Health Information and Quality Authority
Regulation Directorate

Monitoring Inspection Report -

Non-statutory Foster Care Services under the Child Care Act 1991 (as amended)

Name of Agency:	Care Visions Fostering Ireland	
Dates of inspection:	17 – 18 January 2018	
No. of Fieldwork days:	2 days	
Lead inspector:	Lisa Horgan	
Support inspector(s):	Ann Delany Ruadhan Hogan	
Type of inspection:	☒ **Announced** ☐ **Full**	☐ **Unannounced** ☒ **Themed**
Inspection ID:	**0020636**	

About monitoring

The purpose of monitoring is to safeguard vulnerable children of any age who are receiving foster care services. Monitoring provides assurance to the public that children are receiving a service that meets the requirements of quality Standards. This process also seeks to ensure that the wellbeing, welfare and safety of children is promoted and protected. Monitoring also has an important role in driving continuous improvement so that children have better, safer lives.

The Health Information and Quality Authority (HIQA) is authorised by the Minister for Children 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 services taking care of a child on behalf of the Child and Family Agency (Tusla) including non-statutory providers of foster care.

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

- **Assess** if the service provider has all the elements in place to safeguard children and young people and promote their well-being while placed with their service
- **Seek assurances** from service providers that they are **safeguarding children** through the mitigation of serious risks
- **Provide** service providers with the **findings** of inspections so that service providers develop action plans to implement safety and quality improvements
- **Inform** the public and **promote confidence** through the publication of the HIQA's findings.

Monitoring inspections assess continuing compliance with the regulations and Standards, can be announced or unannounced.

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

Theme 1: Child-centred Services	☐
Theme 2: Safe and Effective Services	☒
Theme 3: Health and Development	☐
Theme 4: Leadership, Governance and Management	☒
Theme 5: Use of Resources	☒
Theme 6: Workforce	☐

1. Inspection methodology

As part of this inspection, inspectors met with the relevant professionals involved in Care Visions Fostering Ireland and with foster carers. Inspectors observed practices and reviewed documentation such as case files, foster carers' assessment files, and relevant documentation relating to the areas covered by the theme.
During this inspection, the inspectors evaluated the:

- assessment of foster carers.
- safeguarding processes.
- supervision, support and training of foster carers.
- reviews of foster carers.
- management and monitoring of Care Visions Fostering Ireland.

The key activities of this inspection involved:

- the analysis of data.
- interviews with the executive chairman, chief executive officer (UK), interim managing director, interim head of service, principal social worker, team leader, one social worker and the family support worker.
- focus group with foster carers.
- three Tusla child in care social workers.
- Tusla monitoring officer and national manager, children's services regulation
- review of the relevant sections of foster carers' files as they relate to the theme.

Acknowledgements

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

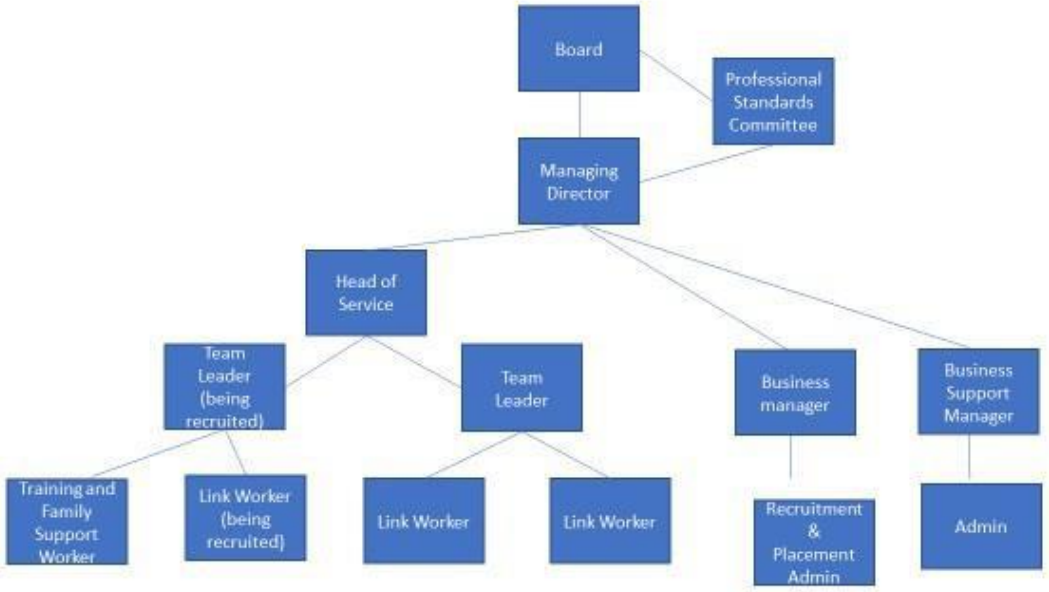
2. Profile of the foster care service

Care Visions Fostering Ireland (Care Visions) has been in operation in Ireland since 2013 and is available to provide foster care placements to a range of Tusla service areas. It provided placements for children including short term, long term, respite and general foster care placements.

The foster care service comprised of an interim managing director who was supported in his role by an interim head of service and a principal social worker. Information provided to HIQA by Care Visions outlined that the service also had a business manager, a business support manager, a training development co coordinator, a recruitment and placement administrator, an office manager, two fostering link workers, a family support worker and an administrator.

The service operated out of an office in county Kildare. At the time of the inspection, the service had 20 foster care households across the country that provided foster care placements for 22 children. Care Visions fostering service had individual agreements for each placement with Tusla but there was no service level agreement in place.

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



Summary of inspection findings

Child and family services in Ireland are delivered by a single dedicated State Agency – The Child and Family Agency (Tusla) – overseen by the Department of Children and Youth Affairs. The Child and Family Agency Act 2013 established the Child and Family Agency with effect from 1 January 2014.

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

Children's foster care services may also be provided by non-statutory foster care agencies following agreement with Tusla. Tusla retain their statutory responsibilities to children placed with these services and approve the foster carers through their foster care committees. The foster care agency is required to adhere 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.

Care Vision Fostering is a 'for profit' organisation and its services are monitored by the Child and Family Agency.

This report reflects the findings of the thematic inspection, relating to the seven standards including, safeguarding, assessment and approval, supervision and support, training, review of foster carers, management and monitoring of a foster care service, recruitment and retention which are set out in Section 5 of this inspection report. The provider is required to address a number of recommendations in an action plan.

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

- No standard was compliant
- No standard was substantially compliant
- Seven standards were non-compliant of which two were identified as non-compliant – moderate and five were identified as non-compliant - major.

Care Visions was last inspected by HIQA in November 2016. At that time, of the 20 Standards assessed, the service met three standards, required improvement in 16 standards and significant risks were identified in one standard. During the 2016 inspection, governance and management systems required further development and improvement to ensure the service was safe and effective. In addition significant risks were identified in the management of child protection and welfare concerns that were not managed in line with Children First (2011).

Due to the level of concern in relation to the standards reviewed as part of this thematic inspection inspectors extended the inspection to cover the standard on management and monitoring of foster care services. There were ineffective management and governance structures and systems in place and inadequate arrangements in place for the management of the service in the absence of the head of service.

Since the last inspection the service had experienced significant changes in structure, management team and systems. The key role of head of service had undergone four changes in personnel since the last inspection. The recent appointment of an interim managing director and head of service were positive events as they were both experienced managers but at the time of inspection they were familiarising themselves with the service. There remained significant challenges with an inexperienced social work team, the pool of foster carers available within the service and the geographic spread of the foster carers. While the staff team showed commitment to improvements and were committed to the foster carers, the lack of experience within the social work team and changes in management caused disruption to the service. This had impacted on the delivery of the service improvement plan.

Management systems were not effective and had not brought about improvements within the service. There was a lack of monitoring and oversight of the service and supervision arrangements in place were not adequate. The actions identified following the 2016 HIQA inspection had not been implemented by the service within the identified timeframes. Care Visions confirmed at the end of the inspection that they remained closed to admissions.

Tusla did not have a service level agreement in place with care visions fostering service. The Tusla monitoring office carried out an audit of Care Visions fostering service in July 2017 in which they set out significant deficits with the service. Following discussions in July 2017 between Care Visions and the monitoring service, Care Visions took the decision to suspend new placements for an unspecified length of time. The Tusla monitoring office wrote to the service in November 2017 to seek clarity on the governance and management arrangements in place and met with the interim managing director and head of service in January 2018.

However, HIQA found that Tusla social work teams continued to request placements from this service throughout the latter half of 2017 and up to and including the time of inspection despite the Tusla monitoring report. Subsequent to the inspection, HIQA wrote to Tusla in regard to their governance and oversight arrangements to ensure that children placed with the service were being provided with safe quality care that met their needs. Following the inspection, the chief operations officer of Tusla provided a written response to HIQA outlining the arrangements he had put in

place to ensure appropriate oversight of private foster care services and that no requests would be made for placements until Tusla is satisfied that children placed with Care Visions are being provided with safe, quality care.

The service had a number of safeguarding arrangements in place including all foster carers having an allocated social worker, An Garda Síochána (police) vetting for staff and foster carers, and Children First training. However, inspectors identified serious risks and escalated three cases at the end of inspection. These risks included no Garda vetting for adult children of a foster carer where a child was placed, there was no safety plan in place for a child placed with foster carers where concerns were known to the social work team and another case where no visits had occurred with the foster carers two months following a significant event. The interim managing director provided a satisfactory response to address the risks. Inspectors also escalated a case to the Tusla area manager who responded with a satisfactory plan to manage the risk.

The protocols around the management of complaints and allegations were not adequate. Inspectors found Care Visions policy was not in line with Children First (2011) up to December 2017, and Children First (2017) since December 2017. While Tusla retained their statutory responsibility to children placed with foster carers, both agencies are accountable for the care and well-being of children. Inspectors found the procedures outlined in this policy did not sufficiently reflect their own internal procedures to regulate safe practice when it came to managing concerns. This meant that while Care Visions were reporting all concerns to Tusla, they did not always have sufficient safeguarding measures in place to safeguard the placement as they awaited outcomes of investigations from Tusla.

Overall the assessments of foster carers were of poor quality as they did not always ensure that the carers were suitable applicants for fostering and that they were appropriately prepared for the demands of becoming foster carers. During 2017, there had been 15 placements endings, the majority of which were unplanned.

The quality of supervision and support provided to foster carers was mixed. While the frequency of visits had improved in the second half of 2017, the children placed with foster carers were not always met with as part of the visit and the record of the visit reflected a narrative account of the foster carers experience of how the child was doing in the placement rather than an account of how the foster carers were meeting the child's needs and recording the advice and professional support provided by the link worker.

Care Visions methods of assurance around case management and oversight was not adequate to ensure that concerns were picked up on in a timely manner and received the appropriate response. Foster carers were offered training that enabled them to provide care to children with complex needs, but the uptake on such

training was not consistent and not all foster carers who required specific training received it.

Reviews of foster carers were not carried out in line with the standards to assess the continuing capacity of the carers to provide high quality care to the children placed with them. While foster care reviews were taking place, two routine reviews were outstanding at the time of inspection and additional reviews were not always taking place following an allegation of abuse or serious concern. The current system to carry out foster care reviews was not in line with the National Standards of Foster Care (2003), as the review was based on the link workers report and did not facilitate a review meeting. This impacted on the quality of the reviews and meant the link workers report was a stand-alone document and it did not fully consider the views of the children placed and other professionals.

3. Summary of judgments under each standard and or regulation

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

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

National Standards for Foster Care	Judgment
Theme 2: Safe and Effective Services	
Standard 10: Safeguarding and child protection	Non-compliant - Major
Standard 14a: Assessment and approval of foster carers	Non-compliant - Major
Standard 15: Supervision and support	Non-compliant - Major
Standard 16: Training	Non-compliant - Moderate
Standard 17: Reviews of foster carers	Non-compliant - Moderate
Theme 4: Leadership, Governance and Management	
Standard 19: Management and monitoring of foster care services	Non-compliant - Major
Theme 5: Use of Resources	
Standard 21: Recruitment and retention of an appropriate range of foster carers	Non-compliant - Major

4. Findings and judgments

Theme 2: Safe and Effective Services

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

Standard 10: Safeguarding and child protection

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

Summary of inspection findings under Standard 10

The policy for responding to and managing allegations in relation to the children placed with foster carers required updating. Care Visions had a number of policy documents that outlined the procedures involved in managing complaints and allegations, but these policies were not in line with Children First (2011) or Children First (2017) from December 2017[*]. While the aim of this policy stated the safety of the child was central, inspectors found it did not sufficiently outline the roles and responsibilities of the social work team in Care Visions, nor did it provide sufficient guidance on the internal procedures when managing serious concerns. The impact of this meant, Care Visions did not always have effective safeguarding practices in place when concerns were brought to their attention.

The management and oversight of concerns, allegations and complaints was not adequate. While the service reported all concerns and allegations to Tusla, in line with Children First (2011), not all concerns and complaints were responded to appropriately by Care Visions. Data provided by the service provider showed that there were seven complaints and allegations made against foster carers in the 12 months prior to inspection. Inspectors sampled three files relating to four concerns and found that while none of these met the threshold for an initial assessment, records of strategy meetings, or agreed actions were not always in foster carers

[*] New Children First legislation commenced on 10 December 2017

files. In addition, children were not always spoken with as part of the investigation. Inspectors also found that safeguarding arrangements were not always put in place while the concern was being considered.

The system for managing complaints and allegations was inconsistent. The social work team were clear on their mandatory reporting role in line with the Children First Act 2015 and concerns were logged in a central register. However, concerns, allegations and complaints were not appropriately categorised. The social work team told inspectors, that they did not feel confident when they categorised concerns and said they depended on the management team for guidance. Inspectors found the screening system to facilitate social workers making judgements when concerns about children in placements came to their attention was not always reliable. For example, three of the records sampled showed action was taken by link workers to ensure concerns were reported, but they were not categorised in line with Children First (2011).

The principal social worker was the designated liaison person for child protection and she maintained oversight of child protection allegations and complaints. While the social work team took appropriate timely action and reported all concerns to Tusla, the role of their designated liaison person was not optimised to ensure they had considered their own judgements regarding the threshold of the concerns, prior to reporting them. Furthermore, in the absence of minutes of strategy meetings held by Tusla, the social work team who attended the strategy meeting did not keep a record of the meeting or the agreed actions and agreed timelines. This meant they did not always take appropriate responsibility for the management of allegations and serious concerns and appropriate interventions were not always implemented to ensure the placement was sufficiently supported to safeguard the child.

The service was challenged by delays in receiving outcomes of investgations from Tusla. Inspectors found that of the seven concerns reported to Tusla one remained open eight months since it was reported. Inspectors saw that efforts were made by the link workers to get notified of the outcomes of investigations, but the process for seeking these outcomes was inconsistent. The ongoing delay of final outcomes of investigations had an impact on the support the social work team were providing to foster carers as they could not always provide timely feedback to their carers. It also meant Care Visions, appropriately, did not place other children with foster carers where the outcome of an investigation was unknown.

There were some measures in place to safeguard and protect children from abuse. Inspectors found that while link workers took action in response to concerns about placements, they did not always take corrective action to ensure there were sufficient safeguarding arrangements in place for children in foster placements where concerns were known. All carers had an allocated social worker and had up-

to-date An Garda Síochána (police) vetting. However, inspectors sampled other files where effective safeguarding measures were not in place. These included the absence of Garda vetting for adult children of a foster carer, the absence of a safety plan for a child where there were concerns were known to the social work team and no safeguarding visits by the social work team to a carer for two months following a significant event. These three cases were escalated to the interim managing director at the end of the inspection who responded with appropriate controls to manage the risks. In addition, inspectors sought assurances from Tusla with regard to serious risks identified following a significant event and were provided with an adequate response.

While 15 placements had ended within the last 12 months inspectors found that Care Visions had not held any disruption meetings. This meant that opportunities had not been taken to establish why the placement had ended and learn how to prevent placement endings going forward.

All foster carers had received training in Children First (2017). Foster carers who met with inspectors were aware that they were mandated persons under the Children First Act (2015) and that they were working with their link worker to gain a more in-depth knowledge of their role in this regard. Training records showed that all foster carers had received training in Children First and in safe care. Foster carers told inspectors that they were given information on what to do if a child in their care went missing.

Judgment: Non-compliant - Major

Standard 14a: Assessment and approval of non-relative foster carers

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

Summary of inspection findings under Standard 14a

The assessment process was not adequate. There was a written policy in place outlining the assessment process within Care Visions. All assessments were carried out by independent social workers who worked on a contractual basis. Inspectors found that assessment procedures had not sufficiently ascertained the foster carers ability and suitability to provide care to children placed in their care or, that they were appropriately prepared for the demands of being a foster carer. This impacted on the quality of placements provided by foster carer.

Data provided by Care Visions showed there were 19 assessments undertaken in 2017. Whilst nine foster carers had been approved, 10 remained on-going. Inspectors sampled three files where assessments had been approved.

All three files contained the necessary components such as, garda vetting, references, medical assessments, foster care agreements, health and safety checks and child protection checks. There was also a record on the files that carers had completed the foundation in fostering training prior to being approved. However, there were no copies of the Tusla placement contract with foster carers, in line with the regulations, on the files.

The timeframes for the completion of the assessment of foster carers were not in line with the national standards. Two of the assessments took more than 12 months, whilst another took eight months. The files reflected there were several visits, including individual and joint interviews carried out by the assessing social workers to the prospective foster carers as part of the assessment. The assessments took into account any adult children in the households and interviews took place with each adult member.

The quality of assessments was poor. There were significant flaws in the assessment process, as it did not always sufficiently determine the foster carers suitability to become foster carers. Inspectors found the assessment did not establish the foster

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

carers ability to care for children who had a range of complex needs and behaviours that challenge. One of the assessments reviewed by inspectors, whilst it detailed a narrative account of the foster carers life experiences and family history, it lacked consideration and analysis of the information gathered. There were indicators in this assessment that required the assessing social worker to consider the applicants suitability to become foster carers, but this was not evident in the report. Inspectors saw from the file, a child who was subsequently placed with these foster carers, had an unplanned ending.

Care Visions methods of oversight of the assessments was poor. Whilst the policy stated the work of the independent social workers would be overseen by social work line management, from reviewing the files, the assessments lacked managerial oversight with one record of supervision on all three files sampled. This meant that there were missed opportunities for Care Visions to manage timeframes, provide oversight and in-depth analysis of all the information gathered.

The impact of poor quality assessments meant that Care Visions could not be assured during the matching process that the foster carers had the capacity to meet the assessed needs of the child placed in their care in line with the standards. This was evident in the data provided by the area that showed there was a high number of unplanned endings.

At the time of inspection, data provided to inspectors showed children were placed in 20 foster care households. Inspectors were informed that there were 15 foster care households where placements had ended in the 12 months prior to the inspection. Inspectors were told by senior managers that some of the reasons for the unplanned endings included, poor assessments, inadequate matching process, lack of appropriate training to assist the foster carers to care for children with complex needs and the inexperience of foster carers.

The process of approval of foster carers was clear whereby oversight and approval of each assessment is carried out by the foster care committee in the geographical area of the foster care household. All three assessment reports sampled were sent to the relevant Tusla foster carer committee where the foster carers application was considered. All three files had written records of the foster care committee's approval of the foster care applicants.

Judgment: Non-compliant - Major

Standard 15: Support and Supervision

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

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 who met with inspectors said while they were happy with the support they received from their link worker, the changes in social workers impacted on the continuity of the support and supervision provided. In addition the geographical location of foster carers impacted on the availability of link workers to visit foster carers as some foster carers were based as far as 200 kilometres away from the Care Visions office.

There were 12 foster carers files sampled for support and supervision as part of this inspection.

The quality of support and supervision records required improvement. While inspectors noted an improvement in the frequency of support and supervision visits in the third and fourth quarter of 2017, the quality of these visits required improvement. Inspectors reviewed Care Visions support and supervision policy and saw that it outlined a comprehensive range of supports provided to foster carers. Inspectors were told by the principal social worker that support and supervision visits took place every four to six weeks in line with their policies. However, records showed that support and supervision visits to foster carers were inconsistent. Inspectors found of the 12 files sampled, four foster carers files showed link workers had complied with their own policy with visits every four to six weeks. But, inspectors found that children were not always seen in the foster placement in line with the policy. In addition, while the support and supervision records reflected a narrative account of the foster carers experience of how the child was doing in the placement, there was insufficient analysis of the interaction between the link worker and the foster carers. This meant there was no account of how the foster carers were meeting the child's needs and no recording of advice and professional support provided by the link worker.

Not all foster carers received timely interventions. Inspectors found there were indicators on the files that placements were unstable and this was not identified by

the link workers. Inspectors sampled six files where placements had ended and found the quality of support and supervision did not sufficiently explore the impact a child in placement had on foster carers. Placement endings had a significant impact on the children placed in foster placements as they were faced with further uncertainty and disruption due having to move placements.

Records did not always document timely interventions made by the social work team. Of the six files reviewed by inspectors where placements had ended, five of these ended in an unplanned manner. One of these cases samples showed, in the five months prior to this placement ending, there was no recorded visit on file. Another file reviewed showed there were no records of visits to the carers and the placement ended abruptly. Inspectors found that whilst on three of the files there were records of support and supervision, they did not address the challenges that carers had in relation to a child's behaviour. This meant foster carers did not receive timely responses and appropriate interventions from Care Visions. One of the files sampled did not record interventions made by the social work team when a placement was unstable and at risk of ending. The principal social worker told inspectors that while there was no evidence on the file that a lot was done to support this placement. Inspectors found that the lack of recording of interventions meant that the managerial oversight of what worked well or what could have been done to prevent placement endings, was difficult to ascertain. This meant that the service was not always in a position to learn and develop new strategies to minimise placement disruptions in the future.

There was insufficient oversight and case management of link workers. Inspectors found that of the 12 files sampled for support and supervision, four files had sufficient records of case supervision, while two files had no records for 2017 but there was one record of case supervision in January 2018. The remaining six files did not have records of case supervision.

There was a lack of social work experience across the social work team. The principal social worker acknowledged the teams lack of experience and told inspectors she set up a monthly practice development group for the social work team so that management could address deficits in practice and enhance professional knowledge across the social work team. Inspectors saw minutes of these meetings and found that while deficits in practice were listed as agenda items at the meetings, there was no recording of, methods to improve practice, actions, timeframes or delegation of tasks to address these deficits. Inspectors found that these meetings lacked the necessary oversight to ensure quality improvement of the service. The impact of the inexperienced social work team meant that the team did not have the depth of experience and knowledge required to sufficiently resource foster carers with the required support to maintain and sustain the placements.

The principal social worker told inspectors there were a number of children with complex needs placed with foster carers. Inspectors reviewed files and found that there was a common theme evident with placement endings. The files sampled, showed that the foster carers were not able to manage and support children who presented with complex needs and behaviours that challenge. In addition inspectors found they did not get the appropriate and timely intervention or support. Inspectors were told when additional supports were identified for a placement that this was done, appropriately, in collaboration with the child's Tusla social worker.

Inspectors observed from two files reviewed, that additional psychological supports were provided to foster carers. However, in one of these cases, the placement broke down despite the intervention. In addition, inspectors spoke to the newly appointed family support worker who explained his role was to provide direct support to the foster carers in their home to enhance the foster carers capacity to manage behaviours that challenge. Inspectors saw on one file that respite was offered to a foster carer due to a sudden change in their circumstances and there was regular support and supervision provided to this placement.

There was no dedicated foster care support group in place at the time of inspection.

There was a dedicated 24 hour out-of-hours service available to foster carers. Overall, foster carers told inspectors that they were happy with the support service provided by Care Visions. The principal social worker told inspectors that the service operated as an on call service and a rota was in place to include all staff from link workers to the principal social worker. Inspectors found this system was flawed as it did not provide back up and assistance to the staff on call. Inspectors spoke to the foster care team about how they manage out of hours emergencies and were told, they had no managerial back up out of hours and the only back up they had was from the Gardaí.

Judgment: Non-compliant - Major

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

Care Visions had training and development co coordinator in place and the family support worker also had a significant role in working directly with foster carers to assist with identifying their training needs. There was a training strategy in place for foster carers and in line with this strategy; all carers had to complete basic training in relation to fostering in advance of an assessment taking place. Inspectors reviewed minutes of team meetings that showed the service had used these meetings to develop their foster care training strategy. Inspectors were told that training for foster carers was sourced externally where appropriate and the principal social worker provided training to foster carers. The interim managing director was unable to confirm if the staff providing training had received the accreditation required.

Inspectors found that there was a comprehensive range of training available to foster carers, but despite the training being available, foster carers were not consistently attending all training. Care Visions had carried out a training needs analysis between July and September 2017, but there was no training plan identified following the training needs analysis. According to this report, there had been improvements in foster carers attendance at training. From reviewing this report, it showed that the service provided training in core areas which included safe care practice, children first, diversity training, record keeping, missing in care, internet safety, caring for a child with a disability, attachment training, complaints and allegations, cyber safety, parents plus and therapeutic crisis for families training. This report showed that foster carers attended mandatory training and improvements were noted in the uptake of training in safe care, recording and missing in care. However, the training for managing concerns, complaints and allegations was poor. Foster carers told inspectors that because of their geographical location, travel to training and childcare arrangements was a challenge. They suggested on line training as a useful solution to some of their training needs.

There was no system in place to ensure foster carers attended training. Inspectors sampled nine files in respect of foster carers training records. While the training records were mixed on seven of the files sample, two files had no training records. The principal social worker told inspectors that in September 2017, she had

facilitated a focus group for foster carers to discuss supports such as training, however, only two foster carers attended. According to the Care Visions foster care handbook, all foster care applicants must attend the preparation course, Foundations to Foster, as part of their assessments. Of the three foster care assessments sampled, inspectors found that the assessment process complied with this policy. However, training records reviewed on three files where placements had broken down showed that the training was insufficient. On one of the files there were no training records. Another record showed there had been no training attended in the year prior to the placement breakdown despite issues identified by Care Vision. This meant that the competencies of foster carers in the service were not sufficiently developed through the provision of training.

Judgment: Non-compliant - Moderate

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

According to the standards, the first foster care review should take place one year after the first placement and subsequent reviews should take place at three-yearly intervals. Additional reviews should take place following an allegation of abuse or serious complaint. The purpose of the review is to assess the carers continuing capacity to provide high quality care and to assist with the identification of gaps in the fostering service.

Reviews of foster carers were not carried out in line with the standards. They did not always occur within the timeframes identified above and review meetings did not occur. A review was based on the review report completed by the link worker with no input from the team leader or principal socialworker.

Data provided by the service provider showed that 11 reviews were carried out in the 12 months prior to inspection and that there were two foster care reviews outstanding. Additional reviews did not always take place. Of the seven complaints and allegations made against foster carers, one had a review carried out, one had no review and five of these carers had been removed from the panel.

The quality of review reports was mixed. Inspectors sampled four foster care reviews. Foster care reviews were based on a report from the link worker. While the link workers reports were well written, they did not wholly consider or analyse the views of the child or other professionals involved. The reports considered the critical components such as foster carer performance, adequacy of support, any changes in foster carers circumstances, health, training provided, training requirements, Garda vetting and health and safety. Two of the review reports sampled were of good quality and showed the service had given due consideration to the foster carers capacity in terms of meeting the specific needs of the children placed. Both reviews had identified appropriate training and were in line with Children First (2011). The third review sampled, whilst it was comprehensive and considered training needs, it did not comply with Children First (2011) and the child's views were not represented, nor did it fully consider both foster carers capacity as it focused on the female carer. This deficit was highlighted by the foster care committee and Care Visions were asked to re submit the reports to the foster care committee.

Inspectors found link worker reports had not fully considered or analysed the views of other parties, such as the child's social worker who represented the child's views or questionnaires completed by the children. In addition, there was no managerial oversight of review reports on the files sampled.

There was no system in place to facilitate a review meeting between the relevant professionals and the foster carers. The principal social worker told inspectors that it was not the practice within Care Visions to hold a formal meeting as part of the review process. This practice does not comply with the Standards for Foster Care (2003). This meant that the review process depended on the link workers report as a stand-alone document and there was no discussion or analysis of other reports submitted or managerial oversight. The foster care committee were not always notified of reviews. The foster care committee were notified of the outcome of two of the reviews sampled, but, there was no record on one of the files sampled that the foster care committee was notified of the outcome of the foster care review.

The recommendations of the foster care committee were not always followed up on in a timely manner. Inspectors found on one of the reviews sampled that recommendations were followed through, but two of the records sampled did not show that recommendations were implemented.

Judgment: Non-compliant - Moderate

Theme 4: Leadership, Governance and Management

Effective governance is achieved by planning and directing activities, using good business practices, accountability and integrity. In an effective governance structure, there are clear lines of accountability at individual, team and service levels, and all staff working in the service is 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.

Summary of inspection findings under Standard 19

Due to the level of concern in relation to the standards reviewed as part of this thematic inspection inspectors extended the inspection to cover the standard on management and monitoring of foster care services.

At the time of the last inspection in November 2016 management structures for the service were in the early stages of development, the management of risk was not sufficient and deficits were identified in a range of areas, particularly in relation to the management of child protection and welfare concerns. The service was not resourced to deliver the service effectively and some improvements were required in the supervision and training of staff.

At the time of the 2018 inspection, effective management of the service was challenged for a number of reasons including changes in senior managers, an inexperienced social work team, and the geographic spread of the foster carers.

Management structures were unstable due to changes in managers and the interim filling of posts. A number of changes had occurred in the service's structure and management team since the last inspection. There had been four different people in the role of head of service since the last inspection.

There was no contingency plan in place when senior staff members took leave or vacated posts. Inspectors found that there were two periods of instability during 2017 when the head of service had resigned. The CEO of Care Visions UK acted in the role while the position was vacant in quarter one and two of 2017. For the most recent vacancy in quarter four 2017, the executive chairman of the company provided oversight. This meant there was a six week period before a new head of service was recruited. However, there was no contingency arrangements when

senior social work staff took leave to ensure staff were supported and the service was monitored by a professionally qualified social worker.

There was a newly defined management structure being introduced at the time of the inspection with the appointment of an interim managing director in January 2018 and an interim head of service appointed in mid-December 2017. This was the fourth head of service for the organisation in a 10 month period. The new management team were in the process of embedding the new structure, familiarising staff with this new structure and individuals roles and responsibilities and creating stability within the team.

A recruitment campaign had been undertaken following the 2016 inspection and additional link workers and a family support worker had been recruited. However, while the service had opted to suspend admissions of children to facilitate the induction and orientation of the new staff team over the summer of 2017, two link workers subsequently left the service. Inspectors found that the social work team was committed to the service but they lacked the experience and knowledge required to ensure the foster care service was implemented in line with the standards.

Inspectors found throughout the inspection that there was a significant shortfall in the level of experience within the team and there was a lack of clarity in some areas of practice. In addition the leadership had been inconsistent and did not generate sufficient improvement in social work practice and systems. This impacted on the overall provision of the service as the team did not have sufficient time, or guidance, to establish a level of professional knowledge required to meet the demands of the service.

The management systems were developing. There were a number of policies in place but some needed updating to be in line with new legislation and others, for example risk management were absent. Inspectors found that the complaints and allegations policy was not aligned to Children First (2017). The social work team were aware of the policies in place.

The communication systems in place required improvement. The social work team had monthly team meetings where relevant information was shared and the team were updated on changes within the service. There were also weekly senior management team meetings where key developments in the service were decided on. However, inspectors found that some decisions taken at these meetings were not communicated to the social work team at their next team meeting to take the appropriate action. In addition actions identified from the last meeting were not always followed up on at the subsequent meeting.

Decision making was not always effective. Inspectors found from reviewing minutes of the Board, professional standards committee and senior management meetings that a lot of the areas for improvement or indicators of risk were known to the service but these areas were not always followed through to bring about improvement. For example, the professional standards committee reviewed a critical incident and identified that all of the placements should be reviewed in November 2017. However, this action had not been implemented at the time of inspection.

Despite having a business plan for the service, in some respects the service was crisis led. The service had a 2017/2018 business plan which looked at maximising the outcomes for children, growing the business, customer relationship management and staff and performance management. However, it did not take account of the key issues for the service which included the quality of the foster carers, the significant number of placement breakdowns and foster carers being removed from or leaving the panel.

Risk management systems were not robust. While a number of significant risks were known to the service, inspectors found that the controls were not effective. There was no risk management policy and inspectors were told by the interim managing director that there was no risk register in place. The senior management team identified safeguarding, attrition and staff experience as the three key areas of risk. The interim managing director also identified that he was prioritising the compilation of a risk register.

Monitoring and oversight arrangements were not effective and did not lead to improvements in the service. While inspectors were informed of some local file audits that had been completed, action plans for the Tusla monitoring service audit from July 2017 identified that the CEO (UK) was to undertake some audits of the service. The CEO (UK) confirmed that while she had undertaken two file audit reviews there was no record of these. In addition, the principal social worker had not identified, through case management, deficits in foster carer assessments, reviews, or supervision and support to carers. Inspectors were however provided with a copy of a critical case review carried out by Care Visions in respect of a critical event. This review was comprehensive and considered the case chronology. The case review identified significant areas of concerns, both retrospective and existing risks and the Chairperson recommended a full review on all foster carer case files. Inspectors found that the actions identified to assure Care Visions that all foster carers had case reviews had not yet been implemented.

Tusla is responsible for satisfying themselves that, when a child is placed with a foster carer through a non-statutory agency, the statutory requirements are met and that the children receive high quality care. The Tusla monitoring office carried out an audit of Care Visions in July 2017 in which they set out significant deficits with the

service. Following discussions in July 2017 between Care Visions and the monitoring service, Care Visions took the decision to suspend new placements for an unspecified length of time. The Tusla monitoring office wrote to the service in November 2017 to seek clarity on the governance and management arrangements in place and met with the interim managing director and head of service in January 2017. However, HIQA found that Tusla social work teams continued to request placements from this service throughout the latter half of 2017 and up to and including the time of inspection despite the Tusla monitoring report. Subsequent to the inspection, and in the absence of a service level agreement with the service, HIQA wrote to Tusla in regard to their governance and oversight arrangements to ensure that children placed with the service were being provided with safe quality care that met their needs. Following the inspection, the chief operations officer of Tusla provided a written response to HIQA outlining the arrangements he had put in place to ensure appropriate oversight of private foster care services.

Inspectors did not find that the actions identified following this audit or the actions following the 2016 HIQA inspection had been implemented within the identified timeframes.

Inspectors met with the executive chairman and CEO (UK) during the course of this inspection. The executive chairman acknowledged the deficits of the service and said the organisation had not had the consistent leadership required to run the service effectively. He told inspectors that he was committed to the children and foster carers and engaging with the newly appointed interim managing director and head of service to ensure the necessary systems were put in place to address the risks. He confirmed at that time that the service was not open to admissions.

Judgment: Non-compliant - Major

Theme 5: Use of Resources

Services recruit sufficient foster carers to meet the needs of children in the area. Foster carers stay with the service and continue to offer placements to children.

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

Health boards* are actively involved in recruiting and retaining an appropriate range of foster carers to meet the diverse needs of the children and young people in their care.

Summary of inspection findings under Standard 21

Strategies in place to retain foster carers were not sufficient. At the time of inspection, Care Visions did not have a foster care retention strategy in place. Inspectors found there were insufficient resources in place to retain foster carers. In addition the interim managing director told inspectors that there were challenges for link workers to visit foster carers who lived outside of the Care Visions geographical area. This meant that link workers were not always able to visit the foster carers according to their needs. While data provided by the service showed in the 12 months prior to inspection six foster carers had left the service, Care Visions had also removed three carers from the panel, others had left voluntarily. Inspectors did not see records of exit interviews in respect of foster carers that had left the panel. Inspectors found that the absence of exit interviews impacted on Care Visions analysis and understanding of why foster carers left the service. This meant there were missed learning opportunities that could have influenced appropriate changes to their training programme.

The recruitment strategy was not examined or explored at the time of inspection as the service was closed to new admissions and referrals from Tusla pending improvements in the governance and management systems. This was implemented by the service provider following an audit of Tusla in July 2017. Inspectors were told that the service had considered referrals in the last quarter of 2017 due to a demand

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for foster placements from Tusla, however, Care Visions were not in a position to proceed with placement requests.

Judgment: Non-compliant - Major

Appendix 1 — Standards and regulations for statutory foster care services

***National Standards for Foster Care* (April 2003)**
Theme 1: Child-centred Services
Standard 1: Positive sense of identity Children and young people are provided with foster care services that promote a positive sense of identity for them.
Standard 2: Family and friends Children and young people in foster care are encouraged and facilitated to maintain and develop family relationships and friendships.
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.
Standard 4: Valuing diversity Children and young people are provided with foster care services that take account of their age, stage of development, individual assessed needs, illness or disability, gender, family background, culture and ethnicity (including membership of the Traveller community), religion and sexual identity. ***Child Care(Placement of Children in Foster Care) Regulations, 1995*** *Part III Article 8 Religion*
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.

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***National Standards for Foster Care* (April 2003)**
Theme 2: Safe and Effective Services
Standard 5: The child and family social worker There is a designated social worker for each child and young person in foster care. ***Child Care(Placement of Children in Foster Care) Regulations, 1995*** *Part IV, Article 17(1) Supervision and visiting of children*
Standard 6: Assessment of children and young people An assessment of the child's or young person's needs is made prior to any placement or, in the case of emergencies, as soon as possible thereafter. ***Child Care(Placement of Children in Foster Care) Regulations, 1995*** *Part III, Article 6: Assessment of circumstances of child*
Standard 7: Care planning and review Each child and young person in foster care has a written care plan. The child or young person and his or her family participate in the preparation of the care plan. ***Child Care(Placement of Children in Foster Care) Regulations, 1995*** *Part III, Article 11: Care plans* *Part IV, Article 18: Review of cases* *Part IV, Article 19: Special review*

***National Standards for Foster Care* (April 2003)**
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. ***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 Childrenwith 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.

***National Standards for Foster Care* (April 2003)**
Standard 14a — Assessment and approval of non-relative foster carers Foster care applicants participate in a comprehensive assessment of their ability to carry out the fostering task and are formally approved by the health board* prior to any child or young person being placed with them. ***Child Care(Placement of Children in Foster Care) Regulations, 1995*** *PartIII,Article5Assessmentoffosterparents* *PartIII,Article9Contract*
Standard 14b — Assessment and approval of relative foster carers Relatives who apply, or are requested to apply, to care for a child or young person under Section 36(1)(d) of the Child Care Act, 1991 participate in a comprehensive assessment of their ability to care for the child or young person and are formally approved by the health board.* ***Child Care(Placement of Childrenwith Relatives) Regulations, 1995*** *PartIII,Article5Assessmentofrelatives* *Part III, Article 6 Emergency Placements* *PartIII,Article9Contract*
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

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skills and knowledge required to provide high-quality care.

Standard 17: Reviews of foster carers

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

Standard 22: Special Foster care

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

Standard 23: The Foster Care Committee

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

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

Part III, Article 5 (3) Assessment of foster carers

Child Care(Placement of Childrenwith Relatives) Regulations, 1995

Part III, Article 5 (2) Assessment of relatives

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National Standard for Foster Care (April 2003)
Theme 3: Health and Development
Standard 11: Health and development The health and developmental needs of children and young people in foster care are assessed and met. They are given information, guidance and support to make appropriate choices in relation to their health and development. ***Child Care(Placement of Children in Foster Care) Regulations, 1995*** *Part III, Article 6 Assessment of circumstances of child* *Part IV, Article 16 (2)(d) Duties of foster parents*
Standard 12: Education The educational needs of children and young people in foster care are given high priority and they are encouraged to attain their full potential. Education is understood to include the development of social and life skills.
National Standards for Foster Care (April 2003)
Theme 4: Leadership, Governance and Management
Standard 18: Effective policies Health boards* have up-to-date effective policies and plans in place to promote the provision of high quality foster care for children and young people who require it. ***Child Care(Placement of Children in Foster Care) Regulations, 1995*** *Part III, Article 5 (1) Assessment of foster carers*

Standard 19: Management and monitoring of foster care agency

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

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

Part IV, Article 12 Maintenance of register

Part IV, Article 17 Supervision and visiting of children

Standard 24: Placement of children through non-statutory agencies

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

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

Part VI, Article 24: Arrangements with voluntary bodies and other persons

***National Standards for Foster Care* (April 2003)**

Theme 5: Use of Resources

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

Health boards* are actively involved in recruiting and retaining an appropriate range of foster carers to meet the diverse needs of the children and young people in their care.

National Standards for Foster Care (April 2003)

Theme 6: Workforce

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

Standard 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.

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Action plan

Please note that this action plan has been completed by the provider and accepted by HIQA.

HIQA has not made any amendments to the provider's comments and commitments in this action plan.

Provider's response to monitoring report number:	MON - 0020636
Name of service area:	Care Visions Fostering Ireland
Date of inspection:	17 – 18 January 2018
Date of response:	16 April 2018

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 10: Safeguarding and Child Protection
Judgment: Non-compliant-Major

The provider is failing to meet the national standards in the following respect:

The policy for managing complaints and allegations was not up to date.

Safeguarding arrangements were not always effective.

Not all child protection and welfare concerns were managed in line with Children First.

Disruption meetings did not always take place following placement breakdowns.

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. The Policy for Managing Child Protection and Welfare Concerns, Serious Incidents and Allegations has been revised and updated in line with current legislation and guidance. This will be presented to Professional Standards Committee on 28th March. This new policy will also aid categorisation of child related concerns and so lead to more effective reporting and responses from Tusla
2. An escalation Policy has been introduced and shared with Tusla to resolve matters where a child's welfare may be compromised or where there is a significant disagreement between agencies or one party may have failed in its duty. We have utilised this twice in the last month to resolve matters.
3. Of the 11 placements which ended in an unplanned way in 2017 seven have been considered via a Disruption meeting prior to the Inspection. Since then 2 more have been undertaken the remaining 2 will take place in the next 4 weeks Going forward Disruption meetings will take place within 2-3 weeks of a placement ending in an unplanned way.
4. CVI haven't consistently updated Child Safety plans when significant incidents have occurred. Going forward for all children in placement will be reviewed and revised if necessary, following the receipt of a complaint or allegation in line with the recently updated *Complaints, SEN and CPW Policy.*
5. Vetting checks action introduced to avoid non-compliance including ;bring

forward system, escalation process and enhanced contract with Garda where they will to chase up outstanding applicants alongside ourselves. We have a revised bring forward system. Amber Vetting checks are now reviewed at the Team Meeting. We have a small number of family members and support networks whose disclosure is not back with Care Visions. In these cases Carers have now being reminded of restrictions in respect of unsupervised contact and other specifics and this is referenced on the Safe care Plan. One Carer (without placement) Vetting has expired as has 1 of her support network. This carer is exiting the service.

6. All SENs CP&W and Allegations are reported to the HoS and MD immediately, the Fostering Monitor as required and form part of a quarterly report considered by the Professional Standards Committee and subsequently to our newly organised Quarterly Meeting with Tusla Area manager

Proposed timescale:	**Person responsible:**
1. To be presented to Professional Standards Committee on 28/3/18	Managing Director
2. Completed	Head of Service/Team Leader
3. Outstanding Disruption meetings will be concluded by 30/04/2018	Head of Service
4. Completed	Head of Service
5. All Garda disclosures are expected to be compliant by 13/4/2018	Managing Director Managing Director
6. Revised triangulated monitoring system introduced to scrutinise reporting. In place	Head of Service

Standard 14a — Assessment and approval of non-relative foster carers
Judgment: Non-compliant-Major

The provider is failing to meet the national standards in the following respect:
Foster care assessments were not completed in line with the standards.

The quality of assessments was poor.

Managerial oversight of assessments was poor.

Action required:
Under **Standard 14a** 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. We have ceased using external assessors who produced poor quality assessments. We have identified Assessors who have produced better quality reports in the past and these will be the cohort of Assessors we will use going forward
2. We have revised our contract with Assessors including a commitment to providing improved management supervision of Assessors
3. All form F's will be quality assured by the Head of Service prior to submission to the Committee

Proposed timescale:	Person responsible:
1. Completed 2. Completed 3. Completed. New practice in place	Head of Service Managing Director Head of Service

Standard 15: Supervision and Support
Judgment: Non-compliant-Major

The provider is failing to meet the national standard in the following respect:

The quality of support and supervision records required improvement.

There was insufficient oversight and case management of link workers.

The out of hours service had no back-up system for social workers on call.

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. Approved carers are supervised by a qualified social worker.
2. The Head of Service will have completed a training needs analysis by the end of April 2018
3. The Link SW's receive monthly supervision from the TL and as part of this she will make appropriate case notes to indicate this on Charms.
4. The Team Leader is supervised monthly by an external qualified and CORU registered social worker pending the Head of Services' successful CORU registration
5. The HoS & MD will conduct monthly samples of case records. The Social Worker's supervision of Carers is a particular focus. The HoS and MD will scrutinise the Charms record(ensuring there is a monthly record) and crucially appraise to supervision, making notes in terms of feedback to the SW on Charms under the heading 'Management Oversight'.
6. The Managing Director and Head of Service provide back up to social workers on call from 12/3/18

Proposed timescale:	**Person responsible:**
1. Compliant.	Head of Service
2. 30/4/18	Head of Service
3. March 2018	Team Leader
4. Completed with external supervisor and this will remain in place until internal capacity is in place	Head of Service
5. Monthly case sampling started on 16th March 2018	Managing Director/ Head of Service

6. Back up to SWs on duty began on 12/3/18	Managing Director/ Head of Service

Standard 16: Training
Judgment: Non-compliant-Moderate

The provider is failing to meet the national standards in the following respect:

Foster carers attendance at training was mixed and there was no system in place to ensure that all foster carers attended training following their approval.

Training records of foster carers were mixed.

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. Care Visions will undertake a review and revision of the Carer training strategy including: training needs engagement, scope and style, taking into account the challenge of geography
2. Care Visions has a monitoring spreadsheet of all carers, the training required and the training completed
3. Training compliance will be reviewed as part of carer supervision. This will be a focus of ongoing management sampling

Proposed timescale:	**Person responsible:**
1. 04/05 2018 2. Completed 3. 13/04/ 2018	Managing Director/ Head of Service Team Leader/ Head of Service / Managing Director

Standard 17: Reviews of foster carers
Judgment:Non-compliant-Moderate

The provider is failing to meet the national standards in the following respect:
Reviews of foster carers were not carried out in line with the standards.

The recommendations of the foster care committee, following the review were not always followed up on in a timely manner.

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 action you have taken or are planning to take:

1. Care Visions has revised practice around carer Reviews. These are now focussed around information shared at a 'sit down' review meeting attended by Link Social Worker, chaired by the Team leader and including the Carer, Tusla SW, views of the child. The revised approach was presented to the Social Work team via a Team Workshop in early March 2018

Proposed timescale:	Person responsible:
1. Now being implemented. Will be embedded 30/04/2018	Head of Service

Theme 4: Leadership, Governance and Management

Standard 19 Management and Monitoring of Foster Care Services
Judgment:Non-compliant-Major

The provider is failing to meet the national standards in the following respect:

Governance arrangements were not effective.

A number of management systems were not effective.

There was a significant shortfall in the level of experience within the team and there was a lack of clarity in some areas of practice.

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. There is a MD and HoS in place and will remain until a permanent CORU registered HoS is recruited and handed over to later in the year.
2. Recruit permanent HoS 31/10/2018
3. An additional Team Leader has been recruited
4. Two additional Fostering Link Social Workers are currently being actively recruited
5. The Board has met in January, February and March and is scheduled to have monthly meetings until June, when the frequency will be reviewed and decision taken on whether to continue monthly or move to bi-monthly. All meetings have minutes, with actions identified and allocated. All actions are reviewed at subsequent meetings.
6. The Professional Standards Committee will continue to meet quarterly and receive performance reports. The next meeting of Board and PSC will take place on 28 March 2018. The PSC will receive reports on all Complaints, SEN and Child Protection and Welfare concerns; and consider other reports from the HoS and MD including proposed new policies. All meetings have recorded minutes with actions identified against the person responsible
7. The PSC has commissioned the MD to produce a monthly Performance 'Dashboard' across critical indicators to provide a high level view of CVI performance
8. The HoS and MD will meet with Tusla Area Manager quarterly and provide the reports to and actions from the PSC
9. Training Needs analysis of Team Leader and Fostering Social Workers
10. Training to be provided as indicated.
11. A Risk Register has been formulated and was reviewed by the Board in February 2018 and will be reviewed again in April 2018

Proposed timescale:	**Person responsible:**
1. Completed	
2. September -November 2018	Board
3. Completed - ongoing	Board
4. Completed – ongoing	PSC
5. 17/5/2018	Managing Director
6. Agreed	Managing Director/ Head of Service
7. April 2018	Team Leader
8. Training and development will be subject to supervisory assessment, professional development and business need	Head of Service
9. Completed and to be reviewed on 26/4/18	Managing Director

Theme 5: Use of Resources

Standard 21: Recruitment and retention of an appropriate range of foster carers
Judgment: Non-compliant-Major

The provider is failing to meet the national standards in the following respect:

Strategies in place to retain foster carers were not sufficient.

Action required:

Under **Standard 21** you are required to ensure that:
Health boards[1*] are actively involved in recruiting and retaining an appropriate range of foster carers to meet the diverse needs of the children and young people in their care.

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

1. A Foster care retention strategy to be devised
2. A Foster Care Support Group is being supported by Care Visions, has met twice
3. There is a plan to cluster carers, supported by a Link worker and engaging these groupings in recruitment, peer support and this will be reflected in the Strategy.
4. A 'forecasted exit interview date' has been set up on Charms with a timescale for completion. This will prompt social work staff to take action and will be reported as part of Performance reporting.

Proposed Timescale:	Person responsible:
1. 20/04/ 2018 2. Has been established and will meet regularly with financial support from Care Visions 3. 25/5/ 2018 4. In place	Managing Director Head of Service Head of Service/ Team Leader Completed. Monitor by Managing Director

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