

**Health Information and Quality Authority  
Regulation Directorate**

**Monitoring Inspection Report –  
Non-statutory Foster Care Services under the Child  
Care Act 1991 (as amended)**



<b>Name of Agency:</b>	Fresh Start Foster Care Service	
<b>Dates of inspection:</b>	28 February, 1 and 2 March 2017	
<b>Number of fieldwork days:</b>	3	
<b>Lead inspector:</b>	Ruadhan Hogan	
<b>Support inspector(s):</b>	Una Coloe Rachel McCarthy	Catherine Vickers Susan Geary
<b>Type of inspection:</b>	<input checked="" type="checkbox"/> <b>Announced</b> <input type="checkbox"/> <b>Unannounced</b> <input type="checkbox"/> <b>Full</b> <input checked="" type="checkbox"/> <b>Themed</b>	
<b>Inspection ID:</b>	MON-0017931	

## About monitoring

The Health Information and Quality Authority (the Authority) 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 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 services.

The Authority is authorised by the Minister for Children and Youth Affairs 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 and to report on its findings to the Minister for Children and Youth Affairs. The Authority monitors foster care services against the *National Standards for Foster Care*, published by the Department of Health and Children in 2003.

In order to promote quality and improve safety in the provision of foster care services, the Authority carries out inspections to:

- **assess** if the Child and Family Agency (the service provider) has all the elements in place to safeguard children
- **seek assurances** from service providers that they are **safeguarding children** by reducing 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 Authority's findings.

The Authority inspects services to see if the National Standards are met. Inspections can be announced or unannounced.

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

<b>Theme 1: Child-centred Services</b>	<input checked="" type="checkbox"/>
<b>Theme 2: Safe and Effective Services</b>	<input checked="" type="checkbox"/>
<b>Theme 4: Leadership, Governance and Management</b>	<input checked="" type="checkbox"/>
<b>Theme 6: Workforce</b>	<input checked="" type="checkbox"/>

### 1. Focused inspection methodology

As part of this Inspection, inspectors met with children and foster carers. Inspectors observed practices and reviewed documentation such as care plans, relevant registers, policies and procedures, foster carers files, children's files and staff files.

During the inspection, inspectors evaluated the:

- quality of care and safety of the service
- organisation and management of the foster care service
- assessment of foster carers
- safeguarding processes
- effectiveness of inter-agency and multidisciplinary work
- outcomes for children.

The key activities of this inspection involved:

- the analysis of data
- reviewing policies and procedures
- reviewing 16 children's case files
- the review of 13 foster carers' files
- meeting with seven children and six carers
- interview with the director of the company
- interview with the fostering service manager
- interview with the senior social worker
- interview with one link worker
- interview with one fostering support coordinator
- interview with the psychologist
- visiting five foster care homes.

## Acknowledgements

HIQA wishes to thank the children and carers, for the openness with which they embraced the inspection process and welcomed inspectors into their homes. Inspectors also wish to acknowledge the cooperation of the members of Fresh Start Foster Care Service with the inspection.

## **2. Profile of the service**

### **2.1 The Child and Family Agency**

Child and family services in Ireland are delivered by a single dedicated State Agency – the Child and Family Agency - overseen by the Department of Children and Youth Affairs. The Child and Family Agency Act 2013 (No. 40 of 2013) established the Child and Family Agency with effect from 1 January 2014.

The Child and Family Agency (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 with relevant Standards and regulations when providing a service on behalf of Tusla. Both services are accountable for the care and well-being of children. This inspection focuses on the specific responsibilities of the service provider under the Standards in providing quality and safe care to children.

### **2.2 The Service Provider**

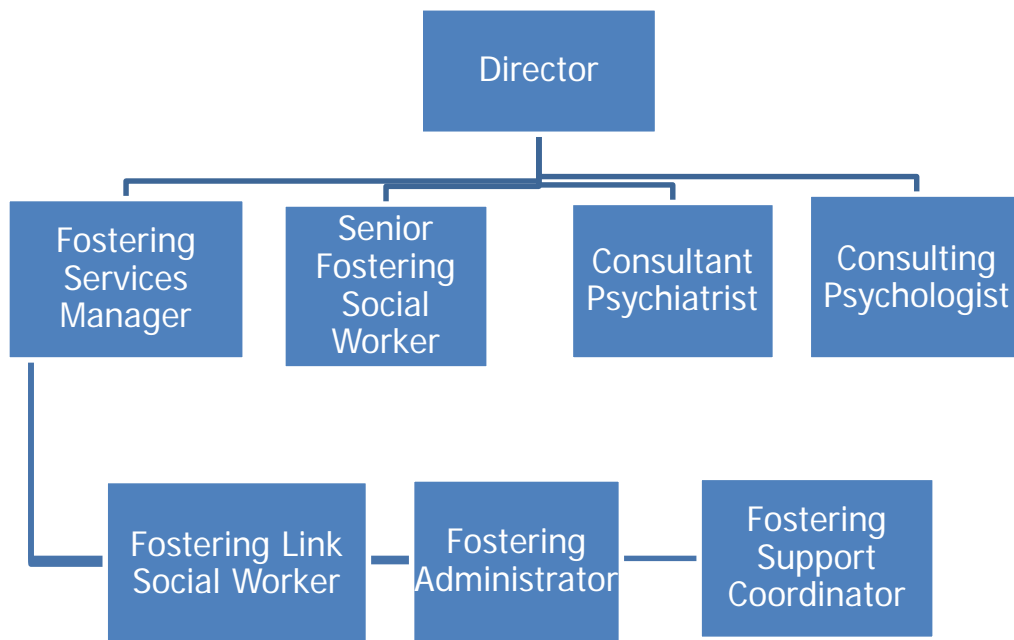
Fresh Start Foster Care Service provides respite, short-term and long term foster care placements. It has been in operation in Ireland since 2012 and mainly provides placements to the Tulsa's Dublin Mid-Leinster region.

Fresh Start Foster Care Service is part of larger privately owned care provider that provides private residential care placements through a number of residential centres. The parent company has two directors. The fostering service has been established for five years and had six assigned staff including the director of the company who is responsible for the day-to-day operation of the service, a senior social worker who works remotely and has some management responsibilities, a fostering service manager who began employment during the inspection, a full-time link worker, a full-time fostering support coordinator and a part time administration assistant. Fresh Start Foster Care Service did not have any social workers employed at the time of inspection on a sessional basis to assess applicants for fostering and present them for approval to the relevant Tusla foster care committee. However, prior to the inspection, they had contracted out the assessments of foster carers to social workers employed on a sessional basis.

Fresh Start Foster Care Service provides foster care placements for children in the care of Tusla. At the time of inspection, there were 10 children in foster care placed in eight foster care households. These households were located across Ireland in counties Laois, Wicklow, Limerick, Kildare, Meath and Dublin. Eight children placed were 14 years or under. Half of the children came from the Dublin Mid-Leinster Tusla region and the remainder came from other regions such as the West and Dublin City North.

The organisational chart in Figure 1 on the following page describes the management and team structure as provided by the service.

Figure 1: Organisational structure of the foster care agency<sup>1</sup>



<sup>1</sup> Provided by the Foster Care Agency

### 3. Summary of inspection findings

The Child and Family Agency (Tusla) has the legal responsibility to promote the welfare of children and protect those who are deemed to be at risk of harm. Children in foster care require a high-quality service which is safe and well supported by social workers. Foster carers must be able to provide children with warm and nurturing relationships in order for them to achieve positive outcomes. Services must be well governed in order to produce these outcomes consistently.

Fresh Start Foster Care Service is a 'for profit' organisation and its services are monitored by Tusla.

This report reflects the findings of a risk based focused inspection, in response to unsolicited information and progress reports from Fresh Start Foster Care Service. The service is required to address a number of findings in an action plan which is attached to this report.

In this inspection, HIQA found that of the 11 standards assessed:

- Four standards were compliant
- Seven standards were non-compliant of which two were judged as moderate non-compliances and the remaining five were judged as major non-compliances.

Fresh Start Foster Care Service was last inspected by HIQA in October 2015 when, of the 18 standards assessed, the service met four standards, and required improvement in 14 standards. During that inspection, governance was found to be poor and while there were some management systems in place they were not well developed, documented or embedded into practice. There were significant gaps in records which impeded the progress of that inspection. Some files lacked relevant information such as records of support provided and details of placements made. The limited information on files made it difficult to review children's placements with the service and to get an insight into how the system worked in practice.

Since the last inspection, the service had undergone a number of changes. The previous director of fostering left the service in April 2016 and a senior social worker was employed on a part time basis to manage the service from that time. The senior social worker's role changed from September 2016 when they worked remotely for the foster care company. Their role included: addressing the deficits in recording on the files, developing information collation systems, dealing with complaints, managing all child protection notifications, providing oversight of foster care reviews and implementing action plans to address audit findings. The director was based in the office and some of his duties included chairing team meetings and providing supervision to key staff.



Since the employment of the new senior social worker in April 2016, it was apparent to inspectors that a large amount of work had been undertaken in that time to address the deficits in their records. At the time of this inspection, inspectors were provided with more comprehensive files for review and consequently the extent and impact of the previous lack of records and the poor management systems became apparent. Following the review of more comprehensive documentation on foster carers and children's files, historical and current significant risks were identified.

The service had some systems in place to ensure children were aware of their rights. Fresh Start Foster Care Service ensured children knew about their rights and how to make a complaint. There was a system in place for the oversight of complaints. From April 2016 onwards, concerns, allegations and complaints were notified and received the appropriate response. Children said they were happy and felt safe. However, safeguarding knowledge and the application of good safeguarding practices by key staff was poor.

Fresh Start Foster Care Services did not have a safe and effective matching process. There was no matching process for children who went on respite to other Fresh Start foster carers.

The systems for assessing prospective foster carers had significant deficits. When Fresh Start was funded by Tusla to carry out assessments of foster carers on behalf of Tusla, inspectors found there were significant deficits in the quality and oversight of these assessments. In addition some independent social workers who were recruited to carry out the assessments were inexperienced and while they had An Garda Síochána (Police) vetting, they did not have retrospective police checks for when they had previously lived in other jurisdictions.

All foster carers who had children placed with them were supervised and supported by a professionally qualified social worker (known as the link worker). Foster carers were offered training that enabled them to provide care to children with complex needs. Foster carers told inspectors that they were very happy with the support they received from their link worker. However, the supervision of foster carers by Fresh Start Foster Care Service required improvement to ensure that issues and concerns were addressed promptly with foster carers.

The system to carry out foster care reviews in Fresh Start Foster Care Service was not well developed and as a result some reviews were not carried out in a comprehensive manner and were overdue.

Fresh Start Foster Care Service had a new management structure in place. However, clear lines of authority and accountability had not yet been fully established. Some systems of governance

within the service had improved since the last inspection. Auditing, risk management and notification systems had been developed and implemented. However, there were no reporting systems in place to provide the director with assurance that the service was effective or safe.

The foster care service did not have consistent staffing in place over the 12 months prior to inspection and there had been a lot of instability as a result. Key staff in the foster care company did not demonstrate the necessary competencies to deliver a safe service. The service did not have appropriate arrangements in place to ensure staff received good quality supervision.

Inspectors escalated a number of issues to the company director prior to the end of the inspection. The assurances sought included the requirements to:

- complete an audit of respite arrangements in the service,
- ensure key staff in the service receive more frequent supervision, support and guidance and greater oversight to address the deficiencies in competencies of safeguarding, completing relevant documentation and addressing practice issues with foster carers,
- obtain An Garda Síochána (police) vetting for relatives of foster carers who were providing regular respite for a child in care,
- complete a Foster Care review as a matter of urgency,
- undertake a review of all independent Social Worker fostering assessments undertaken by Fresh Start Foster Care Service and to report any deficiencies to the relevant foster care committees.

At the time of inspection, the service was not taking further admissions and Tusla confirmed that further requests for placements would not be made with the service until assurances that the deficiencies in the service were met.

Prior to the publication of this report, the director of Fresh Start Foster Care Service informed HIOA that they intended to close the foster care service, due to ongoing difficulties in relation to retention and recruitment of staff.

#### 4. 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 Standards were met as follows:

We will judge a provider to be **compliant**, **substantially compliant** or **non-compliant** with the regulations and or 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.

National Standards for Foster Care (April 2003)	Judgment
<b>Theme 1: Child Centred Services</b>	
<b>Standard 3:</b> Children's rights	<b>Compliant</b>
<b>Standard 25:</b> Representations and complaints	<b>Compliant</b>
<b>Theme 2: Safe and Effective Services</b>	
<b>Standard 8:</b> Matching carers with children and young people	<b>Major non-compliance</b>
<b>Standard 9:</b> A safe and positive environment	<b>Compliant</b>
<b>Standard 10:</b> Safeguarding and child protection	<b>Major non-compliance</b>
<b>Standard 14:</b> Assessment and approval of foster carers	<b>Major non-compliance</b>
<b>Standard 15:</b> Supervision and support	<b>Moderate non-compliance</b>

<b>Standard 16:</b> Training	<b>Substantially Compliant</b>
<b>Standard 17:</b> Reviews of foster carers	<b>Moderate non-compliance</b>
<b>Theme 4: Leadership, Governance &amp; Management</b>	
<b>Standard 19:</b> Management and monitoring of foster care agency	<b>Major non-compliance</b>
<b>Theme 6: Use of Information</b>	
<b>Standard 20:</b> Training and Qualifications	<b>Major non-compliance</b>

## 5. Findings and judgments

## **Theme 1: Child Centred Services**

Services for children are centred on the individual child and his/her care and support needs. Child-centred services provide the right support at the right time to enable children to lead their lives in as fulfilling a way as possible. A child-centred approach to service provision is one where services are planned and delivered with the active involvement and participation of the children who use services.

## **Standard 3: Children's rights**

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.

### **Summary of inspection findings under Standard 3**

Fresh Start Foster Care Service had systems in place to inform children of their rights. A review of files showed that children were given a welcome booklet. This booklet was written in a child friendly format and gave information on the rights children have while in foster care and how children can have access to their information. Inspectors spoke with children who confirmed they were given the booklet and were spoken with about their rights by Fresh Start Foster Care Services staff. Some children spoken with by inspectors said they knew about their rights while others said they were not sure.

The link social worker recorded visits to foster carers which showed engagement between the link worker and children. These visits were recorded on a template and covered areas such as respect, dignity and choice for children. Inspectors reviewed a sample of these and found they were good quality and were signed by the senior social worker. In this way, there were systems in place to ensure monitoring of children's rights to dignity, respect, privacy and confidentiality were respected and that children could exercise choice.

Children were given a child friendly version of the complaints procedure in the welcome booklet. The fostering supports coordinator, who was the children's complaints officer, met with children to discuss any complaints they had. If the complaint was serious, it was forwarded to the senior social worker or the company director for follow up. The service also

operated a red flag system where stamped addressed envelopes were given to children so they could fill out a complaint form and send it the company director or the senior social worker. Children told inspectors that they could go to their foster carers, social workers and to the link worker if they wanted to make a complaint.

**Judgment: Compliant**

## **Standard 25: Representations and complaints**

Health boards have policies and procedures designed to ensure that children and young people, their families, foster carers and others with a bona fide interest in their welfare can make effective representations, including complaints, about any aspect of the fostering service, whether provided directly by a health board or by a non-statutory agency.

### **Summary of inspection findings under Standard 25**

The service had systems in place for the management of complaints. Fresh Start Foster Care Service had a policy for the management of complaints that was in line with the Standards. Children could make a complaint to the fostering support coordinator who subsequently forwarded it to the senior social worker or the company director. Complaints from others including foster carers and other professionals could be made directly to the senior social worker or the company director.

Information returned to HIQA reported that in the 12 months prior to the inspection, seven complaints that invoked the formal complaints procedure were made, with a further 16 expressions of dissatisfaction that were resolved informally. Three of the expressions of dissatisfaction were made by children.

Complaints that were made were appropriately managed by the service. Inspectors found that complaints were made by a range of individuals including: prospective foster carers whose assessment process had not progressed, Tusla social work team leaders, current foster carers and children. A sample of these complaints were reviewed. Records showed that the service acknowledged receipt of the complaint, made contact with the complainant and made efforts to resolve the particular issue. The senior social worker maintained a complaints log to oversee the progress of complaints and whether they had been resolved or not.

**Judgment: Compliant**

## **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 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.

### **Summary of inspection findings under Standard 8**

Inspectors found that the system for matching children with foster carers was not safe including the system for respite. Following a Tusla monitoring inspection in September 2016 Fresh Start Foster Care Service had temporarily ceased admitting new children into their service. Consequently, inspectors were not able to review the process by which children were suitable matched with foster carers as implemented by the current management since that date.

At the time of the last HIQA inspection in October 2015, the quality of the matching process was varied and recording of the process was poor. The matching policy was not being implemented and there was no evidence that a matching process occurred or that it was based on the assessed needs of the child. After the service underwent a change in management in April 2016, a senior social worker was employed three days per week and she oversaw new placements. From April until September 2016, four placements had been made with the service. One of these placements had been made on the days when the senior social worker was working and inspectors were assured that an appropriate matching process was followed. During these other two days, matching in relation to the other three placements was undertaken by Fresh Start Foster Care Service staff who were not qualified or experienced to undertake that role. Inspectors reviewed foster carers and children's files and found that information used to inform matching was not adequate. In relation to children in long term placements, records relating to the matching process were not detailed and did not adequately outline how a child's needs would be met by a foster carer.

Fresh Start Foster Care Service did not provide adequate oversight of respite arrangements as respite was not coordinated or managed effectively by staff. Inspectors interviewed the senior social worker and the new fostering service manager regarding the system for respite and



respite arrangements. They acknowledged that there were significant gaps in the system; that there was no matching process for respite, no notification system, and key information such as medical needs and information on medications were not routinely passed to carers providing respite care. This meant that foster carers providing children with respite stays did not have essential information to inform them about a child's needs. A Tusla social worker for a child in a Fresh Start placement told inspectors that they were not consulted before a child was placed for respite care with a foster carer.

In the absence of a defined system, foster carers had undertaken to organise respite themselves. One Fresh Start foster carer who had a child placed with them on a long term basis, also provided numerous respite placements alongside that child. Fresh Start management told inspectors that there were 63 respite episodes of other children staying at that foster carer's home. The child's social worker said she was not always informed of these respite arrangements before they were arranged nor had she been informed of any potential risks. During interviews with inspectors, the director of the company acknowledged that in the recent past, foster carers had been organising respite stays among themselves. The director said that this practice had come to an end and all respite was subsequently coordinated through Fresh Start management.

Inspectors reviewed the respite log and saw that some children who went for respite care with particular carers subsequently moved to that carer on a long-term basis. These carers had provided respite to the children prior to their long term move and therefore the children knew the carers and their home before moving which was in the child's interest.

Inspectors saw examples where children, who initially went for respite with a foster carer, were then placed with that foster carer on a long term basis. In two such circumstances, children experienced instability as they had a number of these type of long term placement changes within the service. One child had been moved to four different carers within the service over an 18 month period following respite stays with those carers. Another child was found to have had at least two full time moves to foster carers following respite stays with those carers.

These issues in relation to respite were escalated to the director of Fresh Start Foster Care Service for immediate action. In particular, HIQA sought assurances that a complete audit of respite arrangements would be completed to include the suitability of the match, impact on other children in the household and that all relevant people were notified.

**Judgment: Major non-compliance**

### **Standard 9: A safe and positive environment**

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

#### **Summary of inspection findings under Standard 9**

At the time of inspection, the service oversaw eight foster care households who provided care to 10 children. There were seven foster care households who did not have children placed with them at the time of inspection. Inspectors visited five foster carer households who had children placed with them and saw they were homely and warm. Homes were large and children could relax in a calm atmosphere. In two of the foster care homes, children were doing their homework when inspectors arrived and in another home, a child was helping the foster carer chop vegetables as part of dinner preparation. Interactions were comfortable and showed affection between foster carers and children. Inspectors spoke with children who said they were happy and felt safe with the foster carers.

Children told inspectors that they were encouraged to try new activities, expand their interests and social networks and to develop confidence. For example, during a visit by an inspector, one child was getting ready to go a speech and drama activity. Children told inspectors that they had the opportunity to get involved in activities with local sports and community organisations and swimming clubs.

Fresh Start Foster Care Service ensured that the link worker completed regular and comprehensive health and safety checks in foster carers homes which was confirmed by the foster carers.

**Judgment: Compliant**

## **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**

At the time of inspection, Fresh Start Foster Care Service had systems in place to ensure that concerns, allegations and complaints about foster carers were categorised correctly and received the appropriate response. However, safeguarding knowledge and the application of good safeguarding practices by key staff was poor.

On the previous HIQA inspection in October 2015 the measures in place to safeguard and protect children from abuse required improvement as inspectors found that not all child protection referrals had been appropriately notified to Tusla nor was there a record of the outcome of the referral. Since April 2016, when Fresh Start employed a new manager, there had been an improvement in how child protection referrals were identified, categorised and notified in line with Children First: National Guidance for the Protection and Welfare of Children (2011).

Information sent by Fresh Start Foster Care Service to HIQA reported that in the 12 months prior to the inspection there had been nine child protection concerns with three of these reported against foster carers. At the time of inspection, the senior social worker was the designated person for child protection in the service. She maintained oversight of child protection allegations and complaints. Inspectors reviewed all known allegations against foster carers over the past 12 months.

In relation to allegations that were made after April 2016, inspectors found they were promptly followed up and appropriate action was taken by Fresh Start Foster Care Service. This included not placing further children with a family until an investigation had been completed and the outcome communicated to the relevant foster care committee (FCC). In relation to two allegations that were made against foster carers prior to April 2016, inspectors were not assured that relevant persons had been notified and appropriate actions taken. Following the inspection, HIQA escalated these allegations to the director of Fresh Start to ensure Tusla had been notified and that appropriate action was taken.

Safeguarding knowledge and application of good safeguarding practices by key staff in Fresh Start Foster Care Service was poor and led to some children being placed at risk of harm. The service had some safeguarding measures in place. For example, foster carers who had children placed with them had allocated link workers that visited households regularly. Records showed

that foster carers had completed training in Children First (2011) and safe care. Fresh Start Foster Care Service staff also met with children to talk about the placement. In addition foster carers and children told inspectors that staff had a good relationship with children and they could talk to staff if they needed to.

However, a review of files showed poor safeguarding practice across different areas. This included the lack of good quality, safe care plans for both foster carers' birth children and the children in care. On one occasion, a child, who was to have supervised access only, with their parent, had been alone in the care of a parent during a visit facilitated by Fresh Start staff. Fresh Start Foster Care Service had not identified the need for An Garda Síochána vetting for relatives of foster carers who were providing regular respite for a child in care. HIQA escalated this issue to the director of Fresh Start Foster Care Service to ensure Garda vetting is completed as soon as possible.

Inspectors interviewed Fresh Start staff and were not assured that all staff had the required experience or that they demonstrated the necessary knowledge of safeguarding principles. This issue was also escalated to the director of Fresh Start Foster Care Service for immediate action. In particular HIQA sought assurances that the key Fresh Start Foster Care Service staff would receive more frequent supervision, support and guidance and that there would be greater oversight to address the deficiencies in practice.

Information returned by Fresh Start Foster Care Service to HIQA reported that in the 12 months prior to the inspection there had been no children reported as missing from care. Foster carers told inspectors that they would notify their link worker or the Fresh Start Foster Care Service 'out of hours' service if a child was to go missing from care.

The service had an up-to-date policy on whistleblowing. Staff interviewed as part of the inspection told inspectors of appropriate people external to Fresh Start Foster Care Service to whom they would make a protected disclosure, if necessary which was in line with the policy on whistleblowing.

### **Judgment: Major non-compliance**

#### **Standard 14: 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<sup>3</sup> prior to any child or young person being placed with them.



## Summary of inspection findings under Standard 14

Fresh Start's system for assessing prospective foster carers had significant deficits. When Fresh Start was funded by Tusla to carry out assessments of foster carers on behalf of Tusla, inspectors found there were significant deficits with the quality and oversight of assessments. Some independent social workers who were recruited to carry out the assessments were inexperienced and while records showed Garda vetting had been completed, their records did not show retrospective police checks had been completed for when they previously lived in other jurisdictions.

Fresh Start Foster Care Service did not have all the necessary up-to-date information for foster care households to ensure children could be appropriately placed. Information returned by Fresh Start Foster Care Service to HIQA reported that, at the time of inspection, the service had 15 foster care households. Of these 15 households, seven had transferred to the service from Tusla or another private foster care service. Since the last HIQA inspection in October 2015, information had been given to HIQA that the full fostering file, including the assessment file, had not been forwarded to the Fresh Start Foster Care Service when each of the individual households transferred over to service. This was not in line with the national policy and guidance on foster care committees which meant that Fresh Start had placed children in households where they did not have the full information regarding the fostering history of foster carers. HIQA escalated these concerns to the director of Fresh Start in July 2016 and a process began, at that time, to initiate the transfer of these files. Fresh Start Foster Care Service reported significant delays with this process over the next seven months for a variety of reasons. At the time of this inspection, five of the files had been sent to Fresh Start Foster Care Service with the remaining two due to be sent shortly after the inspection fieldwork had finished. Of the files that were received, records showed that the assessment portion of four of these files and one full file had been reviewed by the senior social worker.

Fresh Start Foster Care Service did not have an effective system for carrying out fostering assessments. Of the 15 foster care households in the service, eight had been assessed by Fresh Start Foster Care Service. At the time of the inspection, Fresh Start was not undertaking any new assessments of foster carers. Where foster carer re-assessments were requested following a change in circumstances, this was undertaken by Fresh Start Foster Care Service staff. However, inspectors were not assured that Fresh Start staff had the necessary experience or skills to carry out this assessment. Following the inspection, a new fostering service manager, with the relevant experience, was due to assume responsibility for supervising this assessment.

Inspectors found that the quality of some fostering assessments and the manner in which they were carried out, by Fresh Start on behalf of Tusla, was poor. The management at Fresh Start told inspectors that since they were established, Fresh Start was funded by Tusla to undertake fostering assessments by some Tusla areas. Fresh Start Foster Care Service then contracted independent social workers to carry out these assessments. In total, Tusla funded 27 fostering assessments of which, 24 were completed. A sample of the available assessments, completed by independent social workers for Fresh Start Foster Care Service on behalf of Tusla, were reviewed by inspectors.

Significant issues were found upon review of these assessments. For example, a review of one assessment found there was insufficient information on the prospective carers prior experience of childminding. This and other assessments had been deferred for approval by the respective Tusla foster care committee as there was insufficient analysis of the history and circumstances of the foster care applicants, including previous allegations. Inspectors found that a complaint about the assessment process, made by foster carers, was passed to the previous director of Fresh Start Foster Care Service by the chair of the FCC. Records did not show that the complaint had been addressed at that time. At the time of this inspection, the complaint was in the process of being addressed by the senior social worker.

Oversight of this assessment process and recording of supervision of independent assessing social workers was also very poor. Inspectors reviewed a sample of the personal files of independent social workers, contracted by Fresh Start Foster Care Service to undertake these assessments. In some circumstances, some independent assessing social workers were recruited without any prior experience of child protection or fostering. While records showed Garda vetting had been completed, their personal files did not contain retrospective police checks from when they previously lived in other jurisdictions. Records showed that inexperienced independent assessing social workers did not receive adequate guidance to undertake fostering assessments or supervision while they were undertaking the assessments.

The issues in relation to the 24 completed independent social worker fostering assessments were escalated to the director of Fresh Start Foster Care Service to undertake a review of these assessments and report any deficiencies to the relevant Tusla foster care committee.

**Judgment: Major non-compliance**

## **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.

### **Summary of inspection findings under Standard 15**

All foster carers who had children placed with them were supervised and supported by a professionally qualified social worker (known as the link worker). Foster carers told inspectors that they were very happy with the support they received from their link worker. Foster carers' files were reviewed and records showed that visits from link workers happened regularly, at a minimum of six or seven times per year. Visits were recorded on a template which comprehensively addressed the support aspects of the link worker visit. The quality of this recording was very good and inspectors found examples of good support provided to foster carers and to birth children of foster carers. A review of files showed that discussions with foster carers were child centred and focused on the needs of the children.

The service had a small number of foster carers that lived across the country from Waterford, Carlow, Laois, Meath and Dublin. The link worker had a case load of 11 families across a large geographical area which involved a lot of travel. They told inspectors that fulfilling the requirements of the job was possible with planning. If a crisis were to arise, then it became less manageable. The new fostering service manager acknowledged this during interview with inspectors and said she would review the link worker's workload.

Ancillary supports were in place for foster carers through the provision of a fostering support coordinator. He did not have a dedicated case load, however, he did fulfil a number of support tasks. These included supporting a foster carer to facilitate contact, which meant bringing children to meet members of their family and back to the foster carer's home. In some instances, he supervised access on behalf of Tusla. He worked directly with children in care and birth children to stabilise placements and linked in with foster carers who did not have current placements. The service had a 24 hour 'out of hours' service which was operated by the fostering support coordinator and inspectors were informed of plans to formalise the hand-over arrangements between management and the out-of-hours staff at the beginning of each

working day. Overall, foster carers told inspectors that they were very happy with the support service provided by Fresh Start Foster Care Service.

Specialist supports for foster carers and children in care were resourced by Fresh Start Foster Care Service and were in the process of development. The service employed a counselling psychologist and consultant psychiatrist for both Fresh Start's residential service and foster care service. At the time of inspection, the psychology service was in the process of being developed within the foster care service. A review of children's files showed that meetings were held between link workers, counselling psychologist and consultant psychiatrist. However, there were no records of what was discussed or recommended in relation to these meetings.

The supervision of foster carers by Fresh Start Foster Care Service required improvement to ensure that issues and concerns were addressed promptly with foster carers. The culture of the fostering service in the past was such that boundaries between some Fresh Start staff and foster carers were not clearly marked and this had an impact on the ability of staff to objectively challenge foster carers about the care they were providing to children. The management at Fresh Start Foster Care Service told inspectors that in the past, staff did not receive the required guidance to support good practice. As a result the competencies of staff to respectfully challenge foster carers had not been developed. Records showed that these issues were discussed during case supervision with the relevant worker and their line manager. A review of foster carers' files found that recommendations from management to address specific concerns with foster carers had not been fully followed through by key staff. Inspectors escalated these concerns to the director of Fresh Start Foster Care Service who said that the frequency of case supervision of the relevant staff would be increased to ensure matters were being addressed with foster carers in a timely manner.

**Judgment: Moderate non-compliance**



## **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**

Fresh Start Foster Care Service had systems in place to analyse the training needs of foster carers and provided a programme of training based on this analysis. Foster carers were offered training that enabled them to provide care to children with complex needs. However, Fresh Start Foster Care Service did not have a system to ensure foster carers attendance at training.

New applicants for foster care assessment were provided with foundational training before their approval as foster carers. Management at Fresh Start Foster Care Service told inspectors that this was a requirement for the fostering application to proceed. This foster care training covered topics such as safe care, child development and attachment, and common behaviours of children in care.

From a review of foster carers files, records showed that an individual training needs analysis was completed by the foster carers in conjunction with their link worker. This analysed the skills and knowledge of foster carers including current skill level and desired level. Recommendations for training were made following this analysis. For example, one foster carer was recommended specific training on a specific developmental disorder.

Foster carers were sent dates of specific training that had been arranged in conjunction with an independent foster care association. This training covered areas such as safe care, safeguarding and dealing with allegations. Fresh Start Foster Care Service also facilitated their own training programmes that covered areas of children missing from care and Children First: National Guidance for the Protection and Welfare of Children (2011).

The service maintained an individual record of training that foster carers attended and did not attend. Foster carers told inspectors that they were informed about training that became available and were encouraged to attend. However, Fresh Start Foster Care Service did not have a system to ensure foster carers attended training which meant that the competencies of all foster carers in the service were not consistently developed through training.

**Judgment: Substantially 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**

Fresh Start Foster Care Service did not have a well developed system to carry out reviews of foster carers. Foster carer reviews were completed by the allocated link worker with oversight by a manager. Once completed, they were sent to the relevant foster care committee in the Tusla geographical area where the foster carer lived. When the foster care committee reviewed the report submitted by Fresh Start Foster Care Service, they made a recommendation to approve foster carers to continue fostering or not. According to the Standards, the first review should take place one year after the first placement and subsequent reviews should take place at three-yearly intervals. Information returned by Fresh Start to HIQA reported that in the 12 months prior to the inspection there had been eight foster carer reviews completed.

Inspectors found the quality of foster care reviews completed by the Service was varied and frequently did not contain all necessary information on foster carers. A sample of six files were looked at by inspectors for foster carers. One had not been completed. Two reviews had sufficient information to inform the foster care committee of the foster carers' circumstances. The remaining three reviews did not have the required information to enable an appropriate decision to be made. For example, one review did not have all the necessary information referenced including information about all complaints made against the foster carers by a child. Another review was returned by the respective foster care committee to Fresh Start Foster Care Service with a significant amount of questions. The third review was presented to the foster care committee and was returned due to insufficient information in the report. These foster carers had moved to a different Tusla area and there was confusion over which foster care committee provided oversight. The circumstances around the latter review were escalated to the director of Fresh Start Foster Care Service for a review to be urgently completed and clarity sought regarding their current status with the relevant committee.

In addition, three of the six files did not have supporting documentation for foster carers' reviews such as health and safety reports, medical reports, Garda vetting and reports from the respective Tusla Social Worker for the child were not always completed and submitted with the foster care review report to the FCC.

Information returned by Fresh Start Foster Care Service to HIQA reported that in the 12 months prior to the inspection there had been three child protection and welfare concerns made against two foster carers. The management at Fresh Start Foster Care Service told

inspectors they were waiting for the conclusion of investigations against foster carers before beginning the foster carer reviews. This meant that there may be a significant delay in providing feedback to the FCC on the outcome of the allegation. Following the inspection, HIQA escalated one of these reviews to the director of Fresh Start Foster Care Service for a review to be urgently completed.

**Judgment: Moderate non-compliance**

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

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

#### **Summary of inspection findings under Standard 19**

Fresh Start Foster Care Service had a new management structure in place and clear lines of authority and accountability had not yet been fully established. Some systems for governance within the service had improved since the last inspection. Auditing, risk management and notification systems had been developed and implemented. However, there were no formal reporting systems in place provide the director with assurance that the service was effective or safe.

At the time of the last HIQA inspection of Fresh Start Foster Care Service in October 2015, inspectors found that: governance was weak and management systems required development. It was not clear how staff were held to account. Paperwork was poor and information systems required improvement. There was a lack of resources which resulted in the service being provided in an ad hoc manner rather than in a planned and cohesive way. The previous director of fostering left the service in April 2016 and a senior social worker was employed on a part time basis to manage the service from that time. The senior social worker's role changed from September 2016 when they worked remotely for the foster care company. Their role included: addressing the deficits in recording on the files, developing information collation systems, dealing with complaints, managing all child protection notifications, providing oversight of foster care reviews and implementing action plans to address audit findings. The director was based in the office and some of his duties included chairing team meetings and providing supervision to key staff. It was apparent to inspectors that a large amount of work

had been undertaken in that time to address the deficit in records and implement systems. At the time of this inspection, inspectors were provided with more comprehensive files and information and consequently the extent and impact of the previous lack of records and the poor management systems became apparent.

At the time of this inspection, the effectiveness of the new structure was yet to be established along with lines of authority and accountability. The day-to-day operation of the service was managed by the fostering service manager. The fostering service manager was suitably qualified and had relevant management experience. She began working with the service at the time of the inspection and was interviewed by inspectors three weeks after taking up the position. During this interview, she demonstrated knowledge of the service. Her role was to oversee all aspects of the service including foster carers, children, staff and systems within the service. She acknowledged the deficits of the service and the challenges associated with her role to address them. She reported to the company director and said there was an expectation for her to report all key events such as child protection, safeguarding, foster care assessments and reviews along with any identified problems at an early stage. As she was so new to the role, inspectors were not able to verify her oversight of the service or the effectiveness of the reporting arrangements.

Staff interviewed as part of the inspection made themselves readily available to inspectors and were open and transparent. Key staff were aware of their individual roles.

Systems for recording had improved since the last inspection. There was evidence of management oversight by the senior social worker of the majority of documents such as link worker visits to foster carers from April 2016 until the time of inspection. Filing systems were organised and inspectors found it relatively easy to retrieve and review information on particular files.

The notification systems had been developed. Foster carers were required to notify the link workers, fostering support coordinator or the out-of-hours service (where applicable) when an incident occurred. The link worker and fostering support coordinator were expected to promptly notify the fostering service manager. Depending on the severity of the incident, she then updated the relevant Tusla area.

Serious and adverse incidents were appropriately managed. Information returned to HIQA reported that in the 12 months prior to the inspection there had been 13 serious and adverse incidents. These covered a range of type of incidents and included children involved in particular incidents, complaints and allegations.

Since April 2016, auditing within the service was of good quality and contributed to improvements and learning within the service. During the period from April 2016 until the time of inspection, the senior social worker had oversight of various audits of different aspects of the service, for example, fostering assessments and recording requirements on foster carers and children's files. Audits were made available during the inspection and it was clear these had contributed to addressing the deficits in records. However, it was acknowledged that there was still a large amount of work to be done to ensure records were reliable.

The systems in place to recognise and assess risk required further development, as key risks in the service had not been identified. A comprehensive risk management framework had been developed after April 2016. The framework allowed for a determination of the level of risk and actions based on the level of risk. Measures were also identified to mitigate identified risks. However, it had not yet been embedded in practice. From April 2016, risks were identified by individual staff members and reported to the senior social worker who collated and assessed them and put measures in place to mitigate these risks. Management at Fresh Start Foster Care Service were familiar with the risks identified and had told inspectors of the measures they intended to take to mitigate against them. For example, the lack of adequate recording within the foster care service was identified and plans were put in place to address these deficiencies and reduce the risk. As stated, a large amount of work had been undertaken to address the deficits in recording. Other risks such as the poor oversight of the service at director level, quality of foster care reviews and the quality of foster care assessments had not been identified by the service.

The service held regular team and management meetings. Inspectors reviewed a sample of team meeting minutes. Attendance at the meetings was good. Records showed comprehensive discussion of individual issues that were relevant to the service. Actions were identified with dates for completion and people responsible. Management meetings were held for the entire organisation including the residential service. Records from these meetings did not show what discussions and actions arising were relevant to the fostering service or to the residential service. Therefore accountability and transparency on decisions taken at management level was not clear and required improvement.

The service did not have an established system in place to inform oversight of the service at director level and ensure deficits in the foster care service were being addressed. At the time of the inspection, the senior social worker had completed a large amount of work and had reported on this work through many audits and action plans. However there remained an absence of reliable information to inform safe practice decisions and plan the work of the fostering service in the best interests of both children and foster carers. This included up-to-date management reports on essential aspects of the service, including open allegations against foster carers, placements at risk of ending, foster carer reviews, Garda vetting and

respite arrangements. This significant deficit had not been comprehensively addressed since the last inspection in 2015.

The company director was interviewed as part of this inspection. At the time of this inspection the company director demonstrated to inspectors that he was now more knowledgeable about the day-to-day running of the service and he also acknowledged the deficits of the service. The director said he was copied into emails and received verbal handovers from staff who monitored the out-of-hours service. There were no formal systems in place for the director to receive management reports of the service and provide assurance that the service was effective or safe.

At the time of the inspection, the foster care service was in part financially dependent on the residential service that the company also provided. The director informed inspectors that it was his intention to adequately resource and develop the foster care service to ensure it was run safely and could function independently in the longer term.

Fresh Start Foster Care Service did not have a service level agreement with Tusla who funded the service to provide foster care placements.

### **Judgment: Major non-compliance**

#### **Theme 6: Workforce**

Each staff member has a key role to play in delivering child-centred, effective and safe services to support 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 children.

#### **Standard 20: Training and Qualifications**

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**

Fresh Start Foster Care Service is part of a larger privately owned company that also runs residential services for children. At the time of inspection, the staff complement for the foster care part of the organisation included a director of the company, a senior social worker, a fostering service manager, a link worker, a fostering service coordinator and one part time administration staff. The larger privately owned company also employed other staff that the foster care part utilised. These included a receptionist, a finance officer, a counselling psychologist and a consultant psychiatrist. The director of the company informed HIQA that the service intended to recruit another link worker to meet the needs of the foster care service.

Fresh Start Foster Care Service's full-time staff were recruited in accordance with the appropriate legislation, standards and policies. Staff files were held in the Fresh Start Foster Care Service office. Inspectors reviewed a sample of these files and found that they contained up-to-date Garda Síochána vetting, appropriate registration with the relevant registration body and signed contracts for employment.

The fostering service manager began her employment with the service during the inspection. The senior social worker who had some managerial responsibility was in the process of leaving the company. Inspectors observed an induction process which involved meetings between the director of the service, the senior social worker and the fostering service manager. From observations of this process and interviews with different managers, inspectors were assured that this induction process was comprehensive and gave an in depth overview of the service including outstanding actions to be followed up on.

The foster care service did not have consistent staffing in place over the 12 months prior to inspection and there had been a lot of instability as a result. Fresh Start Foster Care Service had undergone significant change over the 12 months prior to inspection.

The previous director of fostering left the service in April 2016 and a senior social worker was employed on a part time basis to manage the service from that time. The senior social worker's role changed from September 2016 when they worked remotely for the foster care company. Their role included: addressing the deficits in recording on the files, developing information collation systems, dealing with complaints, managing all child protection notifications, providing oversight of foster care reviews and implementing action plans to address audit findings. The director was based in the office and some of his duties included chairing team meetings and providing supervision to key staff. The director of the company was not suitably qualified nor did he have the necessary experience to oversee a foster care service. The foster care company had been actively recruiting for a manager since that time, and, as stated, a suitable applicant was subsequently employed, during the inspection. She was suitably qualified and had experience of starting and managing fostering services for a number of years prior to joining the service.



Key staff in the foster care company did not demonstrate the necessary competencies to deliver a safe service. During interviews with inspectors, they said that supervision was poor which meant that opportunities for guidance from management were also limited. Due to the significant organisational changes and lack of a full-time manager, key staff did not have the opportunity for appropriate development within their respective roles. Management at Fresh Start Foster Care Service acknowledged that the competencies of staff required improvement including the appropriate supervision of foster carers and the completion of good quality reports.

The service did not have appropriate arrangements in place to ensure staff received good quality and regular supervision. Records showed that staff had not received regular supervision over the 12 months prior to inspection. At the time of inspection, the director of the company managed and supervised the link social worker, fostering services coordinator and the psychologist. Inspectors reviewed a sample of these supervision records. The quality varied from adequate to poor and did not show that supervision was comprehensive. Actions on these records, two of which were recorded on different formats, including one on a blank page, were not comprehensively recorded. The sessions did show that staff were held to account in some areas. However, other areas where there were deficiencies were not addressed. In addition, records did not show that training and continuous professional development were addressed.

Inspectors escalated the lack of staff competencies to the director of Fresh Start Foster Care Service who said that more frequent supervision and oversight would be provided to staff to ensure there was appropriate professional development and that the service was safely delivered.

The new fostering service manager subsequently assumed responsibility for the supervision of key staff. During interviews with inspectors, she described her plan to oversee and appropriately supervise staff. This included reviewing the workload and practice of staff to ensure they had the time to undertake what was required of the role in a competent manner. She also said she planned to better utilise the resources of the foster care service such as psychology.

**Judgment: Major non-compliance**

## Appendix 1 -- Standards and Regulations for Statutory Foster Care Services

<i>National Standards for Foster Care (April 2003)</i>
<b>Theme 1: Child-centred Services</b>
<b>Standard 3: Children's Rights</b> 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.
<b>Standard 25: Representations and complaints</b> Health boards (Tusla) <sup>¥</sup> 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.

<i>National Standards for Foster Care (April 2003)</i>
<b>Theme 2: Safe and Effective Services</b>
<b>Standard 8: Matching carers with children and young people</b> 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.

<sup>¥</sup> Where reference is made to Health Boards these services are now provided by the Child and Family Agency.  
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***National Standards for Foster Care (April 2003)***

***Child Care (Placement of Children in Foster Care) Regulations, 1995***  
*Part III, Article 7: Capacity of foster parents to meet the needs of child*

***Child Care (Placement of Children with Relatives) Regulations, 1995***  
*Part III, Article 7: Assessment of circumstances of the child*

**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<sup>2</sup> prior to any child or young person being placed with them.

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

<sup>2</sup> Formally known as Health Boards at time of writing Standards, now known as The Child and Family Agency.  
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## **Theme 4: Leadership, Governance and Management**

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

Health boards (Tusla) 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*

## **Theme 6: Workforce**

### **Standard 20: Training and Qualifications**

Health boards (Tusla) ensure that the staff employed to work with children and young people, their families and foster carers are professionally qualified and suitably trained.

# Action Plan

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

<b>Provider's response to Inspection Monitoring Event No:</b>	0017931
<b>Name of Service Area:</b>	Fresh Start Foster Care Service
<b>Date of inspection:</b>	28 February, 1 and 2 March 2017
<b>Date of response:</b>	6 June 2017 (accepted response)

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

## Theme 2: Safe and Effective Services

### Standard 8

#### Major non-compliance

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

Matching in the service was undertaken by Fresh Start foster care service staff who were not qualified or experienced to undertake that role.

The information used to inform matching did not adequately describe how a child's needs would be met by a foster carer.

Fresh Start foster care services did not provide adequate oversight of respite arrangements.

Children's Social Workers were not always informed of respite arrangements before they were arranged nor had they been informed of any potential risks.

There were no systems in place to ensure foster carers had essential information to inform them about a child's needs during periods of respite.

Children experienced instability as they had numerous long term placement changes following short term stays with respite carers.

#### Action required:

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

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

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

1. The overhaul of the matching process will incorporate the following key steps:
  - a. Matching will only be undertaken by a professionally qualified Social Worker, who has the skills, knowledge and experience to undertake the task.
  - b. Revised Recruitment Strategy to ensure new incumbents will have the required experience, skill and knowledge to undertake the role into which they are appointed.
  - c. Enhanced staff supervision practice, in place since 01/03/17 to address service deficits in matching, will be incorporated into a revised Staff Supervision Policy. This will reflect the enhanced provision and management oversight of supervision and support to staff, to ensure a robust matching process is consistently applied for all new, respite and current placements.
  - d. Referral, Matching, Pre-placement Planning and Respite document templates will be revised to ensure key information, to inform the matching process and pre-placement planning, is obtained, distributed and documented.

This will facilitate consideration of the identified needs of each child being placed, that they can be met by the proposed Foster Carer and are dynamically reviewed through Foster Carer's supervision in conjunction with each child's Care Plan.

2. Revised respite practice will be formalised into the new Respite Policy & Procedures. These revisions will include:
  - a. The Fostering Service Manager will provide oversight of all respite arrangements, evidenced through completion of The Respite Monitoring Log. This will be updated weekly with Key Risk Indicators to identify trends, potential risks along with appropriate escalation procedures.
  - b. Clarity of the responsibilities, respite planning process and timeframes will ensure key stakeholders are an integral part of an enhanced respite process. This will ensure that Foster Carers have the essential information regarding the child's needs prior to respite periods, that children's Social Workers are adequately informed in a timely manner, and that no respite placements will take place unless approved in advance by the child's Social Worker, in line with their Care plan, and any potential risks will be fully assessed.
3. Revised Referrals, Matching & New Placements Policy & Procedures to be formalised and implemented to include the considerations, procedures, screening and consents required for proposed internal change of placements.
4. A review of the Register of children currently placed with Fresh Start was carried out and confirmed that none have had any internal change of long-term placement within Fresh Start, and stability of their placement is not adversely impacted on by the provision of respite.

<b>Proposed timescale:</b>	<b>Person Responsible:</b>
<ol style="list-style-type: none"> <li>1. a) 16 June 2017 b) 16 June 2017</li> <li>c) 16 June 2017 d) 28 July 2017</li> <li>2. a) 19 May 2017</li> <li>b) 10 May 2017</li> <li>3. 30 June 2017</li> <li>4. 10 May 2017</li> </ol>	<ol style="list-style-type: none"> <li>1. a) Fostering Service Manager b) Director &amp; Fostering Service Manager c) Fostering Service Manager d) Fostering Service Manager</li> <li>2. a) Fostering Service Manager &amp; Fostering Admin b) Fostering Social Worker &amp; Fostering Service Manager</li> <li>3. Fostering Service Manager &amp; Fostering Social Worker</li> <li>4. Fostering Service Manager</li> </ol>



## Standard 10

### Major non-compliance

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

Safeguarding knowledge and application of good safeguarding practices by Fresh Start Foster Care Service was poor.

Fresh Start Foster Care Service staff did not have systems in place to ensure that significant adults had up-to-date An Garda Síochána (police) vetting.

#### **Action required:**

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

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

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

1. Safeguarding knowledge and practice within the service will be promoted, in compliance with Children First National Guidance (2011), to ensure the protection and welfare of all children placed through:
  - a. Revised Recruitment Strategy to ensure new incumbents will have the required safeguarding knowledge, expertise and skills to undertake the role into which they are appointed.
  - b. Re-allocation of key responsibilities matched with safeguarding knowledge, skills and experience level documented through amended Job Descriptions.
  - c. Embed safeguarding practice into enhanced Induction, Supervision and Training of staff and Foster Carers.
  - d. Document more comprehensive discussion and planning for safe care practice through revised Safe Care Plans.
  - e. Safeguarding children during Out of Hours periods is supported through an Out of Hours Service. Oversight is now maintained through review of an Out of Hours Monitoring Log. Enhancements will include building in Key Risk Indicators to identify trends, potential risks and accompanied by appropriate escalation procedures.
  - f. Family Member Respite Policy to be written, and rolled out, to include 'Enhanced Safeguarding Procedure'.
  - g. Oversight of safeguarding practice through weekly Operations Meetings and review of the Risk Register to include dynamic monitoring of Complaints, Allegations and Disclosures, Concerns and Significant Events Logs, with Key Risk Indicators built in to identify trends, risk level, quality assurance, and accompanied by appropriate escalation procedures.
  - h. Quality Assurance Safeguarding Special Project File Review of all Child and Foster Carer's files to be completed following the successful appointment of a suitably qualified and experienced Social Worker for the project.

2. Systems and procedures have been put in place to ensure up to date Garda Vetting is obtained for all significant adults. These systems and procedures include:
  - a. Supervision of Foster Carers to dynamically identify all significant adults with whom the child has unsupervised contact, which triggers initiation of the Garda Vetting process.
  - b. Tracking of Garda Vetting applications managed through a Monitoring Log reviewed at weekly Operations Meetings. Unsupervised contact with pending applicants is suspended until receipt of Garda Vetting clearance.
  - c. Early alert to impending Garda Vetting expiry dates managed through an electronic notification system to trigger commencement of the Garda Vetting application process with sufficient timeframes.

**Proposed timescale:**

1. a) 16 June 2017  
 b) Completed 30 April 2017  
 c) 28 July 2017  
 d) 30 June 2017  
 e) 02 June 2017  
 f) 14 July 2017  
 g) 29 May 2017  
 h) 30 September 2017
2. a) 29 May 2017  
 b) 29 May 2017  
 c) 29 May 2017

**Person responsible:**

1. a) Director & Fostering Service Manager  
 b) Fostering Service Manager  
 c) Fostering Service Manager & Fostering Social Worker  
 d) Fostering Service Manager & Fostering Social Worker  
 e) Fostering Service Manager & Placement Support Officer  
 f) Fostering Service Manager & Fostering Social Worker  
 g) Fostering Service Manager  
 h) Quality Assurance Fostering Social Worker
2. a) Fostering Service Manager & Fostering Social Worker  
 b) Fostering Service Manager & Fostering Admin  
 c) Fostering Admin & Fostering Service Manager

## Standard 14

### Major non-compliance

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

Fresh Start Foster Care Service staff did not demonstrate the necessary experience or skills to carry out good quality fostering assessments.

The quality of some fostering assessments and the manner in which they were carried out, by Fresh Start Foster Care Service on behalf of TUSLA, was poor.

The oversight of the fostering assessments carried out by Fresh Start Foster Care Service on behalf of TUSLA, was poor.

The supervision of independent assessing Social Workers who carried out fostering assessments on behalf of TUSLA, was poor.

Some independent assessing Social Workers were recruited without any prior experience of Child Protection or Fostering.

Personal files of independent assessing Social Workers did not contain retrospective police checks from when they previously lived in other jurisdictions.

**Action required:**

Under **Standard 14** you are required to ensure that:

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

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

1. Fresh Start have suspended Foster Carer recruitment activity. The Fostering Service Manager will provide oversight of assessments when they have re-commenced.
2. The Fostering Service Manager, or a designated Social Work qualified Manager with the skills and experience required, will supervise all Independent Assessing Social Workers undertaking fostering assessments for Fresh Start.
3. Foster Carer recruitment activity will recommence on successful completion of:
  - a. An overhaul of the Assessment of Foster Carer's Policy, Procedures & Infrastructure.
  - b. Successful Recruitment, Garda Vetting and International Police Clearance, Induction and Training of experienced, suitably skilled and knowledgeable Independent Assessing Social Workers.
  - c. A review of Fresh Start staffing resources confirms Fresh Start has in place Independent Assessing Social Workers who have the availability to complete assessments within the required timeframe of 16 weeks, and attend supervision for the fostering assessments they are completing during the course of the assessments.

4. Special Project to Quality Assure all Form F Assessment Reports that have been completed by Fresh Start will commence to include:
  - a. Identify the scale of the Project.
  - b. Appointment into post of the Independent Social Worker recruited to complete the Quality Assurance Reviews of the Form F Assessment Reports.
  - c. Meetings with the Foster Carer Committee Chairpersons to agree Project Terms of Reference and priority order.
  - d. Commence the Quality Assurance Review of all the Form F Assessment Reports with Senior Management oversight.
  - e. Conclude the Quality Assurance Review of all the Form F Assessment Reports with Senior Management oversight.
  - f. Incorporate outcomes and lessons learned into continuous improvements of the Assessment of Foster Carers Policy, Procedures & Infrastructure.

**Proposed timescale:**

1. Completed 01 March 2017
2. 30 June 2017
3. a) 30 June 2017  
b) 30 June 2017  
c) 30 June 2017
4. a) 07 April 2017  
b) 19 June 2017  
c) 16 June 2017  
d) 19 June 2017  
e) 29 September 2017  
f) 12 October 2017

**Person responsible:**

1. Director & Fostering Service Manager
2. Fostering Service Manager
3. a) Fostering Service Manager  
b) Director, Fostering Service Manager & PA to Director  
c) Director & Fostering Service Manager
4. a) Fostering Service Manager  
b) Director & Fostering Service Manager  
c) Director & Fostering Service Manager  
d) Quality Assurance Independent Social Worker & Fostering Service Manager  
e) Quality Assurance Independent Social Worker & Fostering Service Manager  
f) Fostering Service Manager

## Standard 15

### Moderate non-compliance

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

Recording of meetings involving the specialist supports available in Fresh Start Foster Care Service did not show what was discussed or what recommendations were made.

The supervision of foster carers by Fresh Start Foster Care Service did not ensure that issues and concerns were addressed promptly with foster carers.

#### Action required:

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

Approved foster carers are supervised by a professionally qualified Social Worker. This person, known as the Link Worker, ensures that foster carers have access to the information, advice and professional support necessary to enable them to provide high quality care.

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

1. Recording of meetings will be addressed through the following procedural changes:
  - a. Fresh Start Specialist Support providers will provide written Summary Report of their meetings/consultations with Fresh Start Fostering personnel and interventions with Fresh Start Foster Carers, and placements.
  - b. Oversight of Specialist Supports Summary Reports reviewed as part of case reviews in supervision, to ensure recommendations are appropriately resourced and actioned in a timely manner.
  
2. The quality of supervision to foster carers will be enhanced through the rollout of:
  - a. Revised Supervision of Foster Carers Policy & Procedures which will set out roles and responsibilities and defined reporting, recording and escalation obligations.
  - b. Training to staff and foster carers on 'Roles, Responsibilities & Effective use of Supervision' and 'Child Protection'.
  - c. Management and quality assurance oversight through weekly Operations Meeting and supervision with staff at intervals of no less than 4 weekly, to include review of Case Notes and Foster Carers' supervision minutes.

#### Proposed timescale:

1. a) 29 May 2017 & as accessed
- b) 29 May 2017
  
2. a) 30 June 2017

#### Person responsible:

1. a) Counselling Psychologist & Consultant Psychiatrist & Fresh Start Trainers as accessed
- b) Fostering Service Manager

b) 29 May 2017 c) 29 May 2017	2. a) Fostering Service Manager b) Fostering Service Manager c) Fostering Service Manager
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## Standard 16

### Substantially compliant

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

Fresh Start Foster Care Service did not have a system to ensure foster carers attendance at training.

#### Action required:

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

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

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

1. Foster carers were consulted as a group on 26/04/17 to identify their blocks to attending training and ascertain their view as to how Fresh Start could support their attendance at training. Informed by that meeting and a review of Foster Carer's Training Attendance Records, a system to ensure Foster Carers' attendance at training will include:
  - a. Revision and distribution of Foster Carer's Agreement to ensure the requirement to attend training is made explicit to Foster Carers.
  - b. A robust 2017/2018 Training Calendar to schedule mandatory and core training.
  - c. Individualised 'Training Needs & Plan' to be incorporated into Foster Carer's Supervision Meetings as a standing agenda item, to include identification of practical support required to enable attendance at training.
2. Escalation process for Foster Carer's persistent non-attendance at training to be documented and distributed - to include escalation to concern level with recourse to Fresh Start to convene an early Foster Care Review, if identified to be at a level which might impact on their ability to safely care for children and meet the required competencies for Foster Carers.

#### Proposed timescale:

1. a) 15 June 2017  
b) 15 June 2017  
c) 29 May 2017
2. 30 June 2017

#### Person responsible:

1. a) Fostering Service Manager  
b) Fostering Service Manager  
c) Fostering Social Worker &  
Fostering Service Manager
2. Fostering Service Manager

## Standard 17

### Moderate non-compliance

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

Foster carer reviews completed by Fresh Start Foster Care Service was varied and frequently did not contain all necessary information on foster carers.

Supporting documentation for foster carers reviews were not always completed and submitted with the foster care review report to the Foster Care Committee.

#### Action required:

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

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

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

1. Training, guidance and support will be provided to all staff recruited into positions in which they will undertake Foster Carer's Reviews to ensure they have knowledge, expertise and skills to undertake comprehensive Foster Care Reviews in line with the requirements of the Foster Care Committees.
2. Complete all outstanding Reviews of Foster Carers, with thorough review of issues and concerns that have emerged since their approval or last review, with overdue Foster Carer Reviews prioritised.
3. Quality Assurance measures to be established to ensure all Foster Carer's Reviews meet the required standard and contain all the required supporting evidence and documents prior to presentation to the Foster Care Committee.
4. Complete a Quality Assurance Review of all Foster Carer Reviews undertaken by Fresh Start to date, and incorporate outcomes and lessons learned into continuous improvements and revision of the Reviews of Foster Carer's Policy, Procedures & Infrastructure.

#### Proposed timescale:

1. 30 June 2017
2. 30 July 2017
  
3. 30 June 2017
4. 14 July 2017

#### Person responsible:

1. Fostering Service Manager
2. Fostering Social Worker & Fostering Service Manager
3. Fostering Service Manager
4. Fostering Service Manager



## Theme 4: Leadership, Governance and Management

### Standard 19

#### Major non-compliance

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

Key risks in the service had not been identified.

Decisions taken at management level did not demonstrate accountability and transparency as management meetings were held for the entire organisation and did not show the discussions and actions arising that were relevant to the fostering service.

The service did not have an established system in place to ensure oversight of the service at Director level and ensure deficits in the foster care service were being addressed.

There were no reporting systems in place provide the Director with assurance that the service was effective or safe.

#### Action required:

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

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

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

1. Identification of key risks in the service have been completed through a Service Review by the Director, Senior Social Worker and the Fostering Service Manager.
2. Key risks in the service to be addressed through the write-up and execution of detailed Project Management Plans, which will include a mechanism to identify emerging risks.
3. Fostering Service Senior Management Meetings to change to stand-alone monthly meetings, separate from the wider Fresh Start Company Management Meetings. Discussions, decisions and actions arising from the meetings are clearly minuted to ensure deficits and future plans for the service are being considered and addressed, coupled with increased governance and transparency within the management of the Fostering Service.
4. Oversight and reporting at Director level has been formalised through the following changes:
  - a. Improved Reporting System to provide the Director with comprehensive Fostering Service Management Reports, with structure, to identify emerging new areas of risk in the service and action required to address these risks.
  - b. Director receives the minutes of the weekly Operations Meetings which have been put in place to enhance the Management, Monitoring and Quality Assurance Systems. Standing Agenda Items include: Allegations & Disclosures; Significant Events; Complaints; Out of Hours; Foster Care Supervision & Reviews; Garda Vetting; Placement Endings & Disruptions and Referrals.

- c. Director to continue to be notified of all new Child Protection and serious welfare concerns within 24 hours of Fostering Service Manager being notified, to agree plan to address, in order to ensure compliance with Children First (2011) and Safeguarding of all Children in Foster Care Placements.
  - d. Director to review and sign off Management Reports and Risk Register, which provides oversight of all new and currently investigated Child Protection and serious welfare concerns.
5. Risk Management framework to be further embedded into practice and reviewed for effectiveness.

**Proposed timescale:**

- 1. 29 May 2017
- 2. 30 September 2017
- 3. 30 May 2017
- 4. a) 29 May 2017  
b) 29 May 2017  
c) 29 May 2017
- 5. 30 August 2017

**Person responsible:**

- 1. Director & Fostering Service Manager & Senior Social Worker
- 2. Director & Fostering Service Manager
- 3. Director & Fostering Service Manager
- 4. a) Fostering Service Manager  
b) Fostering Service Manager  
c) Fostering Service Manager
- 5. Fostering Service Manager

**Theme 6: Workforce**

**Standard 20**

**Major non-compliance**

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

Key staff in the foster care company did not demonstrate the necessary competencies to deliver a safe service.

The service did not have appropriate arrangements in place to ensure staff received good quality supervision.

**Action required:**

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

Health boards ensure that the staff employed to work with children and young people, their families and foster carers are professionally qualified and suitably trained.

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

1. Revised Recruitment Strategy to ensure incumbents will have the required experience, skill and knowledge to deliver a safe service.
2. Re-allocation of key responsibilities matched with knowledge, skills and experience level documented through amended Job Descriptions.
3. On the job 1:1 training, has been completed with key staff to promote increased competency in recognising risk and promoting safe care to include during Out of Hours periods.
4. An experienced, full-time, office-based Fostering Service Manager has been appointed and in post since 01/03/17. Since this date staff have received external training, 1:1 on the job training, support, clear guidance, direction and significantly increased frequency of good quality supervision which has a comprehensive Agenda, which is minuted and follows the principles of effective supervision practice.
5. The enhanced staff supervision practice will be incorporated into a revised Staff Supervision Policy, to include supervision contract agreement for frequency of supervision and commitments to prioritise supervision dates.

**Proposed timescale:**

1. 16 June 2017
2. Completed 30 April 2017
3. 29 May 2017
4. 29 May 2017
5. 30 June 2017

**Person responsible:**

1. Director & Fostering Service Manager
2. Fostering Service Manager
3. Fostering Service Manager
4. Fostering Service Manager
5. Fostering Service Manager