Report of a Private Foster Care Service

<table>
<thead>
<tr>
<th>Name of provider:</th>
<th>Orchard Fostering Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tusla Region:</td>
<td>DML</td>
</tr>
<tr>
<td>Type of inspection:</td>
<td>Announced</td>
</tr>
<tr>
<td>Date of inspection:</td>
<td>29 - 31 March 7 April 2021</td>
</tr>
<tr>
<td>Inspectors:</td>
<td>Erin Byrne / Lorraine O’ Reilly</td>
</tr>
<tr>
<td>Centre ID</td>
<td>OSV - 0004244</td>
</tr>
<tr>
<td>Fieldwork ID</td>
<td>MON - 0032073</td>
</tr>
</tbody>
</table>
**About monitoring**

The purpose of monitoring is to safeguard vulnerable children of any age who are receiving foster care services. Monitoring provides assurance to the public that children are receiving a service that meets the requirements of quality 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 better, safer lives.

The Health Information and Quality Authority (HIQA) is authorised by the Minister for Children, Equality, Disability, Integration and Youth under Section 69 of the Child Care Act, 1991 as amended by Section 26 of the Child Care (Amendment) Act 2011 to inspect services taking care of a child on behalf of the Child and Family Agency (Tusla) including non-statutory providers of foster care.

In order to drive quality and improve safety in the provision of foster care services to children, the HIQA carries out inspections to:

- **Assess** if the service provider has all the elements in place to safeguard children and young people and promote their well-being while placed with their service

- **Seek assurances** from service providers that they are **safeguarding children** through the mitigation of serious risks

- **Provide** service providers with the **findings** of inspections so that service providers develop action plans to implement safety and quality improvements

- **Inform** the public and **promote confidence** through the publication of the HIQA’s findings.

Monitoring inspections assess continuing compliance with the regulations and Standards, can be announced or unannounced.
This inspection report sets out the findings of a monitoring inspection against the following themes:

<table>
<thead>
<tr>
<th>Theme 1: Child-centred Services</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Theme 2: Safe and Effective Services</td>
<td>☒</td>
</tr>
<tr>
<td>Theme 3: Health and Development</td>
<td></td>
</tr>
<tr>
<td>Theme 4: Leadership, Governance and Management</td>
<td>☒</td>
</tr>
<tr>
<td>Theme 5: Use of Resources</td>
<td></td>
</tr>
<tr>
<td>Theme 6: Workforce</td>
<td>☒</td>
</tr>
</tbody>
</table>

1. Inspection methodology

As part of this inspection, inspectors met with the relevant professionals involved in Orchard Fostering and spoke with foster carers.

Inspectors observed practices and reviewed documentation such as case files, foster carers’ assessment files, and relevant documentation relating to the areas covered by the inspection.

During this inspection, the inspectors evaluated the:

- safeguarding processes,
- assessment of foster carers,
- review of foster carers,
- effective policies,
- management and governance of the service,
- supervision, support and training of foster carers and
- supervision, training and recruitment of staff.

The key activities of this inspection involved:

- the analysis of data,
- interviews with the managing director and senior managers within the company,
- focus group with foster carers,
- interviews with foster carers,
- focus group with children,
- review of the relevant sections of foster carers’ files as they relate to the
inspection
- interview with the representatives from the Alternative Care Inspection and Monitoring service and
- interviews with three children in care social workers.

Acknowledgements

HIQA wishes to thank the staff and managers of the service for their cooperation with this inspection, and foster carers who participated in the focus group with inspectors.
2. Profile of the foster care service

The Service Provider

Orchard Fostering was established in 2008. They are a large Irish owned independent foster care agency working in partnership with Tusla to provide children and young people with a positive care experience. The head office is based in Dublin and Orchard Fostering provide foster care to children and young people across the Republic of Ireland. The main business of Orchard Fostering is to recruit, assess, train and support foster carers who can offer high quality placements for children referred by Tusla to the agency. Orchard Fostering provide foster care and supported lodgings to a wide range of children and young people from the ages of 0-18 years who have a variety of different needs. At the time of inspection there were 79 foster care households.

The organisational chart in Appendix 2 describes the management and team structure as provided by the service.
Summary of inspection findings

Child and family services in Ireland are delivered by a single dedicated State agency called the Child and Family Agency (Tusla), which is overseen by the Department of Children, Equality, Disability, Integration and Youth. The Child and Family Agency Act 2013 (Number 40 of 2013) established the Child and Family Agency with effect from 1 January 2014.

Tusla have responsibility for a range of services, including the provision of a range of care placements for children such as statutory foster care services.

Children’s foster care services may also be provided by non-statutory foster care agencies following agreement with Tusla. Tusla retain their statutory responsibilities to children placed with these services 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 the Child and Family Agency. Orchard Fostering Service were last inspected by Tusla’s monitoring service in February 2020. Inspectors reviewed this report and spoke with Tusla Monitoring officers as part of this inspection. Actions identified as a result of this monitoring inspection had been completed.

This report reflects the findings of this inspection, relating to eight standards including safeguarding, assessment and approval, supervision and support, training, reviews of foster carers, effective policies, training and qualifications and the leadership, governance and management of the service, which are set out in Section four of this inspection report. The provider is required to address a number of recommendations in a compliance plan.

In this inspection, HIQA found that of the eight national standards assessed:

- five standards were compliant
- one standard was substantially compliant
- two standards were moderate non-compliant.

This was the second inspection of Orchard Fostering Service by HIQA, the first having taken place in 2018. The service was adequately resourced and there were systems in place to ensure that children were protected and that foster carers were well-supported. However, systems for monitoring and oversight did not effectively ensure compliance with a number of key statutory requirements and organisational policies.
The rights of children in care were promoted and met. The service had clear and comprehensive arrangements in place for the support, supervision and training of foster carers which were good quality and effective. Each foster care household had an allocated fostering link worker social worker, who was in regular communication with them, and provided good supervision and support. In addition to this, enhanced placement supports including, therapeutic services and a social care worker were available.

Foster carers were provided with training as required and appropriate arrangements were put in place for remote training to continue during COVID-19. Attendance at training was good and training records were well-maintained. Foster carers told inspectors if an additional training need was identified, the agency would ensure that this need was met. Foster carers also had access to 24/7 support with an on-call service operating outside typical office hours.

The service was committed to the retention of foster carers. There was a defined strategy for recruiting foster carers and applications from prospective foster carers were promptly responded to. The service demonstrated a willingness to learn from feedback provided by children, carers and other services.

Assessments of prospective foster carers were comprehensive, there was good oversight by managers and carers were approved by relevant foster care committees as required.

Reviews of foster were not taking place as required in line with national standards, for all carers. There were delays in completing reviews which had commenced and the systems for monitoring and oversight required improvement. The service completed additional reviews of carers following investigations of allegations of abuse or serious concerns, as well as in the case of an unplanned ending to a child’s placement and these were prompt and comprehensive.

Safeguarding arrangements included updating An Garda Síochána vetting for foster carers every three years. However, this was not completed in line with policy in all cases. There were delays in response to requests by foster carers which were not efficiently managed. The service had appropriately reviewed the health and safety of foster carers’ homes as required and, while physical visits to carer’s homes were not possible due to COVID-19, a system of unannounced virtual visits to foster care households was put in place.

There were clear governance and management arrangements in place and a sufficient numbers of qualified and skilled staff to deliver the service. However, improvements were required with regard to contingency planning to minimise impact of staff absences and the provision as well as oversight of staff supervision required improvement.
Serious incidents and significant events were promptly notified and appropriately managed. Learning from significant events including complaints and feedback from carers and or staff was routinely utilised to improve service provision. Information was shared effectively throughout the organisation and there was a culture of quality improvement communicated across all levels of staff.

Audits and reviews were undertaken regularly as required on a wide range of areas, to assess compliance with National Standards. However, children’s case file audits had not identified an issue of absent up-to-date care orders and or voluntary consent agreements in a significant number of cases prior to inspection.

Risk management system were well established but required improvement to ensure that risks in key areas of compliance with National standards were identified and addressed. There was a risk register in place which was reviewed and updated regularly.

Issues outlined above and other issues identified during the inspection are contained in the compliance plan which can be found at the end of this report.
Summary of judgments under each standard and or regulation

During this inspection, inspectors made judgments against the National Standards for Foster Care. They used four categories that describe how the national standards were met as follows. We will judge a provider to be compliant, substantially compliant or non-compliant with the regulations and or national standards. These are defined as follows:

- **Compliant**: a judgment of compliant means that no action is required as the provider or person in charge (as appropriate) has fully met the standard and is in full compliance with the relevant regulation.
- **Substantially compliant**: a judgment of substantially compliant means that some action is required by the provider or person in charge (as appropriate) to fully meet a standard or to comply with a regulation.
- **Non-compliant**: a judgment of non-compliance means that substantive action is required by the provider or person in charge (as appropriate) to fully meet a standard or to comply with a regulation.

<table>
<thead>
<tr>
<th>National Standards for Foster Care</th>
<th>Judgment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Theme 2: Safe and Effective Services</strong></td>
<td></td>
</tr>
<tr>
<td>Standard 10: Safeguarding and child protection</td>
<td>Compliant</td>
</tr>
<tr>
<td>Standard 14a: Assessment and approval of foster carers</td>
<td>Compliant</td>
</tr>
<tr>
<td>Standard 15: Supervision and support</td>
<td>Compliant</td>
</tr>
<tr>
<td>Standard 16: Training</td>
<td>Compliant</td>
</tr>
<tr>
<td>Standard 17: Reviews</td>
<td>Non-Compliant Moderate</td>
</tr>
<tr>
<td><strong>Theme 4: Leadership, governance and management</strong></td>
<td></td>
</tr>
<tr>
<td>Standard 18: Effective Policies</td>
<td>Compliant</td>
</tr>
<tr>
<td>Standard 19: Management and monitoring of foster care agency</td>
<td>Non-Compliant Moderate</td>
</tr>
<tr>
<td><strong>Theme 6: Workforce</strong></td>
<td></td>
</tr>
<tr>
<td>Standard 20: Training and Qualifications</td>
<td>Substantially Compliant</td>
</tr>
</tbody>
</table>
This inspection was carried out during the following times:

<table>
<thead>
<tr>
<th>Date</th>
<th>Times of inspection</th>
<th>Inspector</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>29th March 2021</td>
<td>10:00hrs to 16:00hrs</td>
<td>Erin Byrne</td>
<td>Inspector (Lead)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lorraine O’ Reilly</td>
<td>Inspector</td>
</tr>
<tr>
<td>30th March 2021</td>
<td>10:00hrs to 16:00hrs</td>
<td>Erin Byrne</td>
<td>Inspector (Lead)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lorraine O’ Reilly</td>
<td>Inspector</td>
</tr>
<tr>
<td>31st March 2021</td>
<td>09:00hrs to 17:00hrs</td>
<td>Erin Byrne</td>
<td>Inspector (Lead)</td>
</tr>
<tr>
<td></td>
<td>Remote</td>
<td>Lorraine O’ Reilly</td>
<td>Inspector</td>
</tr>
<tr>
<td>7th April 2021</td>
<td>10:00hrs to 13:00hrs</td>
<td>Erin Byrne</td>
<td>Inspector (Lead)</td>
</tr>
</tbody>
</table>
3. Findings and judgments

Theme 2: Safe and Effective Services

Services promote the safety of children by protecting them from abuse and neglect and following policy and procedure in reporting any concerns of abuse and or neglect to the relevant authorities. Effective services ensure that the systems are in place to promote children’s welfare. Assessment and planning is central to the identification of children’s care needs. In order to provide the care children require, foster carers are assessed, approved and supported. Each child receives the supports they require to maintain their wellbeing.

Standard 10: Safeguarding and child protection

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

Summary of inspection findings under Standard 10

Orchard fostering service had clear and effective systems in place which ensured that children and young people placed with foster carers in the service were protected from abuse and neglect.

Concerns, allegations and complaints about foster carers were responded to and managed appropriately by Orchard fostering service and in line with Children First National Guidance for the Protection and Welfare of Children, 2017 (Children First). In addition, the service adhered to Tusla’s Interim Protocol for Managing Concerns and Allegations of Abuse or Neglect against Foster Carers and Section 36 (Relative) Foster Carers (2017), in that they notified the statutory agency of all allegations of abuse or neglect received into the service in a timely manner.

Data provided by the service showed that there was one allegation and one serious concern against foster carers in the 12 months prior to the inspection. Inspectors reviewed both and found that they had been responded to appropriately. Both had been promptly notified to Tusla and strategy meetings were held with Tusla to agree roles and responsibilities in the management of these concerns as well as, proportionate interim measures to protect children as required. Inspectors saw that learning from a previous concern concluded in 2020, was effectively implemented in both cases. Foster carers were appropriately informed of allegations or suspicions of abuse and kept updated...
during investigations. Where delays existed reasons for these delays were clearly documented and there was evidence of comprehensive action by the service to promptly resolve concerns. Relevant foster care committees were notified of allegations and concerns as required.

Inspectors found that Orchard fostering service had appropriate mechanisms in place to safeguard children. Child protection concerns were reported to relevant social work departments as required, through Tusla’s online portal. The principal social worker maintained a spreadsheet of all child protection concerns notified, including outcomes and follow up action details. In addition, significant events, such as children going missing from care or incidents of suicidal ideation, were recorded, notified and tracked to ensure responses were timely and effective.

Data provided by the service indicated that there had been 58 child protection concerns notified to Tusla in the twelve months between March 2020 and March 2021. All of these child protection concerns related to disclosure of abuse by children which occurred before their move to foster care. Managers told inspectors that they worked collaboratively with Tusla in agreeing a response, including risk assessing and supporting children and carers through the process for assessing and investigating allegations of abuse. Strategy meetings were scheduled where these were required and the service followed up with Tusla to seek the outcome of child protection and welfare investigations where necessary.

Tusla social workers and monitoring officers told inspectors that communication with Orchard fostering was good. They said that they were notified of all significant events or safeguarding concerns as required and their experience of the service in the management of such incidents was good.

There were good safeguarding practices in place. The service had a child safeguarding statement, safe care policy and a policy for dealing with complaints which provided appropriate guidance to staff and were implemented as required. Carers were provided with a foster care handbook which detailed information on their responsibilities to report concerns as well as their expectations to safeguard children from harm. All foster carers were allocated a link social worker who visited their home regularly to ensure the safety and wellbeing of all children in the home. In addition, in order to ensure that children were safeguarded and that foster carers were meeting their responsibilities, the care policy detailed a requirement that two unannounced visits to each foster care household was to occur during the year.

Due to restrictions relating to COVID-19, the service ability to visit each foster care home was limited. However, creative alternative measures, such as virtual unannounced home tours, were implemented throughout the service which ensured, in the absence of physical visits, that children continued to receive a
high standard of care and protection within a suitable environment.

Foster carers were provided with relevant information about the children being placed with them before they moved in and children were given the opportunity to visit and meet carers before they were placed. The service had clear admissions procedures and criteria which ensured that children were appropriately matched to their carers.

All foster carers had Garda Síochána (Police) vetting but not all garda vetting was up to date as required by the organisations policy. The service had a policy of updating Garda vetting for foster carers and other relevant persons every three years. At the time of inspection there were two foster carers and four relatives and friends who did not have up-dated garda vetting in line with the services policy. The two carers whose garda vetting was out of date had been escalated internally through the social worker, social work team leader and principal social worker over the year prior to inspection. The system in place required improvement to ensure it was effective in all cases and supported compliance with the service’s own policy. At the time of writing this report both carers concerned had received up-to-date vetting.

There were three complaints received by the service in the twelve months prior to this inspection. Two of the three complaints were concluded and one recent complaint was ongoing at the time of inspection. Each complaint was responded to promptly and effectively. The outcomes of complaints were clearly recorded and actions identified were implemented as required in all cases. In addition, the service undertook a comprehensive review of the management of one complaint and identified a number of recommendations for learning which were promptly communicated and implemented as required.

The service had a complaints policy and the details of this were made available to foster carers in their foster carer handbook. Children’s views were sought and concerns were taken seriously. Children were given information about the service including how to make a complaint or who to talk to if they had a concern. Staff and managers told inspectors that there was a culture of openness in the service and that staff felt confident in raising any concerns they might have. There was also a policy in place on protected disclosures.

All foster carers and staff received training in Children First. Foster Carers completed training in preparation for fostering which included information about their responsibilities and expectations with regard to abiding by safeguarding measures implemented by the service as well as Tusla. In addition, the foster care handbook, which was received by all carer’s, detailed their responsibilities as mandated persons with regard to safeguarding and child protection.
Child protection and welfare concerns, as well as allegations and complaints about foster carers were managed in line with Children First (2017). There were effective safeguarding measures and systems in place. All foster carers had an allocated link worker. While improvements were required with respect to management and monitoring of up-to-date Garda Vetting, all foster carers had Garda vetting on file. All foster carers received training in Children First and were aware of their responsibilities as mandated persons.

Judgment: Compliant

Standard 14a: Assessment and approval of 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.

Summary of inspection findings under Standard 14a

The service completed formal comprehensive assessments of all foster care applicants and each carer was formally approved by a foster care committee prior to a child or young person being placed with them. Assessments were good quality and contained all information required by National standards, they were progressed promptly as required and there were clear explanations for delays recorded in all cases examined.

There was a written policy on the assessment and approval of foster carers in place. Enquiries about fostering were promptly acknowledged and potential carers were provided with detailed information about fostering as well as the assessment process. An initial visit was undertaken by an allocated assessment social worker promptly, to assess the suitability of an applicant for fostering and their ability to engage with the assessment and training process.

Assessments were completed by qualified social workers and there were clear arrangements for the oversight and supervision of the assessment processes by social work team leaders as well as a dedicated principal social worker with responsibility for this aspect of the service. There were effective procedures in place for monitoring of assessments to ensure they were good quality and contained all required information.

Data provided by Orchard Fostering Service showed that 13 foster carers were approved in the 12 months prior to inspection. There were 17 assessments in progress and two awaiting approval at the time of inspection. Inspectors reviewed a sample of five completed and approved assessments all of which
were good quality.

Of the five assessments reviewed the timeframes for completion of the assessment varied from 18 to 39 weeks, with three of the five taking more than 28 weeks to complete. Reasons for delays varied and were clearly documented. Reasons for delays included; changes in assessing social workers due to staff leaving Orchard Fostering Services, periods of leave by assessing social workers, delays in completing international checks and delays in response to requests for checks from Tusla. In addition, restrictions relating to COVID-19 added to delays in four of the five assessments examined. The principal social worker with responsibility for assessments provided good oversight. They received regular and detailed updates on progress. The principal social worker closely monitored cases where issues impeding progress presented, and directed actions to address these issues as required.

The service had a clear and comprehensive framework which guided assessing social workers in undertaking foster care assessments and ensured consistency as well as adherence to best practice in completing assessments. Foster care assessment reports were comprehensive and included analyses of the applicants’ capacity to provide foster care. There was evidence that the assessing social workers visited the family homes and interviewed the applicants several times, including individual and joint interviews with couples, as well as individual interviews with other relevant people. Records showed that all relevant information and up-to-date checks and reports were on file as required, including Garda vetting, child protection checks, medical reports, references and health and safety checks. The assessment reports included clear recommendations regarding approval, type of fostering and number of children recommended. All files reviewed contained evidence that applicants had completed foundational training. This was completed online due to COVID-19 restrictions.

The service demonstrated a culture of continuous improvement where opportunities for learning and improved practice were recognised and promoted. The assessment social workers told inspectors that in November 2020, they had made a change to their procedure for requesting documentation related to assessments, in that they now made these requests at initial stages of an enquiry by a potential foster carer. In addition, social workers said that they had strengthened their systems for monitoring progress in this regard throughout the assessment process. Social workers told inspectors that these changes had had a positive impact on improving their timeliness and reduced delays in completing assessments.

There was good oversight of the assessment process by the fostering team leaders and principal social worker with responsibility for assessments. Social work team leaders had adapted their practice following learning from previous
assessments. They had begun to undertake management visits to potential carers earlier in the assessment process in order to identify and manage issues or potential risks arising as soon as possible in the assessment process. The principal social worker produced weekly reports on progress of each ongoing assessment including projected approval dates for new carers and provided updates on these projections to the senior management team regularly.

There was a clear process in place for the approval of foster carers by relevant local foster care committees. Foster care applicants were given the opportunity to review their assessment reports prior to them being presented to the foster care committee. The assessing social worker presented assessments to the foster care committee and foster care applicants were invited to meet the foster care committee considering their application. The decision by the foster care committee on the approval of an applicant for inclusion on the foster care panel or not, was then provided in writing to the service, including specific details of a carers approval where appropriate. Applicants were notified of the decision of the foster care committee regarding their approval, including the type of fostering they were approved for and number of children.

The service maintained a comprehensive file on each foster carer which included details of their assessment as well as all supporting information and documentation required by regulations and standards. Prior to the placement of a child with a foster carer(s) a contract was agreed with respect to each individual child between Tusla and Orchard Fostering services. Carers received copies of each child’s individual contract of care and copies of these were retained on their files held by the service.

The service had a transfer policy in place which provided details of procedures to be followed when carers were transferring between Orchard Fostering, Tusla and or another private foster care service. The policy was comprehensive and provided clear guidance, ensuring safe transfer of carers as well as all relevant information, when this situation arose.

Assessments of foster carers were comprehensive, contained all the required information and were good quality. Carers were formally approved by foster care committees as required and there were contracts of care for each individual child appropriately in place.

**Judgment: Compliant**
Summary of inspection findings under Standard 15

Orchard Fostering Service provided a high standard of support and supervision to each of their approved foster carers. Each carer was allocated a link social worker who supported them to provide good quality, safe and effective care to children.

The service had a handbook for carers which outlined for them the roles and responsibilities of their link social worker, the child’s social worker and detailed the expectations of carers with regard to safeguarding and child protection. In addition carers were provided with information on communication and supports including training, out of hour’s supports and details on procedures for dealing with complaints and allegations. Carers were encouraged to engage with an advocacy service for foster carers and all carers were invited to be part of a representative group of carers known as the carer’s ambassador board, which provided input on policy, practice, improvements and general operations of Orchard Fostering service.

All foster carers were allocated to a link worker who was a professionally qualified social worker. Inspectors reviewed 10 foster carers’ files for the purpose of examining the quality of support and supervision and found that foster carers had four to six weekly contact with their link social workers, in line with the organisations safe care policy. Inspectors found that where placements were at risks or challenges presented, increased supports including additional visits or contact from link social workers, social care supports and increased monitoring by senior managers to ensure safe and effective care, were routinely implemented. In addition, Orchard Fostering Service offered an enhanced placement service also, for children who presented with additional needs. Enhanced placement service options included access to educational support(s), psychotherapeutic support, social care support/respite and interaction with the therapeutic team.

Home visits to foster carers reduced for the majority of carers as a result of COVID-19 related restrictions throughout 2020 and 2021. Through review of files inspectors found that visits continued as required in circumstances where visits
were necessary, for example to support a carer in maintaining a child’s placement through a challenging period or in circumstances where there were identified child protection concerns. However, support and supervision for many carers through this period had been provided virtually as physical visits to carers home were restricted. Inspectors sought assurances from the provider that all households had been visited in the twelve months prior to inspection and received a comprehensive response detailing visits to each household. In exceptional circumstances where visits had not taken place or were limited to one or two visits in a twelve month period, the service provided detailed assurances including actions taken to ensure the safety and welfare of children in placement as well as continued support and supervision of carers.

Alternative means of ensuring children’s safety as well as the continued suitability and safety of their foster care homes were introduced for the majority of carers during COVID-19. These measures included regular phone and video calls to carers during which their children as well as foster children were spoken to. Unannounced video tours of the carer’s homes were conducted during prolonged periods where physical home visits could not take place. Regular communication with children’s allocated Tusla social worker meant that the service effectively coordinated and collaborated with Tusla to assure themselves of continued safety of each placement while adhering as much as possible to government restrictions imposed as a result of COVID-19.

Inspectors met with or spoke to ten foster carers as part of this inspection. They spoke highly of the level of support they received from Orchard Fostering Service. They said that they found their link workers to be very supportive and this was consistent throughout the pandemic. Foster carers told inspectors that they were looking forward to more regular home visits recommencing. Three Tusla children in care social workers who spoke to inspectors said that they found carers were well supported by the service and while physical visits had reduced during the pandemic this did not impact on the level of support or supervision of the carers.

Foster carers, link workers and the child’s social worker worked in partnership to support children’s placements and foster carers knew their responsibilities to report concerns and seek additional supports when these were required. There were clear lines of communication between the link worker and the child’s social worker and there were clear procedures for exchange of information relevant to each placement. The child’s social workers and link workers visited the foster carer’s home together to make arrangements for any new placement.

Link social workers maintained clear records of all contact with foster carers. The
service used a template to record supervision of foster carers. Inspectors found these records to be comprehensive in covering key areas such as training, the needs of children, any issues arising in placements, and the needs of foster carers and the broader circumstances within the foster care family. It was evident from records that there was more frequent phone contact and home visits from the link worker when needed to support foster carers and placements.

Additional supports and training was made available as appropriate. Link social workers organised training for foster carers, in line with the identified needs of the children placed with them and the identified training needs of each foster carer. Counselling was provided to foster carers and their families when a critical event or placement breakdown occurred. A social care worker was employed by the service to provide support to children or foster carers, depending on their identified needs. This included practical support to foster carers, or direct work with children. The social care worker worked closely with the link social worker and was supervised by the fostering support lead.

The opinion of foster carers was valued by the service and feedback was actively sought. In May 2020, Orchard fostering service conducted an online survey of foster carers, comprising of questions relating to their experience of various aspects of the service including, training preferences, supports, communication and ongoing challenges. Responses were collated and actions devised to respond to information received from carers, the majority of which was positive.

The provision of formal support groups for foster carers had been paused due to restrictions related to COVID-19. The provider told inspectors that they had offered online support options however, after consultation with carers it had been agreed that these would be discontinued and in person support groups would be reconvened as soon as possible, once public health restrictions allowed. Foster carers told inspectors that their training events were used as opportunities for foster carers to reflect on challenges they were facing and to get support and advice from other foster carers. In addition to this, social events were organised around Christmas and summer which provided an opportunity for all foster carers and children to take part in activities. Foster carers spoke positively about these events and about the service’s efforts to continue activities remotely during COVID-19.

Support was available to foster carers outside of office hours. Assessment social workers and link social workers all worked as part of an on call schedule for providing support for carers outside of office hours. There was additional manager support available over weekend periods. This schedule was arranged in advance for a full calendar year and a copy was provided to carers on a weekly
basis. Foster carers told inspectors that this was a great comfort to them and although they would not routinely call outside of working hours, it was a great support to know they could if needed.

All foster carers had an allocated link social worker who provided information, advice and support to the foster carer and their family. Foster carers were visited regularly as required and a high level of support and supervision was maintained during the COVID-19 crisis. There were adequate supports in place for foster carers including out of hours supports, training and direct supports appropriate to the needs of the children they were caring for. Foster carers were clear on the role of their link social worker and how this differed from the child’s social worker, as well as their responsibilities to each.

**Judgment: Compliant**

**Standard 16: Training**

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

**Summary of inspection findings under Standard 16**

Orchard fostering service provided a training programme for foster carers which covered all aspects necessary to equip them with the skills and knowledge required to provide safe and effective care. There was a policy on training and carers had individual assessments of training needs on their files, along with plans to meet these needs. Carers were actively encouraged and facilitated to attend and all carers had completed training in Children First (2017).

The service had a dedicated quality assurance and training manager who held responsibility for planning, oversight and evaluation of provision of training to foster carers and staff. There was a training plan in place for 2021 which included a comprehensive programme of training for carers and staff including; challenging behaviour management, internet safety workshop, mother and baby placement training, grief and loss training, empathy education and training on managing the dynamics of access.

Carers were contractually required to attend two training programmes per year and were encouraged to attend all training which interested them. Children First and Paediatric First aid training were mandatory requirements for all carers in the service. Attendance records were kept and feedback was sought from attendees
after each training session. Throughout 2020 despite restrictions related to COVID-19 training continued to be delivered to carers within Orchard Fostering service. New carers all undertook a preparation for fostering course as required prior to their approval and 100% of carers and staff completed or renewed training in Children First (2017). Paediatric first aid had been completed by 87% of carers and there were clear plans in place to ensure full compliance within a two year renewal cycle as required by the service training policy.

In early 2020 the training manager along with representatives from the carer’s ambassador board completed a full review of training processes. Actions relating to the delivery and accessibility of training were identified and implemented. Participation by carers in training programmes was actively encouraged and attendance was facilitated through delivery of training at weekends and in various locations throughout the country as well as, through providing child care at training locations to support carer’s attendance. In addition, each year a carer was chosen to receive an award for up skilling which was directly linked to their attendance at training throughout the year.

Specific training requirements identified to meet individual needs of children were identified through the supervision process between carers and link social workers. Personal learning plans were developed with carers and they were actively encouraged to communicate gaps or deficits in their knowledge for which they required training and support to address. Individualised training was sourced and provided when requested and where funding was required this was provided as necessary.

Foster carers training requirements were routinely discussed and records of these discussions as well as training records for each foster carer was maintained by link social workers. Carers training needs were formally appraised as part of foster care reviews and recommendations for further training made by the foster care committee following reviews, allegations or serious concerns were implemented.

Foster carers were fully aware and committed to the requirement to attend training. They told inspectors that if they identified training courses that they were interested in in their own locality, the service would support them to attend these sessions. The service used video conferencing to facilitate carers to engage in training. In circumstances where carers were not confident attending training remotely, arrangements were made to deliver individual training to these people.

**Judgment: Compliant**
**Standard 17: Reviews of foster carers**

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.

**Summary of inspection findings under Standard 17**

Orchard Fostering Services system for monitoring and oversight of reviews of foster carers was not effective as reviews of foster carers were not taking place as required, in line with national standards, for all carers. Mechanisms in place for monitoring and oversight of reviews of foster carers were not effective. There were significant delays in progressing reviews which had been commenced, resulting in out of date information being considered as part of some foster care reviews. The service completed additional reviews of carers following investigations of allegations of abuse or serious concerns, as well as in the case of an unplanned ending to a child’s placement and these were prompt and comprehensive.

The standards require that foster carers are reviewed one year after their first placement has been made and that subsequent reviews take place every three years. Inspectors examined six carer’s files for the purpose of assessing the timeliness and quality of reviews of foster carers and found delays in five of six, with one at the early stage of review at the time of inspection. Reviews followed an agreed format and the process for completing reviews was comprehensive in that link social workers considered the performance of foster carers, their training needs and changes in their personal and family circumstances including health and finances.

The system for monitoring of progress and timeliness of foster care reviews was not effective and link social workers were not proactively ensuring that reviews of foster carers were undertaken as required. The service did not have an effective system in place to track progress of actions relating to reviews of foster carers and these delays were not identified prior to this inspection. The tracking system in place, overseen by the office manager within the service, which tracked requests for information relating to reviews of foster carers was flawed as there was no connection between this system for monitoring requests for information and the actual completion of reviews of foster carers. The tracker did not include all aspects of the process such as when the review was due to occur,
notifications to the foster care committee as well as completion and submission of the final reports.

The requirements for completing reviews of foster carers was clear and social workers were aware of their responsibilities in this regard but did not ensure that reviews were completed as required. In preparation for reviews, link social workers sought input from all relevant people including the carers, children, children’s parents, children’s social workers and general practitioners. However, inspectors found significant delays between requesting these reports and receipt of same with no evidence of timely follow up in a number of cases, contributing to long delays in completing reviews. This meant that information considered as part of final foster care review reports was not always relevant at the time of review due to these long delays. For example, in one review examined medical reports received in January 2020 were being considered as part of a review that remained ongoing at the time of inspection in March of 2021, another had commenced in December 2019 with some reports returned promptly but this review had yet to be completed.

Inspectors found that these delays in completing reviews of foster carers was not known to the senior management team within the service therefore, risks relating to delays had not been adequately assessed or managed. Risks associated with potentially outdated information were not considered and changes in circumstances during the period of delays were not actively examined. Inspectors sought further information from the service provider with respect to the extent of the non-compliance with national standards and it was identified that 21 carers were overdue their review, with delays varying from one to two months, to six reviews which were delayed more than two years.

The principal social worker and managing director undertook a full audit of reviews of foster carers immediately following the inspection fieldwork and identified a number of factors contributing to the delays and non-compliance with this standard including poor practice, inadequate monitoring and oversight and delays in return of information by third parties. Social workers who spoke with inspectors said that the long delays in completing reviews were attributed to a number of factors including changes in staffing, delays in return of information from third parties, unexpected staff absences and COVID-19. Link support workers told inspectors that they reviewed their practice to improve the system for addressing delays in return of requested information from third parties. They said that they were now issuing requests six months prior to when reviews were due to occur and there was an escalation policy in place to address delays in receipt of information.
Additional reviews of foster carers following serious concerns or allegations were timely, comprehensive and good quality. They included the views of all relevant people and where individuals declined to engage, efforts to address this were clearly documented and reviews were completed in their absence if required. The foster care committee as well as Tusla were promptly notified of the outcomes of these reviews and recommendations were implemented as required.

Where reviews had occurred clear and detailed records were maintained of the review meeting including discussions, decisions and recommendations made. Review meetings were attended by the carers, link social worker and social work team leader. Reviews considered the views of all relevant people and included input from foster carers. A record of the review meetings included details of discussions, decisions and recommendations made. A review report was then produced in which a recommendation was made regarding the ongoing status of the foster carer. Completed reviews were submitted to relevant foster care committees including all supporting information and the outcomes of reviews were notified to each carer as well as the allocated child and family social workers as required.

There was a fair appeals procedure available to foster carers who did not agree with any decision of the organisation and or the foster care committee on any aspect of their role as foster carers.

Reviews of foster carers were not taking place as required and link social workers were not fulfilling their responsibilities to progress and complete reviews of foster carers, in line with national standards. There were significant delays for some carers, in progressing reviews to completion once they had been commenced and the system for monitoring of progress and timeliness of foster care reviews was not effective. Where reviews had occurred good records were maintained.

**Judgment: Non-Compliant Moderate**
Theme 4: Leadership, Governance and Management

Effective governance is achieved by planning and directing activities, using good business practices, accountability and integrity. In an effective governance structure, there are clear lines of accountability at individual, team and service levels, and all staff working in the service are aware of their responsibilities. Risks to the service as well as to individuals are well managed and the system is subject to a rigorous quality assurance system. Services provided on behalf of the area are robustly monitored. The Foster Care Committee is a robust mechanism for approving both placements and foster care applications.

Standard 18: Effective Policies.

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.

Summary of inspection findings under Standard 18

Orchard Fostering service had up-to-date policies and procedures in place which promoted safe and effective, good quality foster care for children and young people. These were consistent with relevant legislation and guidance, were service specific, reviewed regularly and updated as required.

The service maintained an up-to-date panel of carers as required by regulations. There was a clearly defined plan for the recruitment of foster carers as well as detailed plans for the continued development of the service which included enhanced supports being available to foster carers, specific training opportunities and the development of an aftercare programme to support young people approaching this stage of their placement.

The service demonstrated a culture of continuous improvement, where evaluating the effectiveness of the service and identifying learning was a prominent feature. Staff were aware of service policies and understood procedures in place for the delivery of a safe service.

The service promoted a partnership approach to foster care. Consultation with carers and children involved with Orchard Fostering service was a key feature of their planning process. In the year prior to inspection the service developed two groups, the carers ambassador board and a young orchards voice, for both foster carers and young people to provide them with opportunities to have their views and opinions on the service heard, as well as to share their ideas and
experiences of care with Orchard Fostering. In addition, feedback was sought from all carers in 2020 following which responses and or recommendations were considered in devising organisational development plans.

Orchard Fostering provided carers and children with information in relation to policies and procedures as required. In addition to having handbooks available for all carers, in 2020 they engaged with children involved in the service, those both in receipt of foster care and the children of foster carers and developed a booklet, “little book of big words”, designed to support and inform all children involved with Orchard Fostering.

The service had a policy in place for the management of transfer of carers both into and out of their service, which provided guidance as required.

**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.

**Summary of inspection findings under Standard 19**

Orchard Fostering service provided a good quality service to children and foster carers, they had a clearly defined management structure, and staff members knew their roles and responsibilities and lines of accountability were clear. However, some improvements were required as systems for monitoring and oversight did not effectively ensure compliance with a number of key statutory requirements, standards and organisational policy.

The service provided a range of supports and resources to meet the needs of foster carers and children in receipt of foster care including training, supervision and information. There was a clearly defined system in place for matching the needs of children referred to the service with appropriate carers. Complaints were effectively managed and addressed.

Staff members in Orchard fostering service knew their roles and responsibilities. They had consistent and competent line managers from whom they could seek advice and support. Orchard fostering had expanded its management structure in 2020 to include two principal social workers, one with responsibility for supports, referrals and enhanced placements and the other assessments,
training and marketing. In addition a manager with specific responsibility for quality assurance and training had been appointed in January 2020. Each of the principal social workers had line management responsibility for social work team leaders, working within their respective areas of responsibility and both reported directly to the managing director. The managing director reported to the board on a monthly basis in relation to all aspects of service provision and operations including strategy, quality and safety, training and finance.

There were strong communication systems in place which ensured that information was shared consistently and comprehensively throughout the organisation. There were regular management meetings including senior management team meetings, operations meetings and management team meetings. Each team had their own regular meetings also which were well attended by front line staff and records of each were documented and retained. Staff who spoke with inspectors said that communication was good within the organisation. They told inspectors that there was good sharing of information and managers were always available to them for support and advice. Staff said that they were held to account and their work was audited and overseen by their managers for quality. They received feedback from audits, practice improvements were clearly communicated and they were supported to implement actions to achieve improvements in practice where these supports were needed.

The service had a suite of policies and procedures which appropriately addressed requirements in line with relevant legislation and national standards and they maintained a register of all children and foster carers within their service as required by regulations. However, information relating to children’s care status was not maintained as required. Inspectors identified gaps in children’s care records in that, up-to-date copies of care orders or voluntary consent agreements were not available on all children’s files. Inspectors brought this to the immediate attention of the service who then completed a review. This review found gaps in records of 68 children for whom up-to-date care orders or voluntary consent agreements had not been requested or obtained from children in care social workers. Actions to address these gaps, such as requesting copies of up-to-date care orders or voluntary consent agreements, were immediately implemented upon notification to senior managers.

Foster carers were recruited and approved in compliance with relevant standards, foster care assessments were comprehensive and contained all relevant detail as required and carers received training in line with requirements, as well as their identified needs. Orchard fostering service had good systems in
place for supervising and supporting foster carers. There were clear marketing and recruitment strategies in place which identified unmet needs within foster care services and targeted their recruitment of foster carers to meet those needs. In addition, Orchard Fostering service offered enhanced placement options, which were overseen by a principal social worker. Enhanced placement options provided additional supports and supervision for foster carers or children within foster care placements who experienced challenges. The service was aimed at preventing placement breakdown and supporting consistent safe care for children. Placements experiencing challenges or requiring additional supports were closely monitored and risks regularly assessed by the enhanced placement management team.

The system in place for monitoring the quality and timeliness of reviews of foster carers was not adequate. The mechanisms in place for tracking progress in compliance with national standards required improvements. Senior managers had not identified deficits in practice with respect to completing reviews of foster carers and there were issues of quality relating to their slow progress which went unaddressed. In addition, there was a tracking system in place for monitoring the updating of garda vetting for carers and relevant family and friends which was not efficient or effective and did not ensure compliance with the organisation’s own policy in this respect.

Inspectors found and it was reported by staff at all grades within Orchard fostering service that communication and in particular responses to requests for documentation was a challenge which at times impacted on progress within their service. The service had a system for escalating such issues when they arose but this required improvement as it was not effectively addressing the issues. When requests for up-to-date documentation or information were not responded to by children in care social workers, repeat requests were escalated to social work team leaders, then principal social workers. Where necessary, these issues were discussed during six monthly meetings between Tusla and Orchard Fostering Managing director. Despite the escalation process, delays in return of information was cited by all staff as a consistent key factor impacting on progress.

There were sufficient numbers of qualified and skilled staff to deliver the service. However, improvements were required with regard to contingency planning for dealing with situations where there were changes in staff, where staff members were on extended periods of leave, or when staff changed their roles within the service. A principal social worker told inspectors that aspects of monitoring and oversight including pursuit of required information in relation to reviews of foster
carers, were delayed due to absence. Inspectors found gaps in compliance with the organisations escalation procedures for pursuit of information, for which staff absences without prompt management responses were a contributing factor. In addition, not all staff received supervision in line with organisational policy and improvements were required with respect to monitoring and oversight of supervision to ensure consistency in the quality, timeliness and effectiveness.

Serious incidents and significant events were promptly notified and appropriately managed. Inspectors spoke with children in care social workers and the Tusla Monitoring officer and their reported experience of Orchard Fostering was positive. Each told inspectors that they were promptly notified of issues as required and said that communication with Orchard Fostering was prompt, transparent and effective. Children in Care Social workers said that their experience of working with link social workers from Orchard Fostering was one of collaboration and support for children and foster carers. They said that link social workers were available to attend child in care reviews as needed and provided reports when requested.

The rights of children in care were promoted and met. All foster carers within the service had an allocated link social worker who liaised regularly with children’s allocated social worker to ensure the child received safe and effective care.

The service had clear and comprehensive arrangements in place for the support, supervision and training of foster carers which were good quality and effective. The procedures for provision of information to the foster care committee on assessments and reviews of foster carers was known to all and implemented as required.

Orchard Fostering did not have a service level agreements (SLA) in place with Tusla. In the absence of an SLA, the service ensured that there was a contract of care, specifying all relevant details as required, for each individual child placed with carers in their service.

Orchard services completed an annual review of their service provision as well as a strategic business plan which detailed organisational priorities. The strategic business plan provided to inspectors included an evaluation of the implementation of the strategic priorities for 2020, as well as identifying key areas of priority for 2021. Learning and continuous improvement were common features within Orchard fostering and it was common practice to track implementation of learning as well as progress on targets within the
organisation. Inspectors reviewed a number of examples of these trackers including strategy tracker 2021, implementation of recommendations arising from serious concerns/complaints and tracking of feedback and recommendations from carers.

There were risk management systems in place within the organisation however improvements were required to ensure that all risks were identified and managed effectively. The service had a risk register which identified and rated organisational risks. Appropriate control measures were put in place to manage identified risks and these were recorded and reviewed regularly as part of management meetings. However, risk management systems in place had failed to identify risks in a number of key areas including, gaps in children’s records, poor compliance with reviews of foster carers and gaps in the provision and monitoring of staff supervision.

There were quality improvement and auditing systems in place, a number of which had reportedly improved throughout 2020 with the introduction of the quality assurance manager. There was an evident push within the organisation to improve structures for monitoring how the service was performing against standards. Staff members who met with inspectors talked about their experience of quality improvement. They welcomed audits of files as they felt they provided assurances and directed improvements where required. Learning and recommendations on findings from audits and reviews was routinely communicated throughout relevant teams and the service management team was found to be very responsive and prompt at identifying actions to address deficits found throughout this inspection.

While children and foster carers received a good quality service, systems for the identification and management of risks as well as monitoring and oversight required improvement. Garda vetting for foster carers was not updated as required in all cases. There were gaps in the provision of supervision and mechanisms for oversight of supervision required improvement. Risks relating to gaps in key up-to-date information on children's files, such as voluntary consent and care orders, as well as poor compliance with requirements for review of foster carers had not been identified prior to this inspection. For these reasons the service was judged as non-compliant moderate with this standard.

**Judgment: Non-Compliant Moderate**
Theme 6: Workforce

Each staff member has a key role to play in delivering child-centred, effective and safe services to children. Children’s agency recruit and manage their workforce to ensure that staff has the required skills, experience and competencies to respond to the needs of the children.

Standard 20: Training and Qualification.

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.

Summary of inspection findings under Standard 20

Orchard Fostering Service had sufficient, qualified and skilled staff who were appropriately trained and supported in their delivery of the service. Recruitment practices were safe and effective. However, there were gaps in the provision of formal supervision which required improvement.

Staff recruitment processes were effective and ensured that each member of the team had all documentation, qualifications and registration as required. Each staff member has the necessary competencies and skills to care for and support children, their families and foster carers. Staff members were clear on their roles and that of their management team members and all staff received training as required. Recruitment processes were safe, in line with legislation and best practice.

Inspectors reviewed a sample of six personnel files and found that each contained all documentation as required including registration with relevant professional body and up-to-date Garda vetting. All staff members were subject to appraisals which were conducted at varying intervals dependent on their length of service and examples of three and six month appraisals as well as annual appraisals were reviewed by inspectors. These were found to be comprehensive and detailed, they included progress, areas for development, training requirements, as well as achievements for each individual. New staff all completed a comprehensive induction training programme.

A culture of learning was promoted within the organisation, through training and professional development. Each staff member within the service had a personal learning plan which was completed in consultation with their line manager and
specific training requirements were approved as required for individual staff. Training needs identified as part of these individualised plans informed the organisations training priorities for the coming year.

As cited above, there was a dedicated training manager in the organisation who had responsibility for oversight, monitoring and evaluation of training requirements within the service. They maintained a record of training for staff including details of all mandatory training completed and a record of all training needs identified through personal learning plans. They told inspectors that joint training opportunities were available and encouraged within the organisation and provided inspectors with examples of training programmes scheduled for 2021 which would be jointly attended by foster carers and social workers.

The service had a supervision policy and there was an expectation that staff receive regular formal supervision. Inspectors reviewed a sample of supervision records for social workers, social work team leaders and principal social workers and found the majority were good quality and delivered in line with policy. However, all key statutory requirements were not routinely discussed with relevant staff. Delays in completing reviews of foster carers had not been identified and address through the supervision process and supervision for social work team leaders required improvement as there were gaps in timeliness, recording and quality for these managers.

The majority of supervision records examined found good quality discussion and decisions recorded. There was evidence of follow up by supervisors on agreed actions to ensure these were completed and where issues with performance were identified these were appropriately addressed and recorded. Social workers who met with inspectors said that they received regular, good quality supervision. They told inspectors that there was an expectation that they prepared updates in advance of supervision with respect to a number of key areas including, caseloads, training and supports. The managing director told inspectors that all staff with line management responsibilities received training in supervision as well as coaching skills and this was evidenced within training records examined for staff with line management responsibilities.

Supervision records were completed and retained by line managers however, they were not routinely monitored or audited for quality and effectiveness. Inspectors found reference within supervision records for one social work team leader, to a backlog of supervision needing to be completed in preparation for the HIQA inspection, which would suggest that not all supervision was recorded at the time of meetings with staff.
Orchard fostering had a qualified staff team with the necessary competencies and skills to deliver a good quality service. Recruitment processes were safe, in line with legislation and best practice. There were training and development plans for staff and they were supported to develop their knowledge and skills. Training needs were monitored and training was provided where required, to ensure the delivery of good quality, safe and effective care and support. The majority of staff received regular formal supervision however, monitoring and oversight of quality and effectiveness of supervision required improvement.

**Judgment: Substantially Compliant**
Compliance Plan

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

<table>
<thead>
<tr>
<th>Provider’s response to Report Fieldwork ID:</th>
<th>MON 0032073</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Service:</td>
<td>Orchard Fostering Service</td>
</tr>
<tr>
<td>Date of inspection:</td>
<td>29\textsuperscript{th} 30\textsuperscript{th} 31\textsuperscript{st} March / 7\textsuperscript{th} April 2021</td>
</tr>
<tr>
<td>Date of response:</td>
<td>3.6.21</td>
</tr>
</tbody>
</table>
These requirements set out the actions that should be taken to meet the identified child care regulations and *National Standards for Foster Care*.

**Standard 17: Reviews**

**Non-Compliant Moderate**
The provider is failing to meet the National Standards in the following respect:

Reviews of foster carers were not taking place as required, in line with national standards, for all carers.

There were significant delays in progressing reviews which had been commenced, resulting in out of date information being considered as part of some foster care reviews.

**Action required:**

Under **Standard 17** you are required to ensure that:
Children and young people in foster care are helped to develop the skills, knowledge and competence necessary for adult living. They are given support and guidance to help them attain independence on leaving care.

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

**Provider Response:**

1) Orchard Fostering has endeavoured to complete any delayed submissions in Foster Care Reviews to the relevant Foster Care Committee. 95.23% of delayed submissions identified by Orchard Fostering during the inspection period, have been submitted to the relevant foster care committees. 1 foster care review remains outstanding due to exceptional circumstances with a completion and submission date for the end of August 2021.

**Action by:** PSW and SWTL’s  
**Timeline:** 25th May 2021 and August 2021

2) The Managing Director and Principal Social Worker for support undertook a full review of Orchard Fostering’s current foster carer review system. The purpose of which is to determine status of foster care reviews for all carers and assist in developing a process that ensures all timelines are achieved.

**Action by:** PSW and Managing Director  
**Timeline:** May 2021

3) The Principal Social Worker, Support Team Leaders and Quality Manager will revise Orchard Fostering’s foster care review policy. The purpose of which is to ensure that policy and process reflect that all reviews of foster carers are taking place as required, in line with national standards, for all carers and assign responsibility for the completion of tasks to relevant team members.

**Action by:** PSW, SWTL’s and Quality Manager  
**Timeline:** June 2021
4) A dedicated administrative post will be created and recruited for to ensure sufficient resources are available to the maintenance of the new foster carer review tracking system spreadsheet.

**Action by:** Managing Director and PSW  
**Timeline:** July 2021

5) A foster care review tracking system will be devised to incorporate foster care review process, timeframes, role responsibility and escalation processing. The purpose of which is to ensure that policy and process reflect that all reviews of foster carers are taking place as required, in line with national standards, for all carers.

**Action by:** PSW, SWTL’s and Administration team  
**Timeline:** July 2021

6) Workshops will be provided to all staff on the process of foster care reviews, ensuring that all staff are familiar with the foster carer review policy, their roles and responsibilities within the foster carer review process.

**Action by:** PSW and SWTL’s  
**Timeline:** July 2021

7) The Principal Social Worker (support) will complete a monthly report on the foster care review progression and process, following consultation with the SWTL’s, and will submit to the Managing Director on a monthly basis. Foster Care Review will form part of the quality auditing system. The purpose of which is to ensure that policy and process reflect that all reviews of foster carers are taking place as required, in line with national standards, for all carers.

**Action by:** PSW and SWTL’s  
**Timeline:** Sept 2021

<table>
<thead>
<tr>
<th>Proposed timescale: Actions 1-7- Q3</th>
<th>Person responsible: Managing Director/Principal Social Workers</th>
</tr>
</thead>
</table>

**Theme 4: Leadership, governance and management**

**Standard 19: Management and monitoring of foster care agency**

**Non-compliant Moderate**
The provider is failing to meet the National Standards in the following respect:

Mechanisms in place for tracking compliance with national standards as well as organisational policy required improvements.

- Not all garda vetting was up to date as required and progress in addressing gaps was slow.
- All staff had not received supervision in line with organisational policy and not all key areas of statutory responsibility were routinely monitored.
- Not all children had up-to-date records of their care status on file.

Reviews of foster carers were not completed as required and delays in progressing reviews went unaddressed for significant periods.

Risk management systems had not identified risks in a number of key areas of compliance with national standards.

Audits of children’s files did not identify the absence of key records.

Staff absences and changes in staff were not promptly addressed to ensure the impact on services and supports were minimised.

**Action required:**

Under **Standard 19** you are required to ensure that:
Children and young people in foster care are helped to develop the skills, knowledge and competence necessary for adult living. They are given support and guidance to help them attain independence on leaving care.

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

**Provider Response:**

1) Since time of inspection all garda vetting renewals have been processed and are up to date.

**Action by:** Administration Team and Principal Social Work Group  
**Timeline:** May 2021

2) The Managing Director, Principal Social Worker and administrative team undertook a full review of Orchard Fostering’s current system for monitoring and tracking of garda vetting. A new tracking system will be devised to incorporate garda vetting process, tracking, role responsibility and escalation processing. The Principal Social Worker group will complete a monthly report on the garda vetting tracking and progression for all foster care applicants, approved foster carers, support system and staff
following consultation with the administrative team, and will submit to the Managing Director monthly. The purpose of which will be to ensure that all garda vetting is processed in a timely and efficient manner.

**Action by:** PSW and Administrative team  
**Timeline:** August 2021

3) The Principal Social Worker Group and Quality Manager will revise Orchard Fostering’s Supervision policy. The purpose of this revision is to ensure that all key statutory responsibilities are noted in supervision with staff and are routinely monitored.

**Action by:** PSW, SWTL’s and Quality Manager  
**Timeline:** July 2021

4) The Principal Social Worker Group will devise a new Orchard Fostering’s agency supervision template. The purpose of this revision is to ensure that all key statutory responsibilities are prompted for discussion within supervision with staff and are routinely monitored.

**Action by:** Managing Director and PSW  
**Timeline:** August 2021

5) Workshops will be provided to all staff that supervise staff on the process of supervision, ensuring that all staff are familiar with the supervision policy, their roles and responsibilities within the supervision process.

**Action by:** PSW and SWTL’s  
**Timeline:** Sept 2021

6) Quarterly supervision audits will take place to oversee key themes emerging within supervision sessions with all staff. The purpose of which will be to ensure compliance is occurring with all key statutory responsibilities, and to identify any trends that may require further training with staff.

**Action by:** Quality Manager, PSW group and SWTL’s  
**Timeline:** Sept 2021

7) The Managing Director, Principal Social Worker and administrative team undertook a full review of Orchard Fostering’s current system for monitoring and tracking care status (care orders/voluntary consent agreements requested and received). As a result, a new tracking system will be devised to incorporate care status process, tracking, role responsibility and escalation processing. This will be administered by the new administration support for the service.

**Action by:** Managing Director, PSW and Administrative team  
**Timeline:** July 2021

8) See above response under standard 17.
9) The Orchard Fostering agency risk register is reviewed by the senior management team twice yearly. The Orchard Fostering Board of Management review the agency risk register once a year. The Orchard Fostering agency risk register will be updated to include key areas of compliance with national standards e.g. foster care reviews and garda vetting processing, to ensure senior management and board of management oversight occurs for key areas of compliance with national standards.

**Action by:** Managing Director and PSW group  
**Timeline:** June 2021

10) To date Orchard Fostering’s auditing system has not included the presence of up-to-date care orders/voluntary consent agreements. This has now been included as part of the quarterly auditing process to ensure compliance with recording of same.

**Action by:** Quality Manager  
**Timeline:** July 2021

11) In addition to the processes in place, all staff turnover of any nature and the impact of service provision will now be reviewed at the senior management meetings to ensure that all key tasks have been assigned. The PSW for each key area will present a plan for each staff absence at this meeting going forward.

**Action by:** PSW Group  
**Timeline:** June 2021

12) The overall governance systems of the agency are being reviewed. Orchard Fostering is currently reviewing the quality role within the agency to ensure that the role brief meet the needs of the agency.

**Action by:** Managing Director  
**Timeline:** July 2021

13) The Board of Management is appointing a sub-committee with a purpose to oversee quality and compliance within the agency. This committee will be over seen by an independent person with significant experience in both quality systems and childcare services.

**Action by:** Orchard Fostering Board of Management  
**Timeline:** Sept 2021

**Proposed timescale:**

- Actions 1-9 & 11-12 -Q3
- Action 10 - Q3
- Action 13 -Q4

**Person responsible:**

- Managing Director/ Principal Social Workers
- Quality Assurance Manager
- Board of Management
Appendix 1 — Standards and regulations for statutory foster care services

<table>
<thead>
<tr>
<th>National Standards for Foster Care (April 2003)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Theme 1: Child Centred Services</strong></td>
</tr>
<tr>
<td><strong>Standard 1: Positive sense of identity</strong></td>
</tr>
<tr>
<td>Children and young people are provided with foster care services that promote a positive sense of identity for them.</td>
</tr>
<tr>
<td><strong>Standard 2: Family and friends</strong></td>
</tr>
<tr>
<td>Children and young people in foster care are encouraged and facilitated to maintain and develop family relationships and friendships.</td>
</tr>
<tr>
<td><strong>Standard 3: Children’s Rights</strong></td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td><strong>Standard 4: Valuing diversity</strong></td>
</tr>
<tr>
<td>Children and young people are provided with foster care services that take account of their age, stage of development, individual assessed needs, illness or disability, gender, family background, culture and ethnicity (including membership of the Traveller community), religion and sexual identity.</td>
</tr>
</tbody>
</table>

*Child Care (Placement of Children in Foster Care) Regulations, 1995*  
Part III Article 8 Religion

**Standard 25: Representations and complaints**  
Health boards\(^5\) 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.

\(^5\)These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla).
### Theme 2: Safe and Effective Services

#### Standard 5: The child and family social worker

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

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

*Part IV, Article 17(1) Supervision and visiting of children*

#### Standard 6: Assessment of children and young people

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.

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

*Part III, Article 6: Assessment of circumstances of child*

#### Standard 7: Care planning and review

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.

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

*Part III, Article 11: Care plans*
*Part IV, Article 18: Review of cases*
*Part IV, Article 19: Special review*

#### Standard 8: Matching carers with children and young people

Children and young people are placed with carers who are chosen for their capacity to meet the assessed needs of the children or young people.
**Standard 9: A safe and positive environment**

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

**Standard 10: Safeguarding and child protection**

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

**Standard 13: Preparation for leaving care and adult life**

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

**Standard 14a — Assessment and approval of 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\(^6\) prior to any child or young person being placed with them.

---

\(^6\) These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla).
**Standard 14b — Assessment and approval of relative foster carers**

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*.

*Child Care (Placement of Children with Relatives) Regulations, 1995*

- Part III, Article 5 Assessment of relatives
- Part III, Article 6 Emergency Placements
- Part III, Article 9 Contract

**Standard 15: Supervision and support**

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.

**Standard 16: Training**

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

**Standard 17: Reviews of foster carers**

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.

**Standard 22: Special Foster care**

Health boards7 provide for a special foster care service for children and young people with serious behavioural difficulties.

---

7 These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla).
Standard 23: The Foster Care Committee
Health boards* have foster care committees to make recommendations regarding foster care applications and to approve long-term placements. The committees contribute to the development of health boards’ policies, procedures and practice.

*Child Care (Placement of Children in Foster Care) Regulations, 1995
Part III, Article 5 (3) Assessment of foster carers

*Child Care (Placement of Children with Relatives) Regulations, 1995
Part III, Article 5 (2) Assessment of relatives

Theme 3: Health and Development

Standard 11: Health and development
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.

*Child Care (Placement of Children in Foster Care) Regulations, 1995
Part III, Article 6 Assessment of circumstances of child
Part IV, Article 16 (2)(d) Duties of foster parents

Standard 12: Education
The educational needs of children and young people in foster care are given high priority and they are encouraged to attain their full potential. Education is understood to include the development of social and life skills.
### Theme 4: Leadership, Governance and Management

#### Standard 18: Effective policies
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.

*Child Care (Placement of Children in Foster Care) Regulations, 1995*
*Part III, Article 5 (1) Assessment of foster carers*

#### Standard 19: Management and monitoring of foster care agency
Health boards* have effective structures in place for the management and monitoring of foster care services.

*Child Care (Placement of Children in Foster Care) Regulations, 1995*
*Part IV, Article 12 Maintenance of register*
*Part IV, Article 17 Supervision and visiting of children*

#### Standard 24: Placement of children through non-statutory agencies
Health boards* placing children or young people with a foster carer through a non-statutory agency are responsible for satisfying themselves that the statutory requirements are met and that the children or young people receive a high-quality service.

*Child Care (Placement of Children in Foster Care) Regulations, 1995*
*Part VI, Article 24: Arrangements with voluntary bodies and other persons*

### Theme 5: Use of Resources

#### Standard 21: Recruitment and retention of an appropriate range of foster carers
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.

---

*These services were provided by former health boards at the time the standards were produced. These services are now provided by the Child and Family Agency (Tusla).*
people in their care.

<table>
<thead>
<tr>
<th>Theme 6: Workforce</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard 20: Training and Qualifications</strong></td>
</tr>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>