



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

Regulation and Monitoring  
of Social Care Services

**Assessment Judgment  
Framework for  
Statutory Foster Care  
Services  
April 2023**

*Safer Better Care*

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## Introduction

HIQA is authorised by the Minister for Children, Equality, Disability, Integration and Youth under section 69 of the Child care Act, 1991 as amended by Section 26 of the Child Care (Amendment) Act 2011 to inspect foster care services provided by the Child and Family Agency (Tusla)<sup>1</sup>. The Chief Inspector in HIQA is responsible for administering this function on behalf of HIQA. HIQA report on its findings to the Minister for Children, Equality, Disability, Integration and Youth.

HIQA promotes a human-rights based approach that upholds children's core human rights, principles of fairness, respect, equality, dignity and autonomy. Respecting diversity, promoting equality and treating children fairly and with dignity as well as including them in decisions about their care help to ensure safe and effective care.

HIQA and the Chief Inspector use a standardised monitoring and inspection approach that promotes consistency. We call this the 'Authority Monitoring Approach' (AMA). All inspectors adhere to this approach and to any associated procedures and protocols. Applying AMA and using this assessment judgment framework ensures that each provider is treated fairly and the assessment of compliance is timely, consistent and responsive to risk identified within the foster care service. It also provides transparency to providers and the public on how HIQA assesses and makes judgments of compliance and non-compliance.

This monitoring approach does not replace the professional judgment of inspectors. Instead, it gives inspectors a range of procedures, protocols and tools to assist them in carrying out their functions. This combined assessment judgment framework is one of these tools.

HIQA has also produced a guidance to support this assessment-judgment framework. The application of AMA does not replace or take away from the providers' responsibility to ensure that they are in compliance with the standards and regulations, and provide safe high-quality services for children who use their services and ensuring children's rights are upheld.

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<sup>1</sup> Tusla was established 1 January 2014 under the *Child and Family Agency Act 2013*.

## Assessment-judgment framework

There are two purposes to this assessment-judgment framework:

- it supports inspectors in gathering evidence when monitoring or assessing a service and to make judgments on compliance. The framework sets out examples of the lines of inquiry (questions) to be explored by inspectors
- It supports providers to self-assess their own service.

## Compliance descriptors

We make judgments on whether the provider is: compliant, substantially compliant or not compliant with the standards. We term these 'compliance descriptors', and they are used to assess performance against each of the standards.

Table 1 shows what these levels of compliance mean.

**Compliant:** a judgment of compliant means the provider is in full compliance with the relevant standard and regulation.

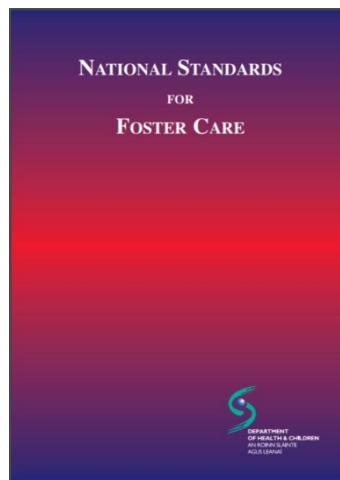
**Substantially compliant:** a judgment of substantially compliant means that the provider has generally met the requirements of the standard and regulation, but some action is required to be fully compliant. This finding will have a risk rating of yellow, which is low risk.

**Not compliant:** a judgment of not compliant means the provider has not complied with a standard and regulation and that considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of person using the service will be risk-rated red (high risk), and the inspector will identify the date by which the provider must comply. Where the non-compliance does not pose a significant risk to the safety, health and welfare of persons using the service, it is risk-rated orange (moderate risk) and the provider must take action *within a reasonable time frame* to come into compliance.

The assessment judgment framework should be applied in conjunction with the following:

- The Health Act 2007 (as amended)
- Child Care Act 1991
- Child Care (Amendment) Act 2015
- Child Care (Placement of Children in Foster Care) Regulations, 1995
- Child Care (Placement of Children with Relatives) Regulations, 1995
- *The National Standards for Child Protection and Welfare 2012*
- *The National Standards for Foster Care, 2003*
- Children First: *National Guidance for the Protection and Welfare of Children* (2017)
- The United Nations Convention on the Rights of the Child (UNCRC)
- HIQA's Monitoring, Compliance and Escalation procedure

## Section 2 – *The National Standards for Foster Care* (2003)



The national standards are grouped into three sections:

- Section 1 focuses on children and young people,
- Section 2 on foster carers and
- Section 3 on the Health Boards, now Tusla.

At the time of the development of these standards, the former health boards were responsible for the provision of foster care services. Since 2003, non-statutory providers of foster care services have commenced operating services. In 2014, The Child and Family Agency (Tusla) became the statutory provider of foster care services. Therefore, for the purposes of inspecting foster care

services, HIQA under Section 3 of the *National Standards for Foster Care* inspects the provider of the foster care service.

Under each section, standard statements are provided with a list of criteria describing what a good service looks like and how the standard may be met. The standards are available to download on the HIQA website, [www.hiqa.ie](http://www.hiqa.ie).

## The children and young people

This section focuses on how the provider ensures that children and young people receive a safe service.

It includes how the provider:

- promotes children’s rights, diversity and sense of identity
- assesses the needs of children, plans and monitors the care provided to children
- ensures that foster carer's homes provide a safe and healthy environment for children
- keeps children protected from any harm and abuse
- matches the needs of children with foster carers who are able to meet their needs.

<b>Standard 1</b>	<b>Positive sense of identity</b> Children and young people are provided with foster care services that promote a positive sense of identity for them.
<b>Lines of enquiry</b>	Does the provider ensure that a positive sense of identity is promoted by foster carers and social workers by: <ul style="list-style-type: none"> <li>▪ respecting children’s families, their culture and ethnicity, religion, sexual identity, illness, disability and stage of development?</li> <li>▪ supporting children to understand information about their family and time in care?</li> <li>▪ involving children in decisions about their care?</li> <li>▪ prioritising a placement in the local community and facilitating children to remain at the same school?</li> <li>▪ working in partnership with their families?</li> <li>▪ not making judgments about a child’s family?</li> </ul>
	Does the provider ensure that: <ul style="list-style-type: none"> <li>▪ children and their families are listened to and are involved in decisions about their care?</li> <li>▪ placements with relatives or friends of a child is</li> </ul>

	<p>always sought in the first instance?</p> <ul style="list-style-type: none"> <li>▪ siblings are kept together wherever this is appropriate?</li> <li>▪ where possible, continuity of care each time a child requires respite care, or when children are re-entering care?</li> <li>▪ the particular needs of children with disabilities/medical needs are recognised in decisions about their care?</li> <li>▪ comprehensive and legible records are maintained on all children in foster care in consultation with parents, families and significant others?</li> <li>▪ any decision to withhold information or to delay provision of it is recorded on the case file?</li> <li>▪ they facilitate and encourage children to access their records and provide them with information as appropriate about their care and family records?</li> <li>▪ children are supported to understand as appropriate, information about their family and events in their lives?</li> <li>▪ children have regular contact with their families, friends and significant others and their communities?</li> </ul>
	<p>Does the provider ensure that foster carers recognise the importance of personal items from children’s life before care, for understanding their sense of self?</p>
	<p>Does the provider ensure that foster carers and professionals who have been involved in a child’s care are encouraged to maintain contact and mark special events with the child?</p>

<p><b>Standard 2</b></p>	<p><b>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>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ consider contact between children and their families and friends in identifying an appropriate placement, particularly if this placement is outside of the child’s community?</li> <li>▪ place siblings together? Where this is not possible, are high levels of contact between siblings given due consideration?</li> <li>▪ ensure that contact with family and friends is</li> </ul>



	<p>maintained as set out in children’s care plans?</p> <ul style="list-style-type: none"> <li>▪ involve families of children in their care where appropriate? If families are not involved is this clearly recorded and the reasons known to parents?</li> <li>▪ facilitate and seek children’s views on who are the significant people in their lives in agreeing plans for contact?</li> <li>▪ have clear procedures in place for agreeing, maintaining, monitoring and reviewing arrangements between children and their families and friends?</li> <li>▪ facilitate contact between children and their family and friends using a variety of media?</li> <li>▪ encourage contact to take place in the foster home where possible? Where this is not possible, are appropriate facilities provided by the social work department?</li> <li>▪ support families and friends to maintain contact with children and are they assisted where necessary?</li> <li>▪ recognise and support children’s need for peer relationships?</li> <li>▪ keep parents and / or significant family members informed about events in their children’s lives and encourage them to participate where appropriate?</li> </ul>
	<p>Does the provider ensure that where contact with family and friends is supervised:</p> <ul style="list-style-type: none"> <li>▪ are children and families clear on the reasons for supervision of contact where this is required?</li> <li>▪ is the decision to supervise contact clearly recorded on children’s files?</li> <li>▪ is the supervision of contact managed in the least intrusive manner and the decision to supervise regularly reviewed?</li> </ul>
	<p>Does the provider ensure that when children do not have regular contact with their families, the reasons for this are discussed with them from time to time and these discussions are recorded in case files?</p>

<b>Standard 3</b>	<p><b>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 their views, including complaints, heard when decisions are made which affect them or the care they receive.</p>
<b>Lines of enquiry</b>	<p><b><i>Dignity</i></b>          Does the provider ensure that:</p> <ul style="list-style-type: none"> <li>▪ children are provided with personal care appropriate to their age, stage of development, gender, culture, ethnicity, religion and individual needs?</li> <li>▪ children are enabled to be independent consistent with their age, stage of development and individual needs?</li> </ul> <hr/> <p><b><i>Privacy</i></b>          Does the provider ensure that children have:</p> <ul style="list-style-type: none"> <li>▪ undisturbed contact with their family and friends unless there are clear reasons not to do so?</li> <li>▪ age-appropriate opportunities to be alone?</li> <li>▪ their personal effects and correspondence respected by foster carers and social work staff members?</li> </ul> <hr/> <p><b><i>Choice</i></b>          Does the provider ensure that:</p> <ul style="list-style-type: none"> <li>▪ children are encouraged and enabled to develop their abilities, aptitudes, skills and interests?</li> <li>▪ Children are supported to access and understand information about them appropriate to their age, stage of development and individual needs and provided with opportunity to correct inaccuracies if required?</li> <li>▪ children’s views are sought and considered in all decisions about their care?</li> <li>▪ children know how to make a complaint and are given a copy of the complaints procedure in an age appropriate format?</li> <li>▪ children are assisted to make a complaint, where necessary?</li> <li>▪ complaints made by children are taken seriously and dealt with promptly?</li> <li>▪ children have access to information about services available to them and information held about them on their case files?</li> <li>▪ children have choices about choosing and buying their clothes, saving and spending money, hobbies and activities?</li> </ul>

<p><b>Standard 4</b></p>	<p><b>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>Regulation 8</b></p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ encourage children and young people to understand, appreciate, practice or express their religious<sup>2</sup>, cultural, ethnic and sexual identity?</li> <li>▪ facilitate children to understand and manage their disability or illness as appropriate to their age, stage of development, individual needs and wishes?</li> <li>▪ support children to develop skills to deal with discrimination?</li> <li>▪ support children and young people to participate in decisions about their care through access to advocacy and support services?</li> <li>▪ ensure that children with a disability/medical condition are provided with appropriate services and supports to help them maximise their potential including where necessary, the adaptation of the carer’s home and/or vehicle?</li> <li>▪ facilitate where possible, to place children with carers from their own cultural, ethnic and religious group?</li> <li>▪ support carers to enable children to develop positive understandings of their origins and backgrounds when children are placed outside of their cultural, ethnic or religious group?</li> </ul>

<sup>2</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part III, Article 8

<p><b>Standard 5</b></p>	<p><b>The child and family social worker</b>                  There is a designated social worker for each child and young person in foster care.</p> <p><b>Regulation 17(1) &amp; 13 (1) &amp; (2)</b></p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider allocate a social worker to each child for the duration of their time in care?</p> <hr/> <p>Does the provider ensure that social workers:</p> <ul style="list-style-type: none"> <li>▪ co-ordinate the care of children and ensure compliance with statutory requirements and standards?</li> <li>▪ arrange assessments for children as required?</li> <li>▪ develop care plans and ensure that decisions made are implemented?</li> <li>▪ have responsibility of placing children in foster care?</li> <li>▪ arrange child in care reviews which ensures that the views of children and their families are taken into account?</li> <li>▪ visit children in the foster home and meet with them in private, as outlined in the Child Care Regulations 1995<sup>3</sup>?</li> <li>▪ work with families to maintain links and encourage and facilitate contact with families where this is in the best interests of children?</li> <li>▪ take appropriate action in response to significant events while a child is in care and ensure that families are kept informed?</li> <li>▪ ensure that the welfare of the children is promoted and they are protected from abuse?</li> <li>▪ ensure children have access to specialist services, when required?</li> <li>▪ co-ordinate the input of other professionals and agencies?</li> <li>▪ maintain up-to-date records in respect of each child including a record of each visit to the child?</li> <li>▪ explain the complaints procedure to children and families and provide them with a written copy of this?</li> <li>▪ assist children, where necessary to make a complaint about any aspect of their care?</li> </ul>

<sup>3</sup> Within the first month of placement, at least every three months during the first two years of placements and at intervals no exceeding six months thereafter

<p><b>Standard 6</b></p>	<p><b>Assessment of children and young people</b> 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.</p> <p><b>Regulation 6 (1) &amp; 7(1)</b></p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider ensure that the decision to use a foster care placement is based on an assessment<sup>4</sup> which determines this to be in the best interests of the child?</p> <p>Does the provider ensure that the assessment:</p> <ul style="list-style-type: none"> <li>▪ comprehensively covers the physical, emotional, psychological, medical, educational and other needs of children?</li> <li>▪ takes account of any previous assessments, and ensures a multidisciplinary approach is used, where appropriate?</li> <li>▪ encourage and facilitate children, their families and others involved in their care to participate in the process?</li> </ul> <p>Does the provider ensure that the social worker ensures that an assessment of the child’s needs is carried out prior to the placement of a child in foster care?</p> <p>Does the provider ensure that in the case of a decision to place a child in foster care in an emergency:</p> <ul style="list-style-type: none"> <li>▪ that an assessment was carried out as soon as possible after the placement has been made, or completed within one week of the commencement of the placement and a comprehensive assessment is completed within six weeks of commencement?</li> </ul> <p>Does the provider ensure that unplanned admissions to foster care are made in exceptional circumstances only and the reasons for these admissions recorded on the case file?</p> <p>Does the provider ensure that copies of the assessment outcomes are provided to families and foster carers?</p> <p>Does the provider ensure that assessment outcomes are shared with children in an age-appropriate manner?</p> <p>Does the provider ensure that decisions made are clearly recorded in the assessment report on the case file?</p>

<sup>4</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part III, Article 6(1)  
Child Care (Placement of Children with Relatives) Regulations, 1995, Part III, Article 7(1)

<b>Standard 7</b>	<p><b>Care planning and review</b>          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.</p> <p><b>Regulation 11, 18, 19, &amp; 20</b></p>
<b>Lines of enquiry</b>	<p>Does the provider ensure that all children have an up-to-date and comprehensive written care plan?</p> <p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ develop comprehensive, written care plans in consultation with children, their families, foster carers and significant others as required by the regulations<sup>5</sup>?</li> <li>▪ involve disability services in developing care plans for children with a disability?</li> <li>▪ prepare care plans before a child is placed or, in case of an emergency placement, within 14 days?</li> <li>▪ ensure care plans are informed by the assessment of the child's needs?</li> </ul> <p>Does the provider ensure that care plans set out all of the requirements outlined under Standard 7.4 of the National Standards for Foster Care, 2003?</p> <p>Does the provider ensure that separate placement plans are developed, dated and signed by the social worker, link worker and foster carers and are they consistent with the child's care plans?</p> <p>Does the provider ensure that children, parents, where appropriate, foster carers and fostering link workers are made aware of the particulars of the child's care plan and placement plan?</p> <p>Does the provider ensure that reviews of the care plan take place as required by the regulations<sup>6</sup>?</p> <p>Does the provider ensure that reviews consider whether:</p> <ul style="list-style-type: none"> <li>▪ the circumstances of the parents of the child has changes?</li> <li>▪ the circumstances of the foster placement has changed?</li> <li>▪ it is in the best interests of the child to return to the parent's care?</li> <li>▪ adoption is in the best interests of the child in long-term foster care?</li> <li>▪ the care plan and its overall goal requires to be amended?</li> </ul>

<sup>5</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part III, Article 11

<sup>6</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part IV, Article 18(1)

	<p>Does the provider ensure that reviews are convened and conducted in a manner that facilitates the participation of children, family members and foster carers?</p>
	<p>Does the provider ensure that:</p> <ul style="list-style-type: none"> <li>▪ social workers, link workers and other relevant professionals involved in the care, education, health and development of the child participate in the care plan review process?</li> <li>▪ the outcome of the review is discussed with the child?</li> <li>▪ a written account of the decisions of the review given to the child, the parents, where appropriate, and the foster carers and a copy is retained on the case file?</li> <li>▪ care planning and review processes are well managed and monitored?</li> <li>▪ a review is carried out when a placement is at risk of ending, or, following unplanned endings, to assess and learn from the circumstances that led to the unplanned endings?</li> </ul>

<p><b>Standard 8</b></p>	<p><b>Matching carers with children and young people</b> Children and young people are placed with carers who are chosen for their capacity to meet the assessed needs of the children and young people.</p> <p><b>Regulation 7</b></p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ select foster carers for children who have the capacity to meet their assessed needs<sup>7</sup>?</li> <li>▪ match carers with children based on the written assessment of the child's needs and their care plans?</li> <li>▪ achieve matches by means of information sharing and discussion involving all relevant professionals, the children and their families, where appropriate, and the proposed foster carers, their families and other children in the placements?</li> <li>▪ reconsider the appropriateness of a match if the plan or circumstances for the child changes?</li> </ul> <p>Does the provider seek to establish links between the children's family and the foster carers to enable children to settle in their placement?</p> <p>Does the provider ensure that children, where possible, spend time</p>

<sup>7</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part III, Article 7

	with the foster carers prior to being placed?
	Does the provider ensure that children's views are considered throughout the matching process?

<b>Standard 9</b>	<b>A Safe and Positive Environment</b> Foster carers' homes provide a safe, healthy and nurturing environment for children or young people.
<b>Lines of enquiry</b>	<p>Does the provider ensure that children are:</p> <ul style="list-style-type: none"> <li>▪ supported in placements that promote and protect their rights?</li> <li>▪ cared for with affection, valued and supported, and is their welfare promoted and their developmental needs met?</li> <li>▪ cared for in stimulating environments with appropriate opportunities for play and learning?</li> <li>▪ supported and encouraged to maintain and make new friendships?</li> <li>▪ supported to keep in contact with their friends, family and interests if appropriate?</li> <li>▪ provided with adequate, appropriate and well-maintained clothing?</li> <li>▪ rights protected and promoted?</li> <li>▪ supported in their health and emotional needs, as well as with their personal, cultural, ethnic and religious preferences in regard to all aspects of their care including diet?</li> </ul> <p>Does the provider ensure that foster carer's homes:</p> <ul style="list-style-type: none"> <li>▪ are safe?</li> <li>▪ are adequate and sufficient for the number of people living in the home? Are maintained to a good standard and have enough space to allow children to have privacy?</li> <li>▪ and their environments are free of avoidable hazards?</li> <li>▪ promote the rights of the child?</li> </ul> <p>Does the provider ensure that foster carer's vehicles are safe, clean and are maintained to meet all legal requirements?</p>



<p><b>Standard 10</b></p>	<p><b>Safeguarding and Child Protection</b>                  Children and young people in foster care are protected from abuse and neglect.</p>
<p><b>Lines of enquiry</b></p>	<p><b>Re: Safeguarding:</b></p> <p>Has the provider a process in place that allows link workers to:</p> <ul style="list-style-type: none"> <li>▪ provide foster carers with guidance and training in caring for children who have been neglected or abused, safe care practices, understanding and managing challenging behavior, and maintaining a record of the foster placement?</li> <li>▪ advise foster carers on the appropriate use of sanctions and ensure they understand that corporal punishment in any form or any humiliating treatment is unacceptable and prohibited?</li> <li>▪ provide foster carers with clear guidance on what they are required to do if a child goes missing from their care?</li> </ul> <p>Does the provider ensure that foster carers and link social workers are aware of the vulnerability of children in care to bullying and abuse and are there procedures in place to record and address these matters?</p> <p>Does the provider ensure that practices, policies and procedures are in place to promote the safety and welfare of children and ensure that children are protected and safe from all forms of abuse?</p> <p>Does the provider ensure that safeguarding policies and procedures are in line with Children First (2017) and adhere to international human rights instruments, relevant legislation, regulations, national policy, professional guidance and evidence-based guidelines?</p> <p>Does the provider ensure that foster carers are:</p> <ul style="list-style-type: none"> <li>▪ given full information in writing about children in order to safeguard the child, the foster carers themselves and their own children or other children who may have contact with the children placed in foster care? Is this information treated with confidence and stored securely?</li> <li>▪ informed of their right to refuse to accept a placement?</li> <li>▪ supported with access to respite care, counselling and out of hours services as agreed in the care plan?</li> </ul> <p>Does the provider ensure that the number of children placed in</p>

	foster care households is in line with standard 10.6? <sup>8</sup>
	Do the foster care committee (FCC) approve any departure from this practice in advance of placement?
	Does the provider have systems in place to ensure that children are advised of their right to access advocacy services, and afforded private time to meet with their social worker, family, advocates and external professionals?
	<p><b>Re: Child Protection:</b></p> <p>Does the provider ensure that all allegations of abuse or neglect or suspected abuse or neglect:</p> <ul style="list-style-type: none"> <li>▪ made by children in care reported and managed in line with <i>Children First, National Guidance for the Protection and Welfare of Children (2017)</i> and any relevant policies?</li> <li>▪ against foster carers managed in line with relevant policies and procedures and is appropriate action taken to protect children when required?</li> </ul>
	Are appropriate safeguarding arrangements put in place when a child in foster care makes an allegation, and any potential risks to any other children risk assessed and managed?
	Are concerns, allegations and complaints categorised correctly and receive the appropriate response?
	Does the provider provide foster carers with information and training regarding their roles as mandated persons?
	Does the provider have systems in place to ensure that children who disclose abuse are kept informed of developments throughout the process of assessment, and if applicable, Garda investigation, and offered supports such as counselling and therapy?
	Does the provider ensure that foster carers and all other children in the foster home are offered appropriate counselling and support?
	Does the provider ensure that parents and foster carers are notified within three days of an allegation being made, unless to do so would prejudice an investigation or put the children at risk?
	<p>Does the provider ensure that foster carers whom allegations of abuse have been made against, are informed in writing : (unless to do so would prejudice a Garda investigation or put children at risk) of</p> <ul style="list-style-type: none"> <li>▪ the allegation made against them?</li> <li>▪ the assessment procedure and any progress updates?</li> <li>▪ the outcome of the assessment and any Garda</li> </ul>

<sup>8</sup> Standard 10.6: generally, no more than two children are placed in the same foster at any one time, except in the case of sibling groups and these are not placed with other fostered children.

	investigation?
	Does the provider carry out a foster care review following the completion of the assessment of a child protection allegation or serious concern and provide a copy of the review to the foster care committee?
	Is there an appeals mechanism available for foster carers who are unhappy with the outcome of the assessment?
	Does the provider update the FCC so that they can reconsider the foster carers approval once the assessment, and if applicable, the Garda investigation is concluded?

<b>Standard 11</b>	<p><b>Health and Development</b> The health and development 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.</p> <p><b>Regulation 6(1) &amp; 7(1) &amp; 16(2)(d)</b></p>
<b>Lines of enquiry</b>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ clearly discuss consent to medical and dental treatments with parents and carers prior to placement and provide them with written information about their rights and duties in this matter?</li> <li>▪ have clear procedures in place to ensure appropriate consent can be given in a timely manner for elective procedures?</li> <li>▪ facilitate a medical and developmental examination of the child on admission to care where required or necessary as outlined under the regulations<sup>9</sup>?</li> <li>▪ consult children and their parents regarding their health care and treatment plans?</li> </ul> <p>Does the provider ensure that children in foster care:</p> <ul style="list-style-type: none"> <li>▪ have their own medical card?</li> <li>▪ get prioritised for treatment and other specialist services when required?</li> <li>▪ have the opportunity to continue to attend their family GP if possible and appropriate? Where this is not possible, are children's wishes considered and facilitated and are their medical histories transferred?</li> <li>▪ over the age of 16 take responsibility for their own health needs and decisions, where appropriate?</li> </ul>

<sup>9</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part III, Article 6(1)  
Child Care (Placement of Children with Relatives) Regulations, 1995, Part III, Article 7(1)

	<ul style="list-style-type: none"> <li>▪ receive accurate information about their own health and developmental history and that of their families as appropriate?</li> </ul>
	<p>Does the provider ensure that all necessary information is shared with medical professionals as required, to ensure the best appropriate healthcare and treatment for a child?</p>
	<p>Does the provider ensure that children’s case records contain complete records of all health and development information from birth?</p>
	<p>Does the provider ensure that foster carers:</p> <ul style="list-style-type: none"> <li>▪ promote the health and development of children placed in their care?</li> <li>▪ administer routine first aid if a child receives a minor injury in their care?</li> <li>▪ seek appropriate medical aid for a child in their care who suffers an illness or injury as required by the regulations<sup>10</sup>?</li> <li>▪ contact Tusla when a child in their care needs elective medical or dental treatment? If so, are parent(s) notified by Tusla, where appropriate?</li> <li>▪ maintain records of all medications administered to children?</li> <li>▪ receive training in basic first aid, health promotion, health and hygiene issues?</li> </ul>
	<p>Does the provider ensure there is a designated person responsible for providing age appropriate information and guidance to children in relation to their physical, emotional and sexual health and development identified in the child’s care plan?</p>

<sup>10</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part IV Article 16(2)(d)  
 Child Care (Placement of Children with Relatives) Regulations, 1995, Part IV, Article 16(2)(d)

<p><b>Standard 12</b></p>	<p><b>Education</b>                  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.</p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ encourage and support schools in promoting education for children in foster care?</li> <li>▪ ensure children’s educational needs are assessed in liaison with educational personnel and clearly recorded within their care plans, including goals and any learning supports or services they require?</li> <li>▪ ensure that appropriate educational attainment targets for children are agreed and necessary supports are put in place to achieve this?</li> <li>▪ that, where appropriate, ensure pre-school children get opportunities to attend playgroups or nursery schools to promote their social and learning development?</li> <li>▪ in consultation with foster carers share information with schools in order to enable them to offer appropriate support and continuity and quality of education to children?</li> <li>▪ clearly outline with the school that all information provided is confidential?</li> <li>▪ in consultation with foster carers, bring any concerns regarding school to the prompt attention of staff at the school? Are effective action plans agreed with the school as a result, and recorded on the child’s case file?</li> <li>▪ have an awareness and knowledge of the procedures for exclusion of children from school and do they know how to appeal such a decision?</li> <li>▪ actively encourage school leavers to participate in third level education or vocational training programmes, appropriate to their needs and abilities? Is this specified in their care plans?</li> </ul> <p>Does the provider ensure that children’s care plans:</p> <ul style="list-style-type: none"> <li>▪ clearly define roles and responsibilities for children’s education including the role of parents, foster carers and social workers?</li> <li>▪ clearly assign responsibility for contact with children’s schools and sharing of information as required?</li> </ul>

	<p>Does the provider ensure that foster carers:</p> <ul style="list-style-type: none"> <li>▪ provide children with appropriate opportunities to develop their social and life skills including exploring and participating in a variety of hobbies and interest?</li> <li>▪ value the importance of education and learning for children in their care?</li> <li>▪ support children’s educational development?</li> </ul>
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<b>Standard 13</b>	<p><b>Preparation for leaving care and adult life</b>                  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.</p>
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<b>Lines of enquiry</b>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ provide an after care service as required?<sup>11</sup></li> <li>▪ have a written after care policy informed by national policy?</li> <li>▪ provide an after care service to all children and young people who have been in care, including early care leavers and those whose placements end in an unplanned way?</li> <li>▪ provide adequate information to children and young people approaching care leaving age?</li> <li>▪ consult with the adult disability service with regard to the aftercare planning for a young person with a disability?</li> <li>▪ facilitate and financially support foster carers where appropriate to provide ongoing support to young people including those over 18 who continue to live with them?</li> <li>▪ encourage acceptable levels of independence and risk taking by children and young people having due regard to their age, stage of development, understanding and abilities?</li> <li>▪ ensure children and young people are prepared for leaving foster care having due regard to their age, stage of development, understanding and maturity?</li> <li>▪ ensure the preparation for leaving foster care considers the future living arrangements for the child or young person with their families, with other families or other identified arrangements?</li> </ul>
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<sup>11</sup> Child Care Act 1991, Part VI, Section 45

	<p>Does the provider ensure that children and young people:</p> <ul style="list-style-type: none"><li>▪ are encouraged by their foster carers to be actively involved in daily routines of family life in preparation for adulthood?</li><li>▪ maintain links with their local community and are made aware of support services available to them?</li><li>▪ and their families are actively involved in developing their leaving care plans and planning for their future?</li><li>▪ are encouraged and supported to develop skills for independent living?</li></ul> <p>Does the provider ensure that:</p> <ul style="list-style-type: none"><li>▪ all eligible children over 16 years are referred to the aftercare service?</li><li>▪ comprehensive assessments of need are carried out on all children leaving care?</li><li>▪ all eligible children have a statutory aftercare plan 6 months prior to their 18<sup>th</sup> birthday?</li><li>▪ multidisciplinary networks have been developed to meet the needs of young people leaving care?</li><li>▪ young people are provided with adequate support by the service after they become 18 years?</li><li>▪ outcomes for young people who have left care measured?<sup>12</sup></li></ul>
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<sup>12</sup> National Aftercare Policy for Alternative Care, 2017 (Tusla)

## The Foster Carers

This section of focuses on how the provider ensures that effective systems are in place to support foster carers in providing child-centred and high-quality care to children.

It includes how the provider:

- ensures that foster care applicants are assessed in a timely and comprehensive manner
- ensures that foster carers care for children in line with their approval
- supervises, supports and trains foster carers to enable them to provide high quality and child-centred care
- completes regular reviews of foster carers in line with regulations

<p><b>Standard 14</b></p>	<p><b>The Foster Carers</b></p> <p><b>14a Assessment and approval for Non-Relative Foster Carers</b></p> <p>Foster care applicants participate in a comprehensive assessment of their ability to carry out the fostering task and are formally approved by the health board prior to any child or young person being placed with them. <b>Regulation 5(2) &amp; 9(1)</b></p> <p><b>14b Assessment and Approval of Relative Foster Carers</b></p> <p>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 and young person and are formally approved by the health board. <b>Regulation 5(1), 9(1),(2) &amp; 36(1)</b></p> <p><i>Note: The lines of enquiry are relevant to both standards</i></p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ have clear written policies and procedures in place for the assessment and approval of foster carers?</li> <li>▪ have clear assessment procedures in place which enables social workers to approve and match foster carers to the needs of children in their care?</li> <li>▪ provide persons applying to become foster carers with clear written information on all aspects of being a foster carer?</li> <li>▪ ensure that the assessment process takes account of the context in which the application to care for a</li> </ul>



	<p>particular child or children arises?</p> <ul style="list-style-type: none"> <li>▪ have formal processes in place for the assessment of foster carers by a suitably qualified and trained social worker?</li> <li>▪ ensure that assessment reports include clear recommendations on approval?</li> <li>▪ complete foster care assessments within 16 weeks of their formal application, unless more time is required?</li> <li>▪ keep foster care applicants informed of the progress of the assessments, outline the rationale for any extension to the assessment timeline and provide new completion date?</li> <li>▪ undertake all required checks in assessing the suitability of applicants, of the area’s own relevant records and those of other service areas or equivalent authorities in other countries where the applicants have previously lived?</li> <li>▪ obtain garda clearances on all adults who would have unsupervised contact with children prior to the carers approval and a child’s placement within a foster family?</li> <li>▪ include all of the applicant’s family members including children in the assessment process appropriately?</li> <li>▪ have formal written contracts<sup>13</sup> in place in respect of each child placed with a foster carer(s) following approval?</li> </ul>
	<p>Does the provider ensure that foster care applicants:</p> <ul style="list-style-type: none"> <li>▪ get an opportunity to have sight of their assessment report before recommendation is made to the Foster Care Committee (FCC) and are they afforded the opportunity to add comments?</li> <li>▪ get an opportunity to meet the FCC considering their application?</li> <li>▪ provide Tusla with the necessary information for the completion of the assessment of their suitability to become foster carers, including medical/health checks, consent to carry out garda checks and reference checks?</li> </ul>
	<p>Does the FCC make the final decision on the approval of foster carers and is the decision of the committee communicated to the foster carer in writing?</p>

<sup>13</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part III, Article 9(1) and (2)

<p><b>Standard 15</b></p>	<p><b>Supervision and Support</b></p> <p>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.</p> <p><b>Regulation 9(1),(2)</b></p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ assign a link social worker to the approved foster carer to provide information, advice and support?</li> <li>▪ ensure there are support groups and counselling available for foster carers and their family when a critical event or placement breakdown occurs?</li> <li>▪ have an out-of-hours service to help foster carers in emergency situations, and inform foster carers how to access this service?</li> <li>▪ inform foster carers of their right to access records pertaining to them?</li> <li>▪ have written protocols in place that: <ul style="list-style-type: none"> <li>○ define the role of the child and family social worker and how this differs but compliments that of the link social worker?</li> <li>○ ensure clear lines of communication between the link social worker and the child’s social worker?</li> <li>○ facilitate the exchange of reports relevant to the placement in a timely manner?</li> </ul> </li> </ul> <p>Has the provider a process in place for link social workers to:</p> <ul style="list-style-type: none"> <li>▪ ensure that foster carers understand, accept and carry out their responsibilities under relevant standards, policies and guidance provided to them?</li> <li>▪ provide foster carers with relevant information and advice about the children placed with them?</li> <li>▪ provide foster carers with information and guidance on how to deal with a complaint or allegation made against them and the supports available to them?</li> <li>▪ provide foster carers with information and guidance on how to deal with a child going missing from their care?</li> <li>▪ maintain regular contact with foster carers and provide support and supervision to them and their children?</li> </ul>

	<ul style="list-style-type: none"> <li>▪ organise training for foster carers, in line with the identified needs of the children placed with them?</li> <li>▪ meet with the foster carers regularly and meet their own children separately?</li> <li>▪ have appropriate systems in place for sharing of information which ensures foster carers receive all relevant information relating to a child in their care?</li> <li>▪ maintain clear records of all contact with foster carers, including issues discussed, training and support requests as well as discussions had with the children of foster carers?</li> <li>▪ carry out joint visits to the foster carers with the child and family social worker to make the necessary arrangements for any new placement and agree a placement plan?</li> </ul>
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<b>Standard 16</b>	<b>Training</b> Foster carers participate in the training necessary to equip them with the skills and knowledge required to provide high quality care.
<b>Lines of enquiry</b>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ have a clear training strategy in place for foster carers, their families, where appropriate and other professionals involved in foster care? Does it include joint training opportunities? Does it address the specific training needs of relative foster carers?</li> <li>▪ have a training programme for the assessed training needs of foster carers that takes account of relevant policies, practices, research, inspection findings and best practice? Are children’s rights promoted through the training provided?</li> <li>▪ evaluate the foster care training programmes for their effectiveness and relevance to the needs of carers?</li> <li>▪ organise training so as to support and facilitate foster carers to attend training?</li> <li>▪ ensure that training is equally and appropriately delivered to all foster carers?</li> <li>▪ provide specific or specialised training to foster carers where the needs of children placed with them requires this?</li> <li>▪ appropriately address any training deficits with foster carers as they arise?</li> <li>▪ ensure that link social workers maintain a contemporaneous record of training attended by</li> </ul>

	foster carers?
	Does the provider ensure that foster carers are aware of their required commitment to attend training and there is appropriate participation by foster carers as required?
	Does the provider ensure that foster carer reviews include an appraisal of their training needs which informs future training opportunities?

<b>Standard 17</b>	<b>Reviews of Foster Carers</b> Foster carers participate in regular reviews of their continuing capacity to provide high quality care to assist with the identification of gaps in the fostering services.
<b>Lines of enquiry</b>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ carry out foster carer reviews in line with the standards? Are reviews chaired by a social work manager? Are reviews attended by link workers, foster carers and other relevant persons?</li> <li>▪ carry out updated garda checks after each review?</li> <li>▪ consider all aspects of the carer’s circumstances and performance as foster carers as part of the review?</li> <li>▪ consider the views of children placed with foster carers, their social workers and families as appropriate?</li> <li>▪ include a review of training undertaken and a plan to address any training requirements/deficits identified?</li> </ul> <p>Does the provider ensure that foster carers are:</p> <ul style="list-style-type: none"> <li>▪ aware and provided with the opportunity to prepare their own review report should they so wish, or where their views differ from that of the link social worker? Are these reports shared at least one week in advance of the review meeting?</li> <li>▪ aware of their right to meet with the foster care committee in relation to their review?</li> <li>▪ appropriately notified of any changes to their approval status and the appeals procedures?</li> </ul> <p>Does the provider ensure that additional reviews are undertaken following serious complaints, child protection assessments and or in any other circumstances where the child’s social worker, the link worker, foster carer or FCC believe it is warranted?</p> <p>Are the FCC notified of all foster care reviews including</p>

	recommendations on the ongoing status of the foster carer?
	Does the provider ensure that link social workers: <ul style="list-style-type: none"><li>▪ maintain records of decisions made at foster carer reviews?</li><li>▪ notify child and family social workers of decisions following reviews, including comments or objections?</li></ul>

## The Health Board (the provider) (now the Child and Family Agency (Tusla))

This section is focused on the governance of the service and how the provider assures itself that a rights-based, high-quality, safe and effective foster care service is provided to children. It includes how the provider;

- ensures that it has effective policies in place to promote the provision of a child-centred, safe and effective foster care service
- makes sure that effective governance arrangements are in place to monitor the quality of the foster care service
- ensures that the necessary resources are in place to support foster carers to deliver a safe quality service to children in their care
- delivers a foster care service in line with legislation, regulations and service level agreements.

<b>Standard 18</b>	<p><b>Effective Policies</b> 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.</p> <p><b>Regulation 5(1)</b></p>
<b>Lines of enquiry</b>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ maintain a panel or panels of approved foster carers as required by regulations<sup>14</sup>?</li> <li>▪ have a clear plan developed in consultation with all interested parties for the delivery of foster care services that provide a range of foster care services that responds to the needs of current and future populations of children in care?</li> <li>▪ have appropriate policies and procedures in place that: <ul style="list-style-type: none"> <li>○ are consistent with relevant legislation, regulations, national policy, professional guidance and international best practice such as the United Nations Convention on the Rights of the Child?</li> <li>○ guide the management and provision of foster care services at organisational and local level?</li> <li>○ are reviewed in light of changing needs, new research, inspection findings and practice developments to ensure that they remain up-to-date and relevant to changing needs of children</li> </ul> </li> </ul>

<sup>14</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part III, Article 5(1)

	<p>in care?</p> <ul style="list-style-type: none"> <li>○ promote a partnership approach with children, young people, their families, foster carers and other agencies/professionals in the development and delivery of foster care services?</li> <li>○ are available and accessible to all interested parties?</li> <li>▪ have sufficient dedicated foster care teams to deliver the service effectively?</li> <li>▪ advocate for and raise awareness of children in foster care with other agencies involved in the welfare of children including, housing, and education and welfare agencies?</li> </ul> <p>Does the provider have appropriate protocols in place for the transfer of children and or foster carers between agencies or Tusla service areas? Are staff aware of these protocols?</p>
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<p><b>Standard 19</b></p>	<p><b>Management and Monitoring of Foster Care Services</b>                  Health boards have effective structures in place for the management and monitoring of foster care services.</p> <p><b>Regulation 12 &amp; 17</b></p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ have clearly defined governance arrangements and structures that set out lines of authority and accountability, and specific roles and responsibilities?</li> <li>▪ have appropriate management systems in place to ensure the delivery of a safe, rights-based service and high-quality service that's committed to continuous improvement?</li> <li>▪ have appropriate allocation of resources to meet the needs of children requiring out of home care?</li> <li>▪ have effective quality assurance and monitoring systems in place which ensure a quality, consistent service is provided to all children and foster families in line with national standards and regulations?</li> <li>▪ have a register of all children in foster care maintained in compliance with statutory requirements<sup>15</sup>?</li> <li>▪ have effective policies and procedures in place for timely management of complaints, allegations and</li> </ul>

<sup>15</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part IV, Article 12

	<p>concerns in relation to staff members?</p> <ul style="list-style-type: none"><li>▪ have effective data and information systems in place which informs service planning?</li><li>▪ have information systems that provide up to date and timely data about their foster care service and uses this information to plan, deliver and improve services?</li><li>▪ maintain records of foster care reviews, placement breakdown, children awaiting foster care placement, complaints and allegations?</li><li>▪ have adequate resources within the foster care teams to deliver the service in line with statutory requirements<sup>16</sup>?</li><li>▪ have systems in place to identify and address any resource requirements including situations where a child's allocated child and family social worker and/or fostering link worker is unavailable for an extended period?</li><li>▪ comply with required standards and regulations in relation to care planning and reviews of children, recruitment assessment, training and reviews of foster carers?</li><li>▪ have appropriate service level agreements in place including monitoring, reporting and oversight arrangements with any private provider of foster care services?</li><li>▪ prepare annual reports<sup>17</sup> as required, including all necessary information in relation to the progress and quality of the foster care service?</li></ul> <p>Does the provider ensure that all staff are clear on their roles and responsibilities and are there clear line management structures in place?</p>
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<sup>16</sup> Child Care (Placement of Children in Foster Care) Regulations, 1995, Part IV, Article 17

<sup>17</sup> Adequacy of the Child care and family Support Services Section 8, Child Care Act, 1991



<b>Standard 20</b>	<b>Training and Qualifications</b> 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.
<b>Lines of enquiry</b>	Does the provider: <ul style="list-style-type: none"> <li>▪ recruit appropriately qualified, experienced and skilled staff to deliver a high quality foster care service? Do new staff participate in a formal induction programme?</li> <li>▪ clearly define roles and responsibilities for fostering team members?</li> <li>▪ have staff training and development plans in place that include, induction, in-service and post-qualifying training and the need for regular formal supervision?</li> <li>▪ promote continuous professional development?</li> <li>▪ regularly evaluate and update staff training and development plans to ensure they are relevant to the needs and demands of the service?</li> <li>▪ provide opportunities for child and family social workers and link workers to undertake joint training with foster carers where appropriate?</li> <li>▪ have systems in place to assess and address the training and development needs of all those involved in delivering the foster care service?</li> </ul>

<b>Standard 21</b>	<b>Recruitment and Retention of an appropriate range of Foster Carers</b> 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.
<b>Lines of enquiry</b>	Does the provider: <ul style="list-style-type: none"> <li>▪ have appropriate numbers of suitable foster carers to meet the needs of children who need foster care placements?</li> <li>▪ recruit carers with the necessary skills and knowledge to care for children with complex needs, and various cultural backgrounds?</li> <li>▪ have an effective strategy for the recruitment and retention of foster carers which addresses the identified needs of children who require foster care services?</li> <li>▪ actively engage with the community in promoting and attempting to attract people to becoming foster carers?</li> </ul>

	<ul style="list-style-type: none"> <li>▪ have systems for evaluating and reviewing recruitment and retention strategies within the service area?</li> <li>▪ have approved foster carers involved in promoting and recruiting potential new carers within their community?</li> <li>▪ have people with experience of being fostered involved in promoting and recruiting potential new carers?</li> <li>▪ have information about becoming a foster carer readily available and distributed to the public within their catchment area?</li> </ul>
	<p>Does the provider ensure that relative placement options are always explored in the first instance when a child needs a foster care placement?</p>
	<p>Does the provider ensure that a child's right to remain within their own local community is given due consideration when placing children?</p>
	<p>Does the provider ensure that enquires are acknowledged promptly and potential foster carers are engaged appropriately in line with best recruitment practices?</p>
	<p>Does the provider ensure that the views of foster carers are sought:</p> <ul style="list-style-type: none"> <li>▪ on the levels of support they require to support them to continue to foster?</li> <li>▪ on their experience of being foster carers within the service and their recommendations for improvements elicited when they leave the service?</li> </ul>

<p><b>Standard 22</b></p>	<p><b>Special Foster Care</b> Health boards provide for a special foster care service for children and young people with serious behavioural difficulties.</p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ have policies and procedures in place which support special foster care placements for children with serious behavioural difficulties?</li> <li>▪ have appropriate mechanisms in place for assessing special foster carers which ensure that they have specific training and skills required to keep children safe?</li> <li>▪ ensure that only carers who are specifically trained and skilled and have relevant experience provide</li> </ul>

	<p>special foster care?</p> <ul style="list-style-type: none"> <li>▪ ensure that there is at least one full-time carer available in each placement?</li> <li>▪ have ongoing training provided as required for those providing special foster care placements?</li> <li>▪ have appropriate arrangements in place for providing regular and emergency respite breaks for special foster carers?</li> <li>▪ ensure that children in special foster care placements receive supports and or additional or specialists services which are identified within their care plan as required?</li> <li>▪ ensure that the educational needs of children in special foster care placements are met?</li> </ul>
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<b>Standard 23</b>	<p><b>The Foster Care Committee</b> 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 practices.</p> <p><b>Regulation 5(3) &amp; 5(4)</b></p>
<b>Lines of enquiry</b>	<p>Does the provider have a foster care committee (FCC) whose primary responsibility is to act in the best interest of children placed in foster care?</p> <p>Does the foster care committee:</p> <ul style="list-style-type: none"> <li>▪ review and consider all assessments for foster care applicants?</li> <li>▪ make recommendations whether or not applicants should be approved for inclusion on the foster care panel?</li> <li>▪ receive and review notifications of the outcomes of foster care reviews?</li> <li>▪ make recommendations on the status of foster carers following foster care reviews?</li> <li>▪ approve long-term placements<sup>18</sup> with foster carers in line with regulations?</li> <li>▪ give due consideration to recommendations in reaching a decision on the approval of applicants or reviews of the status of foster carers?</li> <li>▪ membership<sup>19</sup> consist of an appropriate mix of people</li> </ul>

<sup>18</sup> Child Care (Placement of Children in Foster Care) Regulations 1995, Part III, Article 5(3)  
Child Care (Placement of Children with Relatives) Regulations 1995, Part III, Article 5(2)

<sup>19</sup> Child Care (Placement of Children in Foster Care) Regulations 1995, Part III, Article 5(4), 5(5)

	<p>with relevant expertise, experience and training in foster care including a person who is a foster carer?</p> <ul style="list-style-type: none"> <li>▪ have appropriate systems in place for recording and distributing decisions of the committee to all relevant people?</li> <li>▪ have appropriate supports in place including specialist advice and information as required to aid the committee in making informed decisions on assessments, reviews and / or placement of children?</li> <li>▪ contribute to the annual <i>Adequacy of the Child care and Family Support Services reports (Section 8, Child Care Act, 1991)</i>?</li> </ul>
	<p>Does the provider ensure that all foster care committee members are:</p> <ul style="list-style-type: none"> <li>▪ vetted as required by legislation?</li> <li>▪ provided with relevant induction and in-service training to enable them to discharge their responsibilities as required?</li> </ul>
	<p>Does the provider ensure that the foster care committee is kept informed on all aspects of the management of the foster care service as required?</p>
	<p>Does the provider ensure that the views of the foster care committee is sought in relation to planning for the foster care service?</p>

<p><b>Standard 24</b></p>	<p><b>Placement Of Children Through Non-Statutory Agencies</b>                  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.</p> <p><b>Regulation 17(1) &amp; 13 (1) &amp; (2)</b></p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider have:</p> <ul style="list-style-type: none"> <li>▪ appropriate policies and procedures in place regarding the use of non-statutory agencies to provide foster care services?</li> <li>▪ service level agreements in place with non-statutory providers which include provisions for addressing all requirements in line with national standards?</li> <li>▪ appropriate safeguarding mechanisms in place which ensure that non-statutory providers of foster care services are fully compliant with regulations and</li> </ul>

	<p>national standards?</p> <ul style="list-style-type: none"> <li>▪ systems in place for non-statutory providers to maintain and regularly update Tusla of a list of all foster carers engaged with their service?</li> <li>▪ effective monitoring arrangements in place which ensure non-statutory providers of foster care services maintain compliance with regulations and national standards?</li> </ul> <p>Does the provider ensure that all children in non-statutory foster care placements are:</p> <ul style="list-style-type: none"> <li>▪ allocated a social worker?</li> <li>▪ visited by their allocated social worker in line with requirements and in accordance with best practice, irrespective of the geographical distances involved?</li> </ul>
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<p><b>Standard 25</b></p>	<p><b>Representations and Complaints</b>                  Health boards have policies and procedures designed to ensure that children and young people, their families, foster carers and others with a bona fide interest in their welfare can make effective representations, including complaints, about any aspect of the fostering service, whether provided directly by a health board or by a non-statutory agency.</p>
<p><b>Lines of enquiry</b></p>	<p>Does the provider:</p> <ul style="list-style-type: none"> <li>▪ have a clearly defined procedure and guidance for dealing with complaints and representations as required by national standards?</li> <li>▪ provide all children, families and foster carers with information in an accessible format on how to make a complaint?</li> <li>▪ take account of the particular needs of people with a disability, and arrange access to appropriate, translation, interpretation and communication services for those who require it?</li> <li>▪ support children and all those involved in the foster care service to understand their right to make a complaint and inform them of advocacy services/supports available should they require this?</li> <li>▪ appropriately manage all complaints and representations?</li> <li>▪ hear from all complainants and interested parties and notify them in writing of the outcome of their complaint including any action taken in response?</li> </ul>

	<ul style="list-style-type: none"><li>▪ give due consideration to the communication needs of complainants and/or other interested parties in managing complaints and are supports provided as required?</li><li>▪ inform all people involved in the foster care service of their right to appeal or to seek independent review of their complaint if they are unhappy with the management or outcome of their complaint?</li><li>▪ have systems in place for regular monitoring of the complaints to assure effectiveness and assist management in evaluating the quality of the service provided?</li><li>▪ appropriately record all complaints and maintain these on children's records including details of the outcome, action taken and whether or not the complainant was satisfied with the outcome?</li></ul>
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