

**Health Information and Quality Authority  
Regulation Directorate**

**Monitoring Inspection Report -**

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



<b>Name of Agency:</b>	Origins Foster Care Service
<b>Dates of inspection:</b>	12 February 2019
<b>Number of fieldwork days:</b>	1 day
<b>Lead inspector:</b>	Ruadhan Hogan
<b>Support inspector(s):</b>	Jane McCarroll Ann Delany
<b>Type of inspection:</b>	<input checked="" type="checkbox"/> <b>Announced</b> <input type="checkbox"/> <b>Unannounced</b> <input type="checkbox"/> <b>Full</b> <input checked="" type="checkbox"/> <b>Themed</b>
<b>Inspection ID:</b>	<b>0026276</b>

## 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, and can be announced or unannounced.

As part of the HIQA 2017, 2018 and 2019 monitoring programme, HIQA is conducting thematic inspections focusing on the **recruitment, assessment, approval, supervision and review of foster carers**. These foster care inspections will be announced and will cover the standards related to the theme.

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

<b>Theme 1: Child-centred Services</b>	<input type="checkbox"/>
<b>Theme 2: Safe and Effective Services</b>	<input checked="" type="checkbox"/>
<b>Theme 3: Health and Development</b>	<input type="checkbox"/>
<b>Theme 4: Leadership, Governance and Management</b>	<input checked="" type="checkbox"/>
<b>Theme 5: Use of Resources</b>	<input checked="" type="checkbox"/>
<b>Theme 6: Workforce</b>	<input type="checkbox"/>

## 1. Inspection methodology

As part of this inspection, inspectors met with the relevant professionals involved in Origins Foster Care service. Inspectors 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:

- safeguarding processes
- supervision, support and training of foster carers
- management and monitoring of Origins Foster Care service.

The key activities of this inspection involved:

- the analysis of data
- interview with the company directors, social work team leader, two link social workers and telephone discussions with three foster carers
- review of the relevant sections of foster carers' files and children's files as they related to the theme.

## Acknowledgements

HIQA wishes to thank the managers and staff of the service for their cooperation with this inspection.

## 2. Profile of the foster care agency

### The Service Provider

Origins Foster Care service provides a range of fostering services including respite, short term and long-term placements. According to the agency's statement of purpose, the aim of the service is to provide high-quality fostering placements to enable children and young people to enjoy a positive experience of family life.

At the time of the inspection Origins Foster Care was made up of two company directors who were also the company owners. They were directly involved in the management of the service and their respective roles were the head of operations and the head of fostering. A social work team leader had been recruited on a part time basis three weeks prior to the inspection. Three link workers were employed on a part time contract basis. Two further staff members provided business and administration support.

Prior to the inspection, data provided by Origins Foster Care service showed that the service had seven foster care households and provided foster care placements for six children. These households were located in various geographical areas around Ireland.

Placements in Origins Foster Care service are commissioned by TUSLA service area teams.

The organisational chart in Appendix 1 describes the management and team structure as provided by the service.

### 3. 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.

Origins Foster Care Service is a 'for profit' organisation and its services are monitored by Tusla. The service received a visit from the Tusla monitoring service six weeks prior to the inspection. A report from that monitoring visit had been issued in draft to Origins Foster Care and was in a process of feedback and factual accuracy at the time of the HIQA inspection.

This report reflects the findings of the thematic inspection, relating to the recruitment, assessment, approval, supervision and review of foster carers, 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 which is attached to this report.

Origins Foster Care Service was established in September 2016 and began providing foster care services from September 2018. At that time, four foster carers transferred from another fostering agency into the service. A further three foster carers transferred from another fostering agency one week prior to the inspection.

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

- One standards was compliant
- Three standard were substantially compliant

This was HIQA's first inspection of Origins Foster Care. Overall, despite the service being relatively new, it was well run and delivered a high quality service to foster carers.

Safeguarding systems were in place and were effective. All foster carers were allocated a link social worker and received regular visits. All appropriate persons, including foster carers and staff had An Garda Síochána (police) vetting and training on the role of a mandated person in line with the Children First Act 2015. Allegations were appropriately notified to the relevant social work department, investigated and an outcome was reached. Inspectors found the timeframes for escalating delays were problematic where allegations with significant concerns had been identified. Safety plans were in place where required and appropriately set out measures to ensure children's safety. However, records relating to the monitoring and oversight of these plans required improvement.

At the time of the inspection, Origins Foster Care was closed to admissions following the recent transfer of three foster carers into the service. The company owners identified that they wanted to settle the seven families that had transferred into the service since September 2018, in order to build relationships and the carers trust with the service. They had also deferred undertaking a review of the four carers who had transferred into the service in September to facilitate this but these were scheduled to be completed by May 2019.

The supervision and support provided to foster carers was of good quality. Issues were addressed as they arose which de-escalated potential problems before they impacted on the stability of children's placements. Foster carers told inspectors that they were happy with the level of support they received.

Origins Foster Care identified some but not all of foster carers individual training needs. A training plan was in place that covered the first half of 2019. The company directors said that specific training needs would be identified and addressed in the second half of 2019 once a comprehensive review of their fostering files and foster care reviews were completed.

The service was well led, with a clear reporting structure and roles and responsibilities were well defined. The service had a number of good policies and procedures in place, some of which had been updated following an inspection by the Tusla monitor. Communication systems were effective and regular good quality staff supervision was taking place. Monitoring and oversight systems were in place and were due to be further enhanced as additional personnel were recruited. The company directors had a good knowledge of the key issues and had resourced the service taking account of these. For example, additional administrative staff had been recruited to assist with uploading fostering files to their information technology system. Risk management system required improvement.

The service had been challenged in obtaining timely comprehensive histories from other fostering agencies when foster carers were transferring into the service. This

had resulted in some transfers occurring in an unplanned and rushed manner. Much of this was outside of the control of Origins Foster Care who had escalated their concerns to the lead service director for fostering within Tusla at a recent meeting.

## 4. Summary of judgments under each standard and or regulation

During this inspection, inspectors made judgments against the National Standards for Foster Care. They used four categories that describe how the 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
<b>Theme 2: Safe and Effective Services</b>	
<b>Standard 10:</b> Safeguarding and child protection	Substantially Compliant
<b>Standard 15:</b> Supervision and support	Compliant
<b>Standard 16:</b> Training	Substantially Compliant
<b>Theme 4: Leadership, Governance and Management</b>	
<b>Standard 19:</b> Management and monitoring of foster care agency	Substantially Compliant

## 5. 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

Safeguarding systems were in place and were effective. There was an overall child protection policy which guided staff and foster carers in keeping children safe. This policy also referenced specific policies such as complaints made by children, safe care within the foster care household and bullying. All foster carers had an allocated link worker who visited regularly. Records showed that unannounced home visits to foster carers by a team leader or the head of fostering took place in line with the service policy. Additionally, the link workers sometimes met with children as part of their visits. All foster carers and employees within the service had up-to-date An Garda Síochána (police) vetting. All relevant personnel within Origins Foster Care, including foster carers had completed training on the role of a mandated person in line with 'Children First: National Guidance for the Protection and Welfare of Children 2017'. There was a policy in relation to notifying significant events to Tusla and from the review of files, inspectors found that all significant events had been appropriately reported.

Origins Foster Care made every effort to analyse foster carers histories, from a safeguarding perspective, prior to the transfer of foster carers into the service. However this process became difficult due to the information received being poorly organised. Origins Foster Care were not responsible for this chaotic transfer and had subsequently reviewed the files to obtain key information to assure themselves that there were no safeguarding issues.

Origins Foster Care did not ensure that all employees were familiar with the protected disclosures policy and procedure. There was a policy and procedure in place which referenced the relevant legislation, outlined what a protected disclosure was and to whom it could be made within Origins Foster Care. However, while some employees were aware of protected disclosures and told inspectors they knew how to research more information, they were not familiar with how to make a protected disclosure and the protections afforded under the legislation.

Origins Foster Care had a policy on the management of allegations and serious concerns which was in line with the Tusla 'Interim protocol on the management of serious concerns and allegations'. The Origins Foster Care policy had been reviewed and updated prior to the inspection. In addition, they also had a policy and procedure on escalation of issues to Tusla when Origins Foster Care experienced a delay in the management of allegations. Inspectors found the timeframes for escalating delays were problematic where allegations with significant concerns had been identified.

According to data returned to HIQA, there had been one report of an allegation made against a foster carer since September 2018. The report had been appropriately notified to the relevant Tusla social work department. An initial strategy meeting had been held to decide whether it required an investigation in line with 'Children's First: National Guidance for the Protection and Welfare of Children 2017'. An outcome strategy meeting was subsequently held on completion of the investigation where it was decided that the outcome of the investigation was unfounded. The management at Origins Foster Care told inspectors that they intended to undertake a foster care review once all documentation was received.

Safety plans were in place where required and appropriately set out measures to ensure children's safety. However, records relating to one of these plans required improvement. Inspectors found that the subsequent recording of the implementation and monitoring of the safety plan by Origins Foster Care was poor. The head of fostering told inspectors that there had been discussions between the foster carers and the link worker in relation to the monitoring of this plan while the investigation was on-going. She acknowledged that the recording of link worker visits and case management did not reflect on-going monitoring.

### **Judgment: Substantially Compliant**

**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 15:**

All foster carers were supervised and supported by a professionally qualified social worker (known as the link worker). As stated, three foster carers transferred into Origins Foster Care in the week prior to the inspection. As a result, inspectors did not review the supervision and support that Origins Foster Care provided to these foster carers. Nonetheless, the remaining four foster carers were reviewed for the quality of supervision and support provided since they joined the agency in October 2018.

The directors at Origins Foster Care told inspectors that they intended to use the initial months following the transfer of foster carers into the service to build relationships and the carers trust with the service. Following this period, they intended to undertake a foster care review which was scheduled for completion by May 2019.

The supervision and support provided to foster carers was of good quality. Inspectors found that foster carers had been visited in line with the Origins Foster Care policy which stipulated that foster carers should be visited every four to six weeks at a minimum by an allocated link worker. Over the course of the four months for which a fostering service was provided, there was an improvement in the record keeping by the link worker. While some of the earlier visits were recorded as case notes, more recent visits were documented on a supervision template to ensure consistency which improved the quality. Some home visits were pre-arranged and others were unannounced. Records showed that link workers had a good balance of addressing concerns with the provision of good quality support during these visits. Issues were addressed as they arose which de-escalated potential problems before they impacted on the stability of children's placements. Records also showed that foster carers received weekly telephone calls from their link worker with an increased level of telephone contact when issues arose. Foster carers told inspectors that they were happy with the level of support they received.

At the time of inspection, Origins Foster Care had not yet established a support group for foster carers.

There was a dedicated 24 hour out-of-hours service available to foster carers. This was maintained on a rotational basis by the head of operations and the head of fostering. At the time of the inspection, the management of Origins Foster care told inspectors they intended to expand the out-of-hours service to include the social work team leader which provided assurance that the arrangement was more sustainable.

**Judgment: Compliant**

**Standard 16: Training**

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

**Summary of inspection findings under Standard 16**

Origins Foster Care had a sufficient training plan for foster carers that covered the first half of 2019. This identified core training modules for foster carers and included induction training, training on the role of a mandated person under the Children Act 2015, safe care training, record keeping for foster carers and first aid. Additional training to support foster carers in line with the service model of care was also identified in the training plan.

Origins Foster Care identified some but not all of foster carers individual training needs. Foster carers did identify some training needs during visits with their allocated link social worker visits. As stated, all foster carers in Origins Foster Care had previously been fostering with other fostering agencies. At the time of the inspection, Origins Foster Carer had not yet undertaken a comprehensive review of their fostering files to identify training previously completed while foster carers were with the other fostering agencies. Additionally, foster carers had not yet undergone a foster care review with Origins Foster Care. The company directors told inspectors they were taking time to get to know foster carers prior to undertaking a foster care review and the review process would identify further specific training needs which they said would be addressed in the second half of 2019. A learning development plan was to be developed for each foster carer based on their individual needs such as training on looking after teenagers.

**Judgment: Substantially Compliant**

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

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

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

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

**Summary of inspection findings under Standard 19**

At the time of the inspection, Origins Foster Care was closed to admissions following the recent transfer of three foster carers into the service. The company owners identified that they wanted to settle the seven families that had transferred into the service since September 2018, in order to build relationships and the carers trust with the service. Further placements of children with the current foster carers were to be reviewed on a monthly basis. The directors also said that management systems needed to be more firmly established and implemented throughout the organisation before further placements were made. This provided HIQA with assurance that children would be safely cared for while these management systems were developed.

There were clear lines of accountability and authority within Origins Foster Care. The company was owned by two company directors who were also directly involved in the management of the service. The head of operations and the head of fostering were suitably qualified, had management training and had significant experience in social work with children.

The directors of Origins Foster Care service demonstrated clear leadership and had a well thought out vision of how they intended the service to operate and the steps that were required for this to happen. Inspectors saw strategic plans that outlined how the service would grow and what was required to enable this growth. The directors of Origins Foster Care told inspectors that a high quality service was

expected to be provided to foster carers so that children would have their needs met in stable placements.

Roles and responsibilities between management roles were defined. The head of fostering oversaw a social work team leader who had recently taken up the role. The social work team leader provided oversight of three link social workers who had been contracted to provide supervision and support to the seven foster carers as and when required for a period of one year when it was intended a full time link worker would be recruited. The head of operations oversaw the full operation of the service and his specific oversight responsibilities included administration functions, business management including recruitment of new foster carers and engagement with the primary stakeholder Tusla.

There were effective reporting systems within the service. As the service was small and the directors were involved in establishing all aspects of the service, frequent discussions on the status of key areas such as allegations, supervision and support, foster care reviews and foster carer training were recorded in team and management meetings and staff supervision. Additionally, a reporting system had been established to oversee the recruitment of new foster carers, although, at the time of inspection this remained untested as the service was not actively recruiting new foster carers. These systems would need to be kept under review as Origins Foster Care grows in complexity in line with strategic plans.

The Tusla monitoring service undertook a monitoring visit six weeks prior to the HIQA inspection and had raised concerns in relation to governance within the organisation such as recruitment practices and the provision of policies and procedures. Inspectors found that Origins Foster Care had proactively taken steps to address these areas of concerns.

Management systems were established, effective and evolving in line with the service needs. Monitoring and oversight of foster carer files was of good quality. Records showed that the head of fostering and the social work team leader signed off and approved link worker case notes relating to phone calls, home visits and communication with external professionals. The directors also outlined their plans for auditing systems to be established once further recruitment of staff was successful and this plan was also observed in management meetings. This included the recruitment of a compliance officer who would audit files and practice to ensure the full implementation of policies and procedures.

Communication systems were of good quality. Team and management meetings took place regularly and recordings of the meetings had actions outlining the persons responsible and timeframes for completion. Staff members who spoke to inspectors said that communication in the service was effective.

Risk management within Origins Foster Care did not adequately identify and outline measures to mitigate against specific risks. There was a risk management framework in place. Inspectors reviewed the service risk register and found it was not up-to-date with known risks. While some risks had been identified, other known risks had not been. For example, organisational risks such as the challenges associated with transfer of foster carers into the service had not been identified nor had measures been put in place to lessen these risks.

Origins Foster Care endeavoured to undertake a due diligence process of foster carers who transferred into the service from another fostering agency. While transfer meetings were held just prior to the foster carers becoming part of Origins Foster Care, the service was challenged in obtaining timely comprehensive histories from other fostering agencies prior to the transfer. This had resulted in some transfers occurring in an unplanned and rushed manner. Much of this was outside of the control of Origins Foster Care who had escalated their concerns to the lead service director for fostering within Tusla at a recent meeting. The service subsequently reviewed key documents to assure themselves that they knew all relevant information relating to the foster carers history of fostering, in order to provide the foster carers with the appropriate service.

At the time of the inspection, a significant amount of work was still required to ensure this review was comprehensive. The directors at Origins Foster Care told inspectors they intended to recruit additional staff recruited to meet this challenge and had a plan to undertake foster care reviews for all foster carers who transferred into the agency and these reviews were due for completion in May 2019.

While the foster care files had been well organised within Origins Foster Care secure online filing system, accessing files would become a significant challenge as the service grows. The management in Origins Foster Care were aware of this issue and told inspectors that they were planning to upgrade their information technology systems.

There were policies relating to the recruitment and induction of new workers. These had been revised prior to the inspection in response to a visit from the Tusla monitoring service who had found that recruitment procedures, specifically relating to the number of references obtained were not sufficient. Subsequently, Origins Foster Care had revised these procedures and at the time of the inspection was in the process of retrospectively obtaining an additional reference for current employees. Inspectors found that the documenting of this process required improvement to ensure that the names of the referees were recorded on the reference template. The service was in a period of expansion with new roles such as

an independent reviewing officer, link worker and a compliance officer at various stages of the recruitment process. There were induction policies to guide employment of new staff.

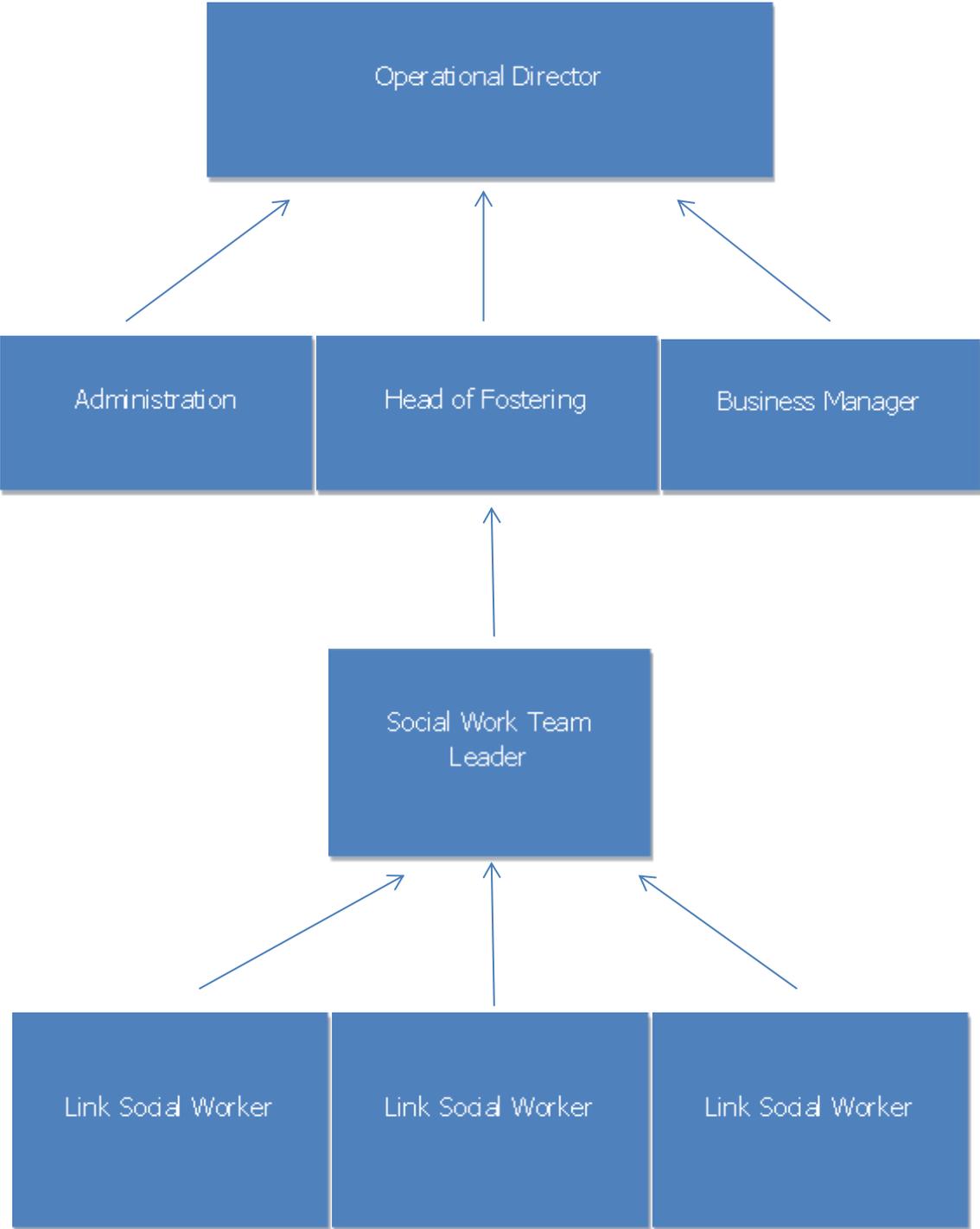
Supervision was used effectively to provide oversight and ensure a good quality service was provided to foster carers. Origins Foster Care had a supervision policy which stated that it was to take place on a monthly basis. Inspectors reviewed staff supervision records and found that the frequency was in line with the policy. In addition, supervision records reflected good quality case discussion and agreed actions.

Tusla did not have a service level agreement in place with Origins Foster Care.

**Judgment: Substantially Compliant**

**Appendix 1.**

**Figure 1: Organisational structure of Non-Statutory Foster Care Services, in Origins Foster Care Service**



# 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.

<b>Provider's response to monitoring report number:</b>	0026276
<b>Name of service area:</b>	Origins Foster Care
<b>Date of inspection:</b>	12 February 2019
<b>Date of response:</b>	15 <sup>th</sup> March 2019

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: Substantially Compliant

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

The timeframes for escalating delays where allegations with significant concerns had been identified required review.

The recording of the monitoring and implementation of safety plans required improvement.

Origins Foster Care did not ensure that all employees were familiar with the protected disclosures policy and procedure.

#### **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 management team have reviewed and updated the escalation policy to ensure there is a robust system in place to deal with allegations and significant concerns. The policy sets out roles and responsibilities to ensure there is required implementation and timescales identified for reporting and tracking outcomes.

The escalation policy was updated by the Head of Fostering Services on 15<sup>th</sup> March 2019 to ensure that it is in line with the time frames outlined in the Tusla procedure for the management of allegations and significant concerns.

The Head of Fostering Services ensures staff are trained to understand and take the necessary action under this policy through staff induction, staff supervision and through team meetings.

The implementation of the policy is the responsibility of the head of fostering service. It is audited through supervision and review of case notes by the social work team leader.

2. The social work team leader has a practice guide in place for completion of

safety plans since 1<sup>st</sup> March 2019. There is a tracker in place to monitor the implementation of safety plans and ensure they are updated within specific timeframes. This is reviewed on a monthly basis.

Ensuring that safety plans are on file is the responsibility of the link worker. This area of service activity is supervised by the social work team leader.

The safety plan is completed by the child's allocated social worker in collaboration with the link worker. A meeting is scheduled by agreement between the link worker and the allocated social worker. The safety plan is drawn up at the meeting. The implementation and monitoring of the safety plan is reviewed by the Team Leader through staff supervision.

3. The Head of Fostering Services concluded a review of the implementation of the Protected Disclosure Policy on 1<sup>st</sup> March 2019. All employees have been issued with a copy of the Employee Handbook and Protected Disclosure (Whistleblowing) Policy. This is recorded on their HR file with signed receipt. There is training provided on the implementation of this policy at induction.

<b>Proposed timescale:</b>	<b>Person responsible:</b>
Completed – 15 <sup>th</sup> March 2019	Head of Fostering

**Standard 16: Training**

**Judgment: Substantially Compliant**

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

The individual training needs of foster carers were not sufficiently identified.

**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:**

An audit of foster carer training needs was completed by the team leader on 5th February 2019 this took place through file review, discussion with link workers and discussion with foster carers. The team leader has rolled out a three month training programme for all foster carers from that date.

The social work team leader has put a training log in place to monitor and track training for each foster carer from 15th March 2019.

Each Foster Carer family will have a full training plan in place by 30th June 2019 following updated review of their training needs.

The Head of fostering services has put a master tracker in place as of 15th March 2019 to ensure training is implemented and this is tracked and audited on a monthly basis. This is to ensure training has been provided and foster carers have attended required training events.

The Head of fostering services will review the results of the master tracker in supervision with the team leader for further required actions.

The operations manager will put the results of the master tracker on the team meeting agenda for discussion on a quarterly basis commencing in March 2019.

Proposed timescale:	Person responsible:
30 <sup>th</sup> June 2019	Head of Fostering

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

**Theme 5: Use of Resources**

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

**Judgement: Substantially Compliant**

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

Risk management within Origins Foster Care did not adequately identify and outline measures to mitigate against specific risks.

**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 action you have taken or are planning to take:**

The operations manager has put in place a company risk register updated on 1st March 2019. This identifies and names the categories of risk for the agency and the risk is scaled from 1 to 5 in severity. The Operations Manager has put in place a system of reporting, collecting, analysing and evaluating these categories of risk within a standard template. This information is collected on a monthly basis from each department in Origins Foster care and placed in the standardised template. The company risk register is reviewed by the Directors on a monthly basis in the Directors meeting and an action plan created and reviewed against each identified risk. The risk is evaluated and the scaling updated to where the risk is well understood and moves down on the scale and off the register. Otherwise the risk remains on the register as a live matter to be managed through further and on going monthly review.

The operation of the risk register is cross referenced to a number of other operational policies to ensure that when operational risks are identified across the various operational activities that those are placed on the company risk register to be scaled and managed. This includes but not exclusive to policies on the following -

- Recruitment and retention of staff
- Staff supervision
- Staff training
- Supervision of foster carers
- Review of Foster carers.
- Transfer of foster carers from other agencies.
- Out of hours service
- Training of foster carers.
- Implementation and review of Safety plans
- Child protection registers.
- Escalation policy.

This is audited through the organisational meetings including Directors meetings, management meetings, team meetings and quarterly meetings with Tusla Service Director.

The Directors have recruited additional social work and administrative personnel to have foster carer reviews commenced in March 2019 and all completed by 30th June 2019. Priority for review is being given to those carers arriving from agencies that have closed for business.

The Directors communicated in writing with Tusla regional service representative in March

2019 that there were deficits in the transfer process for carers transferring from other agencies. The agency has committed that a record of the deficits will be created and communicated to Tusla as carer reviews are completed by June 2019.

The Directors have formally acknowledged with Tusla that the National Policy for transfer of carers is not robust and does not offset fully the risks associated with carers transferring from one agency to another. A request has been made to meet with the liaison Tusla service Director to resolve this. Request for meeting sent in March 2019 to be followed up in quarterly meeting with Tusla area manager by 31st May 2019.

<b>Proposed timescale:</b>	<b>Person responsible:</b>
30 <sup>th</sup> June 2019	Operations Manager