

## Statutory foster care service

### Report on the progress made by Tusla's West Region in reaching compliance with eight of the *National Standards for Foster Care*

Health Information and Quality Authority (HIQA)  
Regulation Directorate monitoring inspection  
report on a statutory foster care service under the  
Child Care Act, 1991

<b>Name of Child and Family Agency (Tusla) region:</b>	West Region
<b>Timeframe of HIQA follow-up monitoring activity</b>	<p><b>Commenced on:</b> 10 January 2018</p> <p>Self-assessment and statement of compliance forms issued to each area.</p> <p><b>Fieldwork:</b></p> <p>26–28 February 2018</p> <p><b>Report finalised:</b></p> <p>29 June 2018</p>

## **About HIQA monitoring of statutory foster care services**

The Health Information and Quality Authority (HIQA) monitors services used by some of the most vulnerable children in the State. Monitoring provides assurance to the public that children are receiving a service that meets the 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 continual improvement so that children have better, safer services.

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 foster care services provided by the Child and Family Agency (Tusla) and to report on its findings to the Minister for Children and Youth Affairs. HIQA 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, HIQA carries out inspections to:

- **assess** if Tusla— 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** in services through the publication of HIQA's findings.

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

## **Child and Family Agency (Tusla)**

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.

The Child and Family Agency (Tusla) is organised into four regions: the West, the South, Dublin Mid Leinster and Dublin North East. The regions are divided into 17 service areas, each of which provides a foster care service. The foster care services are managed by area managers working under a regional manager known as a service director. The service directors report to the chief operations officer, who is a member of the Tusla national management team.

## **HIQA Monitoring of TUSLA foster care services in 2017**

As part of the 2017 monitoring programme, HIQA carried out themed inspections of foster care services in 14 of the 17 Tusla service areas. The themed inspections focused on eight of the National Standards for foster care which covered safeguarding and child protection, recruitment, assessment and approval of foster carers, foster care reviews and support and supervision of foster carers.

HIQA conducted themed foster care inspections in the Tusla West Region between March and June 2017 in four of the region's service areas: Galway/Roscommon, Sligo/Leitrim/West Cavan, Mid West and Mayo.\*

The levels of compliance found in themed foster care inspections conducted in 2017 in the West region are represented in Table 1 overleaf.

Each area was required to submit an action plan to address findings of non-compliance as outlined in inspection reports. The reports and action plans were published on [www.hiqa.ie](http://www.hiqa.ie).

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\*A themed foster care inspection of the Donegal area of the West region was carried out in 2018.

**Table 1. Judgments of 2017 themed foster care inspections in the four service areas of the Tusla West Region**

Service area	Standard 10— Safeguarding and Child Protection	Standard 14a— GFC Assessme nts	Standard 14b— RFC Assessments	Standard 15 — Support and Supervisio n	Standard 16 — Training	Standard 17 — Reviews	Standard 21— Recruitment and Retention	Standard 23 — Foster Care Committee
Galway/ Roscommon	Non-compliant Moderate	Compliant	Substantially Compliant	Non- compliant Moderate	Substantially Compliant	Non- compliant Moderate	Substantially Compliant	Non- compliant Moderate
Mayo	Substantially Compliant	Compliant	Substantially Compliant	Non- compliant Moderate	Substantially Compliant	Compliant	Substantially Compliant	Substantially Compliant
Mid West	Non-compliant Major	Substantia lly Compliant	Non- compliant Moderate	Non- compliant Major	Substantially Compliant	Non- compliant Major	Substantially Compliant	Non- compliant Moderate
Sligo/Leitrim/ West Cavan	Non-compliant Major	Substantia lly Compliant	Non- compliant Moderate	Non- compliant Major	Non- compliant Moderate	Non- compliant Major	Non- compliant Moderate	Substantially Compliant

Key to table

GFC = general foster carers (non-relative foster carers)

RFC = relative foster carers.

## HIQA follow up in 2018

HIQA carried out follow-up monitoring of the foster care services in four out of five service areas in the West Region between February and March 2018. Based on the findings of the 2017 themed inspections, which focused on eight standards, and the resulting action plans, a statement of progress in the form of a self-assessment was completed by each service area. The self-assessment required:

- an assessment of the area's current level of compliance
- the extent to which progress had been made to address areas of non-compliance as identified during the 2017 themed inspection
- evidence to support the self-assessment findings
- outstanding actions required to address non-compliance
- and a statement as to how the area manager was assured that timely actions would be taken to address non-compliance, where applicable.

Following receipt of the completed statement of progress from the four service areas in the West Region, the information was reviewed by an inspector. In order to source further evidence of progress made, HIQA conducted inspection fieldwork in the service areas where major non-compliances had been found during the 2017 inspections, namely, Sligo/Leitrim/West Cavan and the Midwest.

Desktop reviews were carried out for Galway/Roscommon and Mayo. Following the reviews of the statements of progress, inspectors sought some additional information from the area managers to support the areas' judgments of its current compliance rating. This supporting information and documentation was reviewed by a HIQA inspector and a teleconference was conducted with the area manager for each area.

The focus of the follow-up inspections and the desktop reviews was to assess each area's progress in becoming compliant with the relevant standards, which included a particular focus on major and moderate non-compliances.

Following the completion of the desktop reviews and the follow-up fieldwork, HIQA interviewed the service director for the West Region.

### **Foster care service in the Tusla West Region**

The foster care teams in the four areas of the West were organised in different ways - some were based in one location, others were based in offices throughout the region. Teams were managed by team leaders who reported to principal social workers. The areas had both general and relative foster care households providing a service for children in care (see Table 2).

**Table 2. Numbers of general (non-relative) and relative foster carers in the West Region in 2018**

Service area	General foster carers at time of follow up	Relative foster carers at time of follow up	Number of children in care <sup>1</sup>
Galway/Roscommon	216	69	403
Mayo	68	32	129
Midwest	286	107	591
Sligo/Leitrim/West Cavan	63	14	96

## Summary of findings

### 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

The 2017 themed inspection found substantial compliance in the Mayo Service Area in relation to this standard. The areas for further improvement centred on the correct classification of allegations and serious concerns to ensure they received the

<sup>1</sup>\*Tusla Monthly Reporting and Activity Data 2018 March (YTD)

correct response, updating of An Garda Síochána (police) vetting in a timely manner, management oversight of foster carers' attendance at training and outstanding safeguarding visits to 10 unallocated foster carers.

The 2018 follow-up inspection found that the Mayo area had made improvements in the categorisation of allegations and was following the Tusla Interim Protocol for managing allegations of abuse and neglect. Management oversight of allegations had improved with the use of a monitoring system, and safeguarding visits had been undertaken to unallocated foster carers. Since the last inspection, all foster carers had been allocated to a link social worker. Improvements had been made in relation to oversight of foster carers' attendance at training and a system had been put in place to ensure timely updates to Garda vetting.

However, inspectors found that further improvement was required to ensure the system for Garda vetting was effective. There were six foster carers who required updated vetting and seven households in which there were persons aged 16 and over who had not been Garda vetted. Improvements were also required to ensure that all foster carers attended training in Children First 2015 so that they understood their role as mandated persons under the Children First Act 2015.

In the Galway/Roscommon Service Area, the 2017 themed inspection found moderate non-compliance in relation to safeguarding and child protection. The areas for improvement related to allegations not always being notified to the Foster Care Committees and inconsistent classification of complaints, concerns and allegations to ensure the correct response. Inadequate systems were in place to ensure timely Garda (police) vetting of all foster carers and all adults living in fostering households.

In 2017, over half of the 220 general foster carers in the Galway/Roscommon Service Area did not have up-to-date Garda vetting (127 carers, or 57%). Not all staff were clear about the provisions of the protected disclosures policy and not all foster carers were trained in Children First.

The follow-up inspection in 2018 found that some progress had been made which led to improvements in the service area. The statement of progress returned by the area outlined that all the identified actions to ensure that staff were familiar with protected disclosures, and that all allegations were classified correctly, had now been completed. Actions to ensure that all foster carers were trained in Children First were on-going. In 2018, of the 216 general foster carers in the Galway/Roscommon Service Area, 49(22%) did not have updated Garda vetting. In addition to this, Garda vetting of adult members of the foster care households had not been completed for 20 households (7%) and the vetting of 16 to 18 year olds had not yet started.

The 2017 themed inspections had found major non-compliances in the Mid West and Sligo/Leitrim/West Cavan service areas in relation to this standard.

In the Mid West and in Sligo/Leitrim/West Cavan service areas, the areas for improvement included ensuring that all allegations were managed in line with Children First (2011), that all foster carers and adults in foster care households were Garda vetted, the need to improve management oversight of the progress of allegations, and putting in place adequate safeguarding arrangements for unallocated foster carers.

In the 2018 follow-up inspection, inspectors found that, overall, improvements had been made in the Mid West service area. The system of Garda vetting was effective and foster carers without an allocated link worker were being actively and regularly monitored. In the 11 months prior to the follow up inspection, 44 allegations had been made against foster carers. The area was implementing the "Tusla Interim Protocol for managing allegations of abuse and neglect" and allegations were managed in line with Children First. A formal monitoring and oversight system had been developed. However, the monitoring and oversight system did not provide monitoring of actions such as strategy meetings, notifications to the foster care committee and timely outcomes to investigations. Objective management oversight of these allegations was required to ensure that children were safe and that the protocol was fully implemented.

In 2018, inspectors found that in the Sligo/Leitrim/West Cavan Service Area, there had been improvements and developments in their safeguarding systems. Allegations were being managed in line with Children First. There was improved management oversight of allegations and concerns. Effective systems had been put in place to ensure correct categorisation and oversight of allegations and concerns. These systems also facilitated an increase in managerial oversight of the process of managing complaints. The system for ensuring updated Garda vetting for foster carers and Garda vetting for persons 16 years and over had improved. All foster carers had an allocated link worker.

In addition, in 2017, the Sligo/Leitrim/West Cavan Service Area did not always notify allegations and complaints to the Foster Care Committee, there were gaps in the recording of information on the investigation of allegations, complaints were not appropriately categorised and recording and filing systems required improvement. Not all foster carers with children in placement were trained in Children First and safe care practices.

The 2018 follow up inspection found that the foster care committee were now being notified of all allegations and concerns, and recording and filing systems were improving. However, further work was required to ensure that all foster carers had attended Children First training and understood their responsibilities under the Children First Act 2015. Social work records did not always reflect the chronology of allegations and concerns, and safety plans did not always consider all the children living in the foster care household, and this required further improvement.



## **Regional summary for Standard 10**

Overall, in 2018, every area in the West Region had made some progress in addressing areas of non-compliance identified during the 2017 inspections relating to safeguarding practices. However, progress was inconsistent across the West Region and further improvement was required to ensure that:

- all allegations were managed in line with Children First
- every area had effective systems of Garda vetting in place
- all areas implemented a consistent approach to the effective management of allegations and
- all foster care families were allocated a link worker.

The service director told inspectors that it maintained oversight of each area's compliance with this standard through regular management meetings with area managers. The service director acknowledged that there needed to be more emphasis on consistency of practice throughout the region.

All areas, with the exception of the Mid West, had adequate monitoring and oversight systems in place to ensure effective management of allegations. The service director told inspectors that a quality monitor had been assigned to the Mid West area to conduct an audit of allegations in order to provide assurances that they were being appropriately managed in line with Children First.

There were effective systems in place in the Mid West and Sligo/Leitrim/West Cavan service areas to ensure that Garda vetting of foster care households was in place and kept up-to-date. The service director told inspectors that additional resources were being sourced for the Mayo and Galway/Roscommon service areas to ensure timely and up-to-date Garda vetting for all appropriate persons.

All service areas were developing systems to support management oversight of foster carers' training, especially in relation to their new responsibilities as mandated persons under the Children First Act 2015 in reporting child protection and welfare concerns. The service director acknowledged the need for improved oversight of foster carers' training in Children First.

## **Standard 14a — Assessment and approval of non-relative foster carers**

In 2017, the themed inspections found that Galway/Roscommon and Mayo service areas complied with this standard. The Sligo/Leitrim/West Cavan and the Mid West service areas were found to be substantially compliant, and were progressing their action plans to reach full compliance with this standard.

## **Standard 14b — Assessment and approval of relative foster carers**

The 2017 themed inspections found substantial compliance in two service areas, namely Galway/Roscommon and Mayo, in relation to the assessment and approval of relative foster carers. Improvement was required in both areas to ensure that assessments of relative foster carers were completed in line with the timeframes in the *National Standards for Foster Care*. In Mayo, oversight of preliminary checks carried out prior to children being placed with relatives required improvement and in Galway/ Roscommon, foster care contracts were not always contained in foster carers' files.

The follow-up inspections in 2018 found that these areas continued to be substantially compliant with this standard. In Galway/Roscommon, practice had been further improved by the use of monthly matching-panel meetings to monitor the progress of relative assessments. Since the 2017 inspection, the Mayo Service Area had conducted an audit on the progress of assessments. However, this audit had not resulted in improvements in compliance because it did not facilitate monitoring and oversight of the timeline of the assessments. In addition, a draft protocol had been developed in the Mayo Service Area for pre-placement checks, which the service director told inspectors was due for approval by the area manager.

The 2017 themed foster care inspections had found moderate non-compliance in the Mid West and Sligo/Leitrim/West Cavan service areas in relation to this standard. In the Mid West Service Area, the 2017 inspection had found a significant number of relative foster carers who had not been assessed but who had children placed with them. There were 140 relative foster carers in the Mid West in 2017. Of these, 20(14%) had children placed with them but had not been assessed. The assessments of relative foster carers were not carried out in a timely manner and not all preliminary checks were completed for emergency placements with relatives.

In addition, not all relative foster care files contained a contract in respect of each child placed. In the Sligo/Leitrim/West Cavan Service Area, the 2017 inspection had found that the arrangements and oversight to ensure pre-placement checks were carried out prior to the placement of a child with relatives in an emergency were not sufficient and there were delays in starting and completing relative assessments.

In the 2018 follow-up inspection, HIQA inspectors found that insufficient progress had been made in the Mid West area to address delays in the assessment and approval of relative foster carers. While a private fostering agency had been engaged to carry out assessments and an additional two staff were appointed to undertake assessments, there were now 26 relative carers (24%) who had not been assessed, which was an increase. Therefore, the actions taken following the 2017 inspection to progress the relative fostering assessments in the Mid West Service Area had proved ineffective. The service director told inspectors that the delays in

conducting relative assessments would be addressed through increased staff resources.

The statement of progress completed for the Mid West Service Area in 2018 indicated that preliminary checks for emergency placements with relative carers included initial screening and emergency checks. In addition, unapproved relative carers were prioritised for assignment of a link social worker to undertake the supervisory and support role, while all unapproved relative carers were being notified to the foster care committee.

A revised system, overseen by the area manager, had been put in place to ensure that contracts of care were placed on foster carers' files.

In 2018, in the Sligo/Leitrim/West Cavan service area, the follow-up inspection found that new systems, protocols and tools were being put in place to ensure that pre-placement checks on relative foster carers were completed and recorded. These systems and protocols were still at the early stages of implementation and needed to be fully embedded in practice to ensure that children placed with relatives in an emergency were safe; that all checks had been completed; and that practice was consistent throughout the area.

The Sligo/Leitrim/West Cavan Service Area only had three relative assessment applications in the year prior to the thematic inspection in 2017. However, the timeliness of these assessments was not in line with the regulations. In order to address this deficiency, the area's self-assessment form reflected that there was now a full complement of staff on the fostering team and, in addition, managers planned to use supervision sessions with staff carrying out assessments to track the progress and timeliness of assessments.

The effectiveness of these measures could not be assessed at the time of the follow-up inspection as there had not been a sufficient number of relative care assessments completed in the area to determine whether the actions taken to address this deficiency were effective in bringing the area into compliance. However, the fact that there was now a full complement of staff on the fostering team, and the recognition that enhanced oversight of the timeliness of assessments was necessary-through the use of supervision-were all positive steps in moving towards compliance.

### **Regional Summary Standard 14(b)**

Overall, progress had been made in three of the four areas, but in one area, namely the Mid West Service Area, the lack of resources had an impact on the level of progress made. The governance of the service areas required improvement both at service-area and regional level. Efficient use of resources was required so that improved systems and practices made in one area were shared and implemented across the region. There was little consistency across the region in the approach to

improving services and no evident sharing of learning or development between the areas. It was evident that each area within the West Region functioned independently and developed their own systems and practices in relation to the deficiencies found in the themed inspections carried out in 2017. For example, there were several different protocols in place for completing emergency checks, and one area's protocol was still in draft form.

The service director told inspectors that three area managers had been newly appointed for Sligo/Leitrim/West Cavan, the Mid West and Galway/Roscommon service areas and a regional working group was being set up to review and streamline all the systems in place throughout the region. In addition, a quality monitor had been assigned to the Mid West Service Area to support the area with the implementation of the 2017 action plan and to monitor progress towards compliance with the standards. The service director said that oversight of the areas was conducted through regular one-to-one supervision meetings with area managers, management team meetings, the analysis of performance indicators and consistent reviews and updates of risk registers for each area. Deficiencies in resources were also being addressed to ensure that staff vacancies were filled. A service improvement plan was being developed to ensure that where deficiencies had been identified, action would be taken and monitored to ensure that the areas were moving towards compliance.

### **Standard 15 — Supervision and support of foster carers**

The 2017 themed foster care inspections found moderate non-compliance in relation to this standard in the Galway/Roscommon and Mayo service areas. The areas for improvement in both areas related to unallocated foster carers. In the Galway/Roscommon area, of a total of 284 foster care households, 6(2%) did not have a link worker. In Mayo, of 97 foster carers, 21(21.6%) did not have a link worker. Other areas requiring improvement included the regularity of home visits to foster carers, inconsistent quality of supervision and support visits, and no dedicated out-of-hours services to support foster carers in emergency situations in line with the standards.

In the Galway/Roscommon Service Area, there was inconsistent managerial oversight of formal supervision by link workers of foster carers, while recording of support and supervision also required improvement. In the Mayo Service Area, there were no support groups for foster carers.

In 2018, the statement of progress indicated that in the Galway/Roscommon Service Area, all foster carers had now been allocated a link social worker and foster carers were receiving good quality support and supervision. The area was implementing its

support and supervision policy, which outlined that foster carers should be visited four times annually. Some improvements had been made in the recording of formal supervision: a supervision template had been developed for use twice each year to ensure formal supervision of foster carers was recorded. Management of this process was strengthened by improvements in the supervision process between the link social workers and their managers. Filing systems were improving and remaining actions to address these deficiencies were on-going.

In the Mayo Service Area, inspectors found in the 2018 follow-up inspection that significant progress had been made to address the identified areas of non-compliance with this standard. All unallocated foster carers had been allocated a link social worker and the teams were working toward being compliant with the Tusla national policy which outlined that support visits to foster carers should take place no less than twice a year. Systems had been put in place to ensure that managers had oversight of the quality and regularity of the support and supervision process. The service area had made some progress in relation to providing support groups for foster carers, but this required further development. Progress was continuing in relation to supporting foster carers where placements were at risk of disruption. The area had identified a psychologist and play therapy service to augment the work of the link social worker and the child's social worker.

The 2017 themed foster care inspections found major non-compliance in relation to this standard in the Sligo/Leitrim/West Cavan and the Mid West service areas. In the Sligo/Leitrim/West Cavan Service Area, unallocated foster carers did not receive sufficient support and supervision and the quality of support provided to foster carers who had a link worker was inadequate. Supervision of foster carers was not carried out in line with national policy. There was insufficient oversight of unassessed and unapproved relative foster carers and a lack of case management and supervision of link social workers to ensure the quality of the support provided. The quality of record-keeping was inconsistent and there were no chronologies on files to highlight critical information and significant events in relation to the foster carers.

In 2017 the Mid West Service Area, a high number of foster carers, both general foster carers and relative carers, had no allocated link worker. Of the total of 427 foster care households, 36 households (8%) did not have an allocated link worker and seven households (1.6%) were dual unallocated, that is to say, neither the foster carer nor the child in placement with them had an allocated social worker. There were inadequate safeguarding measures in place for foster carers who did not have a link social worker and for those foster carers who were dual unallocated. Foster carers did not receive regular support or formal supervision.

Both service areas provided limited respite care and other services to support foster carers who were caring for children with complex needs. There were no Tusla-led support groups for foster carers in Sligo/Leitrim/West Cavan and no dedicated out-of-hours service to support foster carers in either the Mid West or Sligo/Leitrim/West Cavan service areas.

In 2018, in the Sligo/Leitrim/West Cavan Service Area, inspectors found that there had been improvements and developments under this standard. These improvements had been recently implemented and were still evolving. All foster carers had been allocated a link worker since December 2017 and records reflected that good quality supervision was being provided to foster carers. The oversight of the quality of the support and supervision provided by link social workers to foster carers was effective and recorded in foster carers' files sampled. The level of support for foster carers caring for children with complex needs was mixed and the service was making efforts to address this with coordinated plans of support. The area's plans to address the absence of chronologies had yet to be progressed. The service director told inspectors that work would be carried out across the region to highlight those carers requiring additional supports so that they could be linked into local community-provided support services as appropriate to their needs. The service director further acknowledged the importance of early intervention and support for foster families, especially in preventing breakdown and in supporting difficult placements to ensure they remained stable.

The follow-up inspection in 2018 found that in the Mid West some progress had been made. When supervision visits to foster carers were carried out, the records were of good quality. There was improved management of the risks associated with unallocated foster carers. Therapeutic services were being developed to enhance the support provided to foster carers who were caring for children with complex needs.

However, significant issues remained. The quality of the supervision and support provided to foster carers was poor in some offices and better in others. Overall, foster carers did not receive consistently good quality support.

In the Mid West Service Area, the number of foster carers without a link worker had increased since the 2017 inspection. In 2018, of 393 foster families, 47(12%) did not have an allocated social worker. Of these, two families were dual unallocated, that is to say neither the foster family, nor the child in the placement, had an allocated social worker. In addition, there were two unassessed and unapproved foster families that did not have an allocated link social worker. These unallocated families were being actively monitored through home visits every three months to manage the risks associated with them.

In the Mid West Service Area, the actions taken had not adequately addressed the non-compliances and sufficient progress had not been made towards compliance

with the standards. In its self-assessment the area deemed itself to be substantially compliant, despite the increase in unallocated foster carers. This is concerning since it indicates that the management in the area did not see that the significant number of unallocated foster carers, including two dual unallocated carers, as being a major non-compliance, and therefore may not prioritise taking timely action to address the risks. The service director acknowledged that some of the completed self-assessments returned to HIQA had not accurately reflected the areas compliance. She agreed that if the completed self-assessments did not accurately reflect the deficiencies, then appropriate actions might not be taken to address the non-compliances.

The service director told inspectors that the service improvement plan for the Mid West Service Area would be an important driver of improvement in that area. In addition, she said that dual unallocation was not tolerable and that mechanisms would be put in place to support foster carers without an allocated link social worker. Improved recruitment processes were planned to ensure timely filling of vacancies which had contributed to some of the deficiencies, particularly in the Mid West Service Area.

### **Regional Summary Standard 15**

Overall, in 2018, all the four service areas had made some improvements in relation to support and supervision of foster carers. The service director agreed that practice in relation to support and supervision was in development across the region. Improvements included all foster carers having an allocated link social worker in three of the four service areas, except in the Mid West where the number of unallocated general foster carers had further increased by three to 33 families.

The service director told inspectors that the service improvement plan for the Mid West would focus on addressing these resource deficits. The quality of management oversight of supervision and support of foster carers by link workers was developing and improving. In the Mayo Service Area, management oversight of supervision and support included auditing of files, reviews of databases that held a record of visits to foster carers and escalation of overdue visits to the relevant link worker. In the Sligo/Leitrim/West Cavan Service Area, a local policy on visitation requirements and the use of supervision between staff and their managers was used to oversee and monitor the regularity and quality of support and supervision provided to foster carers.

The quality of the recording of supervision was improving in all areas following the introduction of templates for recording support and supervision and clear expectations about the required number of visits to foster carers each year. Further developments planned for 2018 included the use of the National Child Care Information System (NCCIS) to help manage the oversight of support and

supervision, and use of the Tusla quality assurance and monitoring department in ensuring that timely actions were taken to address outstanding areas of non-compliance.

Support groups were available in the Galway/Roscommon Service Area and some were available in the Mid West. The Sligo/Leitrim/West Cavan Service Area had some support groups but they were not established throughout the entire geographical area. The service director acknowledged the different levels of support provided to foster carers through support groups and stated that support groups for foster carers were of critical importance in bringing foster carers together.

The lack of an out-of-hours service for foster carers is a national issue being progressed by Tusla and which the national office have indicated will be due for completion by quarter 3 in 2018, subject to successful negotiations with unions.

## **Standard 16 – Training**

The 2017 themed inspections found that Galway/Roscommon, Mayo and the Mid West service areas were substantially compliant in relation to this standard. The areas for improvement centred on a lack of oversight and monitoring of foster carers' attendance at training events and files not containing a record of training attendance. In the Galway/Roscommon Service Area, a training needs analysis had not been conducted to identify the training needs of foster carers. In the Mid West Service Area, not all relative carers had attended the foundation training required for fostering in a timely manner, and there was no training budget to ensure that on-going training for all foster carers was provided in a timely manner.

In 2018, the statement of progress completed by the Galway/Roscommon Service Area indicated that they had completed all the actions identified to address the deficiencies and bring the area into compliance with this standard: a training needs analysis had been completed; records of training were contained in foster carers' files; and a programme of training had been developed for 2018.

In the Mayo Service Area, some improvements had been made but some actions remained outstanding to ensure compliance with this standard: training records were being maintained on foster carers files and a training needs analysis was underway in order to inform a 2018 training programme for foster carers. The training needs analysis had just started and the training programme for 2018 was not yet finalised.

In the Mid West Service Area, inspectors found some actions were completed in relation to providing foundation training to relative carers and to ensure that records of training attended was contained on foster carers' files. A training programme had also been developed. The service director told inspectors that funding for training



was not an issue and lack of funding would not impede progress to ensure the region's compliance with this standard.

The service director acknowledged that training programmes provided should address both the general training needs of foster carers as well as those training needs specifically identified by foster carers themselves.

In 2017, the Sligo/Leitrim/West Cavan Service Area was found to be moderately non-compliant with this standard. The areas for improvement related to a lack of a training strategy to ensure that all foster carers attended regular and appropriate on-going training, training records not being well maintained and a training needs analysis not being carried out.

In 2018, inspectors found the following improvements in the Sligo/Leitrim/West Cavan Service Area;

- a training needs analysis had been carried out
- a comprehensive schedule of training had been developed for 2018.
- Files contained all relevant training records and
- there was a centralised system for oversight of foster carers' attendance at training.

### **Regional Summary Standard 16**

Overall, in the West Region all areas were working through the actions outlined in their action plans to improve their compliance with this standard. The service director told inspectors that the regional management team did not receive routine reports on foster carers' training but that consideration would be given at regional management team meetings to including foster carers' attendance at training on the agenda.

### **Standard 17 — Reviews**

In the 2017 themed foster care inspections, one area, namely the Mayo Service Area was found to be compliant with this standard. The Galway/Roscommon Service Area was found to be moderately non-compliant. The areas for improvement related to the fact that out of 285 foster carers, 71 of them (25%) had not been reviewed in three years or more. Reviews of foster carers did not include key activities such as including the views of the foster carers' own children, updated Garda vetting and updated health and safety checks. Allegations against foster carers were not always followed up with a review of the foster carers, while foster carers did not receive copies of the report of the foster care review meeting.

In 2018, inspectors found from the statement of progress provided by the area that while some progress had been made; there was substantial work to be completed to bring the Galway/Roscommon Service Area into compliance with this standard. Seventy-nine foster care reviews had been completed since the previous inspection. There were 25 reviews outstanding, but all of these were scheduled to be completed by the end of quarter two in 2018.

A further 39 foster care reviews were due for those foster carers who had been fostering for 12 months. The area was therefore not in line to meet the timeframes for completion of actions outlined in the 2017 action plan. Systems of oversight to ensure the implementation of the recommendations made at reviews were in development. The service director said that she was assured that the Galway/Roscommon Service Area had a detailed plan in place to address all the deficiencies identified in the 2017 inspection.

In 2017, major non-compliances with this standard were found in the Mid West and Sligo/Leitrim/West Cavan Service Areas. Neither area had a system in place to ensure timely implementation of recommendations from foster care reviews.

In the Mid West, in 2017, there was no effective system to ensure that foster carers' continuing capacity to foster was reviewed. In 2017, of 427 foster carers, 140 foster carers (32%) had not been reviewed in more than three years. Reviews that did take place were poor and foster carers did not receive copies of the review report. The foster care committee was not notified of all reviews, and additional reviews were not conducted following allegations against foster carers.

In the Sligo/Leitrim/West Cavan Service Area, comprehensive reviews of foster carers were not carried out in line with the standards and over half of all foster carers had not been reviewed in more than three years. Foster care reviews did not include updating Garda vetting, medicals and health and safety checks. Full information in relation to foster care reviews was not notified to the foster care committee in order to fully inform its recommendations.

The follow-up inspection in 2018 found that the Mid West Service Area self-assessed its compliance with this standard as being 'substantially compliant'. The area had completed 118 reviews of foster carers since March 2017. A further 118 were still outstanding at the time of the follow-up inspection. The area's action plan identified that all outstanding foster care reviews would be completed by quarter 2 in 2018, but deficits in staffing meant that a large number of planned reviews were cancelled and therefore the area was unable to address the backlog.

The quality of the foster care reviews remained inconsistent and still varied from good quality to poor. The service director expressed concern that the quality of reviews was mixed but was confident that these deficiencies would be addressed

through the implementation of the service improvement plan and the continued involvement of the assigned quality monitor for the service area.

In 2018, inspectors found that while some progress had been made in Sligo/Leitrim/West Cavan, it was not sufficient to support the area's self-assessment of being 'substantially compliant'. The quality of reviews had improved and good quality reports were written. The voice of the child was included as part of the review process, which also included updating of medicals, Garda vetting and health and safety checks.

Inspectors found good practice in oversight of foster care reviews by team leaders. However, the backlog of reviews had not been adequately addressed and this was escalated at the time of the 2018 follow-up inspection for a satisfactory and timely plan. The service director acknowledged the significant backlog of foster care reviews and acknowledged that a balance would be required to ensure that the improved quality of foster care reviews would be maintained in conjunction with an increase in carrying out reviews. Work was progressing in both areas to ensure that the recommendations from foster care reviews would be implemented in a timely manner.

### **Regional Summary Standard 17**

Overall, the three areas where deficiencies had been identified in the themed inspections in 2017 were making progress in 2018 in becoming compliant with the standard in relation to reviews of foster carers, but the progress was insufficient to support the improved compliance rating suggested by their self-assessment form.

The standards state that foster carers should 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. At the time of the follow-up inspections, there remained a total of 212 foster carer reviews outstanding in the West Region. The failure by managers in two areas to recognise this as a major non-compliance with this standard poses a risk that this may not be considered a priority and therefore not be responded to appropriately. In addition, the quality of foster care reviews throughout the region was inconsistent and ranged from good to mixed to poor. Oversight of the foster care review process was inadequate to ensure that the quality of reviews was consistently good.

The learning from the good quality reviews in other areas had not been transferred to all areas in the region in order to promote consistency and good practice. The service director told inspectors that a regional group was being set up to improve consistency of practice and to drive improvement across the West Region. She said that systems were being shared to improve consistency and that the governance

framework would ensure good managerial oversight and assure the service director of the region's progress towards 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 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.

#### **Standard 23 — The Foster Care Committee (FCC)**

The 2017 inspections found that the Mayo and Sligo/Leitrim/West Cavan service areas were substantially compliant with this standard. Systems in both areas for monitoring allegations against foster carers required some improvement. In Mayo, the panel of foster carers did not contain all the required information, Garda vetting for all committee members was not timely and there was no formal induction for members of the foster care committee.

In the Sligo/Leitrim/West Cavan Service Area, the foster care committee was not notified of breaches of standards such as when the numbers of children placed with a foster family exceeded the numbers of children allowed under the standard or when foster carers were fostering outside of their approval status. The committee did not identify whether Garda vetting, medicals and safety checks had been updated as part of foster care reviews or identify when foster carers required further training.

In 2018 inspectors found that improvements had been made in the Mayo Service Area. A revised format for the foster care panel now included all the relevant information and a new induction and training programme was in place for members of the foster care committee. Insufficient progress had been made since the themed inspection in 2017 in relation to Garda vetting, as this had not been processed for a number of members of the foster care committee.

In 2018, the self-assessment for the Sligo/Leitrim/West Cavan Service Area indicated that the compliance remained at 'substantially compliant'. The foster care committee had established an oversight system to monitor the progress of allegations against foster carers. The committee had access to the area's oversight system for

allegations and the chairperson of the committee met with the area manager to review this on a quarterly basis. This new system needed to be fully implemented and evaluated over time in order to be effective.

In addition, the foster care committee was now being notified of families who had more children placed with them than the standards allow and of families who were fostering outside of their approval status. This was relevant when the foster care committees were considering the appropriateness of long term matches with these families. Practice and procedure was amended to ensure that all the necessary checks were conducted prior to the foster care review taking place. The area continued to monitor progress with the actions in the 2017 action plan in order to achieve compliance with this standard.

In the 2017 themed inspections, moderate non-compliances were found in the Galway/Roscommon and the Mid West service areas in relation to this standard. In both areas, the foster care committees did not have adequate oversight of all allegations against foster carers and there was no induction or training programme in place for foster care committee members.

In Galway/Roscommon, the foster care committees did not verify supporting documentation for foster carer assessments and did not approve long-term placements as required by the standards. Neither of Galway/Roscommon's two foster care committees contributed to strategic planning.

In 2017, in the Mid-West Service Area:

- notifications of allegations and breaches of the standards were not always made to the foster care committee
- these notifications were not always timely
- not all the members of the foster care committee had updated Garda vetting
- there was no system in place to ensure Garda vetting was kept up to date,
- and the foster care committee had not produced an annual report for 2016.

The 2018 follow-up inspections found that in the Galway/Roscommon Service Area, practice had improved. Allegations were being notified to the relevant foster care committee and final outcomes were being notified following the completion of the investigation of the allegation. Both foster care committees were overseeing all assessment documentation. An induction policy and an induction pack had been developed for new members of the foster care committees and some relevant training had been provided for members of the committees. Developments were also taking place to ensure that the committees could oversee the need for long-term matches and that the foster care committees fulfilled their role in approving long-term placements.

In 2018, inspectors found that in the Mid West Service Area, some progress had been made to address the deficiencies identified in the themed inspection of 2017. Members of the committee had been Garda vetted. However, a lack of resources had delayed implementation of actions required to bring this area into compliance with the standard. Further actions were required to ensure adequate management oversight of allegations and serious concerns against foster carers.

### **Regional Summary Standard 23**

Overall, across the region, progress had been made in relation to foster care committees. However, further development was required to ensure that all the foster care committees in the region functioned in a standardised manner and fulfilled all their functions under the standards and in compliance with the Tusla national policy procedure and best practice guidelines. The oversight of the foster care committees in the region was the responsibility of a quality and risk manager who formally reported to the service director on the functioning of the foster care committees. The service director acknowledged that further work was required in order to bring the foster care committees into compliance both with the standards and the Tusla national policy procedure and best practice guidelines for foster care committees.

### **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 — Retention and recruitment of foster carers**

In 2017, three of the service areas in the region were found to be substantially compliant with this standard, namely: Galway/Roscommon, Mayo and the Mid-West. In all three areas, there was an insufficient number and range of foster carers to meet the needs of children requiring placements. The Galway/Roscommon Service Area had no retention strategy and the panel of foster carers was not regularly reviewed. In the Mayo Service Area, insufficient resources impacted on service development and in the Mid West Service Area, exit interviews had not been conducted with foster carers.

In 2018, the follow-up inspections found that in Galway/Roscommon, there were recruitment strategies in place and a retention policy had been developed. Additional resources had been put in place for recruiting new foster carers and the panel of

foster carers was reviewed through the monthly matching meetings. In the Mayo Service Area, work was on going to recruit and retain foster carers. Actions had been taken to progress recruitment for particular age groups and across a range of cultural backgrounds in order to expand the number of foster care available on the panel. Further resources were required to ensure that new foster care applicants were not put on a waiting list for assessment.

In the Mid-West Service Area in 2018, recruitment campaigns had been held since the last inspection and these had been evaluated. Further campaigns were planned to coincide with National Fostering Week. Exit interviews were conducted with foster carers, who gave up fostering, in order to inform service development. There was a recruitment and retention strategy in place. A gap had been identified in the service for placements for older children with complex needs. Financial assistance had been requested from the national office to fund a recruitment strategy to provide placements for these children.

In 2017, the Sligo/Leitrim/West Cavan Service Area was found to be moderately non-compliant with this standard. The areas for improvement related to the insufficient range of foster carers to meet the needs of children requiring placements. There had been four recruitment campaigns held in the twelve months prior to the 2017 inspection resulting in nine foster care applicants. However, whilst three assessments had been completed and the foster carers approved two families had stopped fostering so there had only been a net gain of one new foster carer household. There was no overall strategy for retaining foster carers, and the panel of foster carers was not reviewed periodically to ensure there was an appropriate number and range of foster carers to meet the needs of children. While there were a number of foster carers listed as available to take placements of children, they were limited in the type of care they could provide and in their availability. Insufficient staff resources had impacted on the area's ability to effectively recruit additional foster carers.

In the follow-up inspection in 2018, the Sligo/Leitrim/West Cavan Service Area demonstrated a commitment to the recruitment and retention of foster carers. A recruitment plan had been implemented and the panel of foster carers was reviewed and analysed to identify the range of foster carers required to meet the needs of the service. Initiatives to promote retention of foster carers were evidenced in the area and exit interviews were conducted to inform improvements in the service. Further work was needed to develop and improve respite support to foster carers.

## **Regional Summary Standard 21**

Overall, the recruitment of foster carers was identified as an on-going task for all service areas in the Tusla West Region. The action plans from the themed

inspections in 2017 were being implemented across the region in order to achieve compliance with this standard. These actions included rolling recruitment campaigns, development of a recruitment working party, working with the national office to enhance the recruitment strategy, consulting with recruitment professional to consider recruitment strategies, oversight of exit interviews and targeted recruitment from different cultures.

The service director told inspectors that there was a national recruitment strategy in place. She acknowledged that if recruitment resulted in higher numbers of fostering applications, then consideration would have to be given to enabling timely assessment processes. The service director acknowledged that the Mid West Service Area had identified a particular need for placements for children with complex needs and the importance of maintaining placements through increased support being provided to foster carers.

## Conclusion

Significant changes had occurred in the governance and management structures in the West Region between the 2017 themed inspections and the 2018 follow up inspections. The service director- met with as part of the follow up inspection in 2018- had commenced in the post in October 2017, and therefore was still in the process of putting clear governance and reporting structures and mechanisms in place, to ensure that all areas in the West region made progress in relation to the areas identified in the 2017 inspections. In addition, there were three newly appointed area managers in three of the areas in the West region.

New initiatives set up by the service director in the region included;

- a strategic review of the Mid West Service Area
- a service improvement plan for the Mid West service area
- a quality and risk monitor to conduct audits in the Mid West service area
- meetings with area managers on a six-weekly basis
- quality and risk manager to oversee all the foster care committees in the region
- improved risk escalation processes
- oversight by monitoring officer
- setting up of a regional working group to progress consistency of practice in the region
- quality assurance reviews to be conducted as appropriate
- meetings with business managers to share systems across the region
- human resources working group at regional level



- enhanced recruitment processes were planned to ensure timely filling of posts.

Also there was a National recruitment strategy planned in relation to recruitment of new foster carers.

However, the lack of shared learning between areas was a significant finding, and the lack of a consistent approach in the region to address the non-compliances found in the 2017 inspections, showed poor and ineffective governance. For example, each area setting up their own protocols in response to the 2017 inspection findings, for the placement of children with relatives in an emergency, showed inefficient use of resources. Reporting structures from each area to the service director also varied, meaning that each area submitted a different report format in relation to the same issue to the service director, for example foster carers trained in Children First. Each area individually set up tracking systems, such as for tracking of Garda vetting, again despite this work already having been completed in another area. This meant that each area was using different systems to collate information, and report it to the service director in a variety of ways. It also meant that, despite resources being a challenge for some areas, taking systems already developed from another area would have been a more efficient use of resources. Furthermore, when areas of good practice were highlighted in the 2017 inspections in one area, for example, the good quality of reviews in Galway/Roscommon, and the training initiative in that area, these were not shared or utilised by the other areas in the region, in order to drive continual improvement and consistency.

Failure to recognise major non-compliances by some managers was also of concern. However, inspectors were assured that the service director was fully aware of the areas that required immediate action, and demonstrated through the initiatives she had put in place in her time since taking up the post that these issues were being prioritised.

Significant progress had been made in several areas across the region and this had led to an improvement in the service provided, such as three of the four areas had addressed the issue of unallocated foster carers and no longer had any unallocated foster carers. There remained however significant risks in the Mid West area in relation to assessments of relative carers, and the high numbers of unallocated foster carers.

HIQA will continue to monitor the progress in the West region through each area's action plan and in particular will continue to seek updates in relation to the major non-compliances in the Mid-West area.

## **Appendix 1 – Standards and regulations for statutory fostercareservices**

<b><i>National Standards for Foster Care (April 2003)</i></b>
<b>Theme 1: Child-centred Services</b>
<p><b>Standard 1: Positive sense of identity</b> Children and young people are provided with foster care services that promote positive sense of identity for them.</p>
<p><b>Standard 2: Family and friends</b> Children and young people in foster care are encouraged and facilitated to maintain and develop family relationships and friendships.</p>
<p><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.</p>
<p><b>Standard 4: Valuing diversity</b> 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.</p> <p><b><i>Child Care (Placement of Children in Foster Care) Regulations, 1995</i></b> <i>Part III Article 8 Religion</i></p>
<p><b>Standard 25: Representations and complaints</b> Health boards<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.</p>

<sup>¥</sup>Where reference is made to Health Boards these services are now provided by the Child and Family Agency.

## ***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*

#### **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 Children with Relatives) Regulations, 1995***  
*Part III, Article 7: Assessment of circumstances of the child*

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

**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*

**14b. Assessment and approval of relative foster carers**

Relatives who apply, or are requested to apply, to care for a child or young person under Section 36 (1)(d) of the Child Care Act, 1991 participate in a comprehensive assessment of their ability to care for the child or young person and are formally approved by the health board.

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

*Part III, Article 5 Assessment of relatives*

*Part III, Article 9 Contract*

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<sup>2</sup>Formally health boards at the time of writing the Standards, now The Child and Family Agency (Tusla).

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

**Standard 15: Supervision and support**

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

**Standard 16: Training**

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

**Standard 17: Reviews of foster carers**

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

**Standard 22: Special Foster care**

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

### **Theme 3: Health and Development**

#### **Standard 11: Health and development**

The health and developmental needs of children and young people in foster care are assessed and met. They are given information, guidance and support to make appropriate choices in relation to their health and development.

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

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

*Part IV, Article 16 (2)(d) Duties of foster parents*

#### **Standard 12: Education**

The educational needs of children and young people in foster care are given high priority and they are encouraged to attain their full potential. Education is understood to include the development of social and life skills.

### **Theme 4: Leadership, Governance and Management**

#### **Standard 18: Effective policies**

Health boards have up-to-date effective policies and plans in place to promote the provision of high quality foster care for children and young people who require it.

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

*Part III, Article 5(1) Assessment of foster carers*

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

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

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

*Part IV, Article 12 Maintenance of register*

*Part IV, Article 17 Supervision and visiting of children*

**Standard 23: The Foster Care Committee**

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

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

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

**Standard 24: Placement of children through non-statutory agencies**

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

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

**Theme 5: Use of Resources****Standard 21: Recruitment and retention of an appropriate range of foster carers**

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

**Theme 6: Workforce****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.