were scheduled when required. There were clear records on foster carer files about decisions made and these were communicated to relevant parties. Following the recommendations made to the foster care committee and the review being finalised, foster carers were notified of the decisions made. When differences in opinion arose about any decisions, these were communicated openly and resolved collaboratively.

From the data provided by the service prior to the inspection, the service had completed 37 reviews over the previous twelve months. All of these were planned reviews. One had occurred earlier than planned to facilitate a long term match of a placement with a sibling. Inspectors reviewed a sample of these which indicated compliance with this standard. The reviews of foster carers were safe, accountable, transparent and collaborative. They prioritised the safety and well-being of children and they were undertaken in a timely way.

Of the eight foster carer reviews sampled by inspectors, seven were timely and in line with the national standards. The reason for one being slightly delayed was outside of the control of the service provider. The reason for the delay was documented, escalated and was held four weeks later. Reviews were comprehensive and had good oversight. This meant that the service could ensure that all foster carers had the continued capacity to provide safe care.

The service provider ensured that additional reviews were scheduled and undertaken when required. Examples provided in the national standards about when additional reviews should occur include investigations of abuse or neglect.

Foster carer reviews were chaired by social work managers and were attended by link workers, foster carers and others as appropriate. The provider sought the views of people to include in the review process. Relevant people received letters and review templates ahead of reviews. These include social workers, foster carers, parents and children. Foster carers had the opportunity to write their own reports and make their views known to the service. Children and their social workers had the opportunity to contribute to the reviews of their foster carers.

It was important to see the recording of children's views in the process and this was evident in all of the reviews sampled. The inspection found that children's voices were heard in foster care reviews. For example, some children wanted foster carers continuing support in meeting with family members on special occasions.

Where views differed, people had the opportunity to discuss their views and this showed an open and collaborative practice regarding foster carer review process.

The service provider completed the required checks with each review, including Garda vetting of foster carers and other significant adults residing within the household as well as for those within the foster carers support network. Garda vetting was updated as required as part of the foster carer review process. In addition, foster carers' performance, training needs and support requirements were reviewed.

The service provider undertook a reviewing of training requirements for each foster carer. A training plan for foster carers was made to meet any identified needs. Some of the training courses provided to carers, which they can access through recordings, include transitions to secondary school, managing behaviours, understanding and supporting behaviour and connecting through play.

The foster carer's circumstances and capacity to foster were considered. Foster carers reviews covered significant events for the household such as marking celebrations and also acknowledging losses within the family. These were discussed in a sensitive manner while acknowledging the impact that they may have had on children and what supports may assist and support the foster carers and children. As part of some reviews, social work managers visited foster carers to provide support and a space for foster carers to reflect on previous placements to see what could be put in place in terms of planning for the future with foster carers. Supports included various interventions by the highly-skilled social care team, psychotherapy and training identified specifically for foster carers in meeting the needs of children in their care.

The service provider notified the foster care committee of reviews in a timely manner and these were scheduled within appropriate timeframes. The service provider also informed foster carers of their right to meet with the foster care committee. Link social workers maintained records of decisions made at foster care reviews and ensured these were communicated with relevant parties. Foster carers and social workers were provided with copies of the foster carer reviews. This information was reflected on all foster carer's files.

The service had 24 foster care households which did not have a review in the three years prior to the inspection. This was due to various reasons such as being newly recruited foster carers who were not yet due their review, others had ongoing assessments at the time of the inspection and others were placed on hold and not providing foster care to children. The service had oversight of these through their foster carer reviews tracker and could therefore effectively plan for when these would be required to be undertaken and completed.

The tracking system in place for foster carer reviews provided effective oversight, was well-maintained and kept up to date. The management team met weekly as a governance assurance mechanism for the reviews of foster carers. The tracking system shown to inspectors had details about the plan for foster care reviews as

well as any feedback and recommendations and this covered the period from 2024 through to 2028. The sample of foster carer records reviewed by inspectors matched the information recorded on the oversight and governance tracker. This meant that foster carer reviews occurred as required; except in exceptional circumstances. Reasons for this were documented, and there was good managerial oversight and an effective mechanism in place to provide assurances about the quality and the timeliness of foster carer reviews.

Foster carer reviews were timely, comprehensive and additional reviews were scheduled when required. Processes were followed and the foster care committee were notified of the outcome of reviews undertaken. Reviews welcomed the feedback from the household members including the views of children. Link workers maintained records throughout the review process and oversight of reviews was maintained through the service's tracking system. The service met with requirements of this standard which supported a safe service for children in foster care. For example, reviews ensured foster carers retained their capacity to continue fostering, identified any gaps which required addressing and supported foster carers to reflect on their experiences in fostering. For the reasons outlined above, the service provider was judged as being compliant with this standard.

Judgment: Compliant

Standard 19 : Management and monitoring of foster care services

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

The service was committed to providing children with a high quality service that supported and promoted their rights at every level. There were clearly defined governance arrangements and structures that set out lines of authority and accountability, and specific roles and responsibilities. There were appropriate management systems in place to ensure the delivery of a safe, rights-based service and high-quality service that's committed to continuous improvement. There was adequate oversight of identified risks; which were managed effectively and appropriately.

There were appropriate service level agreements in place including monitoring, reporting and oversight arrangements with commissioned service. There was an appropriate allocation of resources to meet the needs of children requiring foster care placements. Placements were only approved in agreement with foster carers and managers, having fully assessed the matching between children and foster carers.

The service was adequately resourced within the foster care team to deliver the service in line with statutory requirements and what was expected of them as a contracted service. Regular meetings were scheduled with managers and inspectors reviewed a sample of those records. They were comprehensive in terms of the information being reported such as assessment of foster carers, complaints, allegations and significant incidents, mandated responsibilities and service provision. These governance arrangement meetings occurred on a quarterly basis.

The service had effective quality assurance and monitoring systems in place which ensured a quality, consistent service was provided to all children and foster families in line with national standards and regulations. Systems included oversight of the management of complaints and significant events, audits, progression with quality improvement plans, risks as well as the tracking of information required under the national standards and regulations. All of these aspects of service provision were discussed at quality review committee meetings.

The quality and safety sub-committee met on a monthly basis and had a strong, risk management and improvement focus with standing agenda items. Within this there was a review of the risk register including analysis of levels of risk, effectiveness of controls and inclusion of new items where escalating concerns were identified. The committee analysed the service performance through review of key performance indicators and trends which included outcomes for staff, children, foster carers and ongoing review of the impact of their quality systems. Additionally, there was a review of serious concerns, allegations, incidents, complaints and compliments through monitoring and oversight of trends and actions agreed. The committee oversaw the quality control of Orchard Fostering's policies and procedure.

The quality and safety committee met quarterly. Inspectors found from that Orchard Fostering senior management reported on developments from the quality committee and quality review committee. Actions from previous meetings were reviewed and actions for the next meeting were agreed. The service had a quality and safety subcommittee which strengthened the process of improving quality and safety.

Complaints were managed well within the service. There were effective policies and procedures in place for timely management of complaints, allegations and concerns in relation to staff members. The two complaints received in relation to staff during the twelve months prior the inspection were reviewed by inspectors and these were appropriately resolved at local level. These were monitored to the outcome stage on a complaints tracker.

Auditing systems were robust and effective with good oversight in place. Systems had been updated since the last inspection. The provider had implemented an auditing tool in 2024 which generated reports and assigned actions for completion.

These were tracked by the quality assurance coordinator. The auditing system could be changed and updated as required to align with any changes to policies, processes and guidance documents.

This system was enhanced throughout 2025 to review, distribute, approve and store policies and procedures. This was in line with the provider's quality assurance plan set out by the quality director. The aim was to replace other processes for the management of policies and procedures to provide consistency across the Orchard Fostering care group including the fostering service.

Since implementing this system, successful enhancements were made to develop its functions. These improvements were tracked and completed ahead of the strategic schedule. Qualitative and quantitative audits occurred in line with the provider's yearly audit schedule. The service reported that 72 audits were completed in the 12 months prior to the inspection. These consisted of qualitative and quantitative audits across all teams. Inspectors asked about the internal risk ratings for audits. These reflected the high standard set by the service. For example, for any internal audit undertaken, any findings below 80% were deemed to be not compliant and those above 95% were rated as fully compliant. The areas rated as not compliant continued to be tracked until improvement was noted and verified.

Audit outcomes were tracked to drive improvements in practice. Inspectors reviewed a sample which were relevant to the scope of this inspection. An audit of foster care reviews completed by the quality assurance coordinator in September 2025 was assessed as fully compliant, achieving an overall compliance score of 97%. Eight foster care reviews were found to be out of date at the time of the audit. These delays were managed in line with the Orchard Fostering foster care review policy. For example, four reviews related to inactive foster carers and the remaining four had documented reasons for delays. All delays had been communicated to the foster care committee, clearly outlining the reasons for each one.

An improvement was made to audits which led to enhanced tracking of outcomes and decisions. This improvement was following HIQA guidance and demonstrated the service's commitment to drive service delivery. It related to tracking the outcome of and decisions made at reviews being communicated to children's social workers. This was subsequently implemented by the management team. Full compliance was noted in other audited areas relevant to this inspection such as foster carer training, staff training and staff supervision. These were all discussed and monitored at the quality and safety sub-committee. This led to continuous improvements in practice for which all staff were held responsible and accountable.

Risk was well-managed within the service. To mitigate against risk while systems were updated and changed, the service maintained manual trackers which provided governance over all aspects of the service as well as the online database which held information about foster care households. Management advised of and reviewed several trackers with inspectors. They covered areas such as mandated reporting, foster carer reviews, governance, risk register, assessments and complaints and compliments. Other areas of practice which were monitored and tracked included supervision, audit actions, quality improvement plan, training, support visits to foster carers and required documents for case records.

The data and information system for case management in place required improvement. This was an outstanding issue since the previous inspection in 2023. Further progress had been made to address this issue at the time of this inspection and it was part of their strategic plan to implement the system in 2026.

The provider's data storage system comprised of an online database of foster care households. The service was striving to have an all-round comprehensive system. A number of data systems had been reviewed over the past two years. Final updates to an alternative data system were being introduced at the time of the inspection with a planned implementation across the service in 2026.

There was good oversight in place of this transition at senior management level. The Orchard Fostering Care Group strategic plan (to which Orchard Fostering Fostering is a part of), was mapped out and agreed by the senior management and executive of Orchard Fostering Care Group team. The strategy is a three-year strategy that began in 2024 and is operational up to and including 2026. The strategy was signed off by the Orchard Fostering Care Group board of management. The executive Orchard Fostering Care Group team presented on the strategy and all updates about this to the board of management on a quarterly basis.

The service reported 12 adverse events and risk escalations relating to foster care in the 12 months prior to the inspection. These consisted of behaviours of concern, mental health issues and instances when medical attention was required. Where appropriate, safety plans were put in place. These were often worked in collaboration with external support services who had expert knowledge in the relevant areas of concern. These incidents were reported to senior management and discussed at the monthly quality and safety sub-committee meetings. These meetings had an independent chair and are attended by members of the management team including the CEO and a representative of the board.

Discussion about the management of incidents and what supports were required to give to foster carers, was a regular feature at meetings. The managing director and principal social workers were familiar with the incidents, outlined what had occurred and what supports had been put in place. For example, support provided

to foster carers inclusive of particular external supports when required and the close monitoring of the foster care households to maintain safety. Learning from such incidents were shared within the teams to support continuous improvement in the service.

All quality assurance pieces of work undertaken were discussed at the monthly quality committee meetings and also at regular meetings between the managing director and the quality assurance coordinator. Areas discussed include updates about the quality improvement plan, audits, training, policies and actions from the previous meeting. The sharing of this information, updates being provided and progress being tracked was an assurance mechanism for all aspects of the service having comprehensive governance oversight. These intrinsic areas were discussed at management level with relevant updates and developments being presented to the wider staff team as required.

The service's fostering risk register had 12 identified risks at the time of the inspection. The three highest were placement breakdowns, self-harming behaviours and carer retention. The service had adequate controls in place to mitigate against these risks. For example, for placement breakdowns, there were placement trackers, support visits and enhanced placement services and supports available for households. There were also training and learning opportunities provided to assist foster carers to meet the needs of children in care and 24/7 support. The service worked in collaboration with Tusla to discuss and support placements of children in foster care.

The service also had a foster carer register in place which reflected the issues arising within placements at various times and what supports were required. For example, those risk rated high may include placements at risk, allegations made against foster carers, children placed with additional needs, significant events occurring or behaviours that challenge. Medium risk ratings included new foster carers, foster carers retiring or transferring or when complaints had been made. A low risk rating included stable placements, planned placement endings or new foster carers. While those rated high received a service to manage any risks, those deemed lower in terms of risk were also engaged through the additional measure of retention visits.

The service actively sought out the views of foster carers and utilised their feedback to further develop the service. For example, there was a strong emphasis on foster carers having the required skills to meet the needs of children in their care. While the service actively promoted various training workshops and encouraged foster carers to attend, this was not always practical due to other demands such as work commitments, training locations and times. With this feedback, the service developed a catalogue of training workshops for foster

carers to access when this was convenient for them. The service obtained permission to record training sessions and these were available upon request of foster carers. The service had records of how often these sessions were requested and how many foster carers had accessed additional resources in that manner.

In addition, the service recognised that foster carers training needs could change depending on circumstances, events and children's presenting behaviours. This led to the service issuing two, six-monthly training calendars rather than an annual one at the start of each year. Regular discussions occurred about training and ongoing needs to ensure children's individual needs were met within placements. These were strengthened by the continued focus, drive and efforts made to ensure that emerging needs could be met on an ongoing basis. For example, training in relation to self-harming behaviours and the development of safety plans in managing these behaviours and supporting young people in placements.

The service was proactive to learn from events and improve the service moving forward. One example of this was a tracer audit. This audit was completed in 2025 to improve service quality, safety and outcomes by systematically examining foster carer's journey through the foster care process for learnings. The tracer audit focussed on poor placement outcomes from previous placements to learn from and improve future outcomes for children and foster carers. The audit found that children's welfare and wellbeing was central to all decisions made which were in line with internal policies, standards and regulations in place at the time. There were learnings from the audit with regard further training required for link workers and support staff in addressing concerns and having difficult conversations with foster carers as they arose. A presentation of the audit findings to staff was then followed with training in relation to managing serious concerns and allegations arising within placements.

Advocacy for foster carers was an important feature of service provision. The service highlighted concerns with relevant agencies in terms of the impact of the cost of living on foster carers and the requirement to support foster carers in their role. For example, lobbying and advocating for foster carers in terms of a pension solution in recognition of their contribution and care provided to children in foster care.

To assist and support carer retention, the service paid for foster carers membership for an advocacy service. There was a carer ambassador board in place whose details were shared with foster carers. As well as regular support visits, retention visits also occurred. These were undertaken by the management team to experienced foster carers who had children placed with them for long periods of time. The purpose was to inform them about how the service may continue to support them in addition to receiving information from foster carers

about what they may require. For example, support in accessing the education system for children.

Supervision occurred in line with the service's policy. It was regular, structured, provided the opportunity to discuss case work, review practice and plan for continued professional development. Inspectors sampled 10 supervision records and found supervision to be of good quality and held within the required timeframes. Records clearly documented case discussion, with particular focus on cases deemed as high risk and the safeguarding of children was prioritised. Discussions which occurred with frontline staff were in turn discussed with management as required. This showed open and transparent discussions about issues which were shared across the service. Staff told inspectors that they felt supported in their roles and managers were available to them. Progression with tasks and cases are noted and any delays required an explanation. These explanations were documented as well as measures being put in place if they could assist with addressing any difficulties. Professional development was also a feature and discussions about whole service level training as well as particular interests of staff were noted. Orchard Fostering's belief of that effective supervision was reflected in how the functions of supervision were used was reflected in practice. The review of cases to ensure practice was of good quality ensured children were being provided with a safe service.

There were appropriate safeguarding mechanisms in place which had good oversight in place. Safeguarding featured across service provision in different ways. These included safeguarding policies and procedures which were routinely referred to in meetings and practices were evident in casefiles. Interim measures in place to support the new database systems were effective and ensured information was kept up to date with managerial oversight.

The service had capacity for placement of children. This would be determined based on effective matching of children with foster carers who would have the capacity to meet their needs.

Safeguarding structures were in place to support assessment, approval and reviews of foster carers. For example, relevant checks were completed as required as well as additional steps taken such as safety regarding family pets. All foster carers had a link worker in place to support placements as well as a continued focus on training needs which evolved over time.

Orchard Fostering had effective structures and governance arrangements in place for the management and monitoring of foster care services. There were strong systems in place for the management of risk, auditing and quality improvement. Staff were held accountable for their practice. Any improvements to the service were identified and monitored to completion. There were effective controls in

place to mitigate against any identified risks. It was for these reasons that Orchard Fostering Fostering were deemed to be compliant with this standard.

Judgment: Compliant

**National Standards for Foster Care (2003)
and
Child Care (Placement of Children in Foster Care) Regulations,² 1995**

Standard 9	A safe and positive environment
Standard 10	Safeguarding and child protection
Standard 14(a)	Assessment and approval of Non-relative foster carers
Regulations Part III, Article 5 Part III, Article 9	Assessment of foster parents Contract
Standard 17	Reviews of Foster carers
Standard 19	Management and monitoring of foster care services
Regulations Part IV, Article 12 Part IV, Article 17	Maintenance of register Supervision and visiting of children

² Child Care (Placement of Children in Foster Care) Regulations, 1995

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