



An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

2017 Annual Report



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Service Delivery Activity 2017

Child Protection and Welfare Services

53,755

referrals to child protection and welfare services

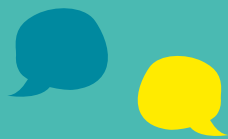
13% a 13% increase from 2016



1,799

referrals to emergency out-of-hours services

50%



(4,850) reduction in cases awaiting allocation of a named social worker since agency establishment

24,891

cases open to social work

19,999

allocated to a named social worker

100%

(1,304) of children on the Child Protection Notification System with an allocated social worker

10%



(521 cases)

reduction, from December 2016 in the number of cases awaiting allocation of a named social worker

Alternative Care Services



6,190

children in the care of the Agency

92%



(5,700)

of children in care in a foster care arrangement



(5,898)

95%

(5,898) of children in care with an allocated social worker



88% (221)

of unapproved relative foster carers (who had a child placed for more than twelve weeks) with a link worker; up from 69% (211) in 2016



91% (3,554)

of approved general and relative foster carers with a link worker; up from 82% (3,376) in 2016



2,037

young people in receipt of aftercare services; 157 more than December 2016

Adoption Services



922

new applications to commence tracing for a searched person



152

adoption assessments presented to local adoption committees

Tusla Regulation Services



4,484

early years services

2,033

inspections of early years services

1,377

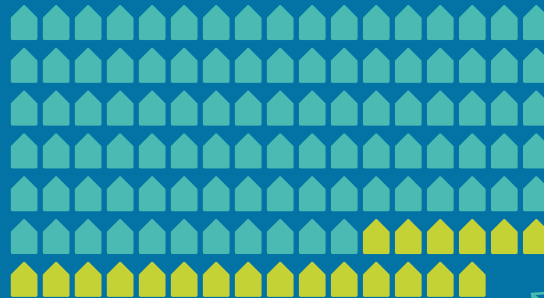
children on the register for home education

4,904

children attending 43 independent schools

117

non-statutory children's residential services;



96

inspections of these services

Educational Welfare Services

3,522



educational welfare services worked with 3,522 new individual children in the academic year 2016/2017



721

school attendance notices issued to parents in the academic year 2016/2017

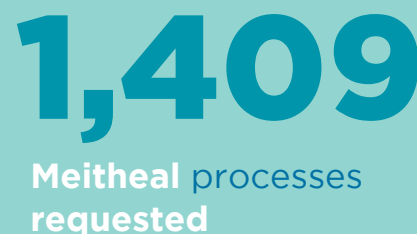
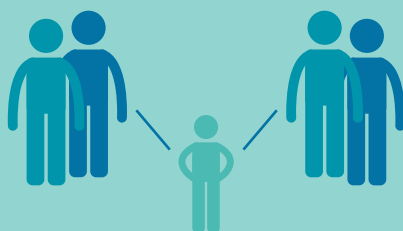
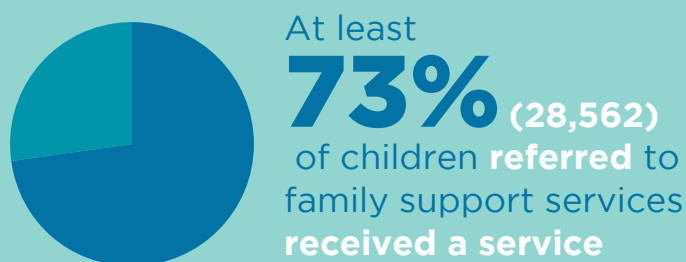


156

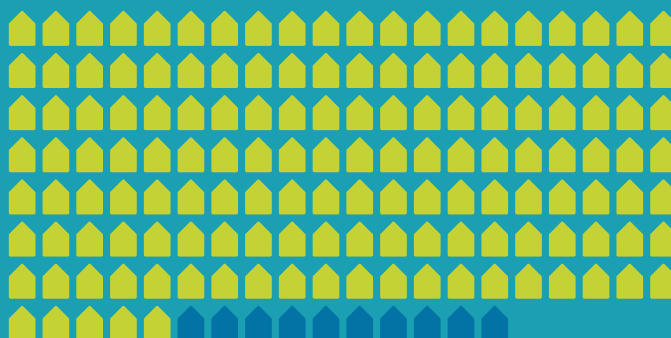
court summonses issued about poor school attendance in the academic year 2016/2017



Prevention, Partnership and Family Support Services



Domestic, Sexual and Gender-Based Violence Services



Consumer and Public Affairs



Key Trends 2014-2017

Referrals to Child Protection & Welfare (CPW) Services

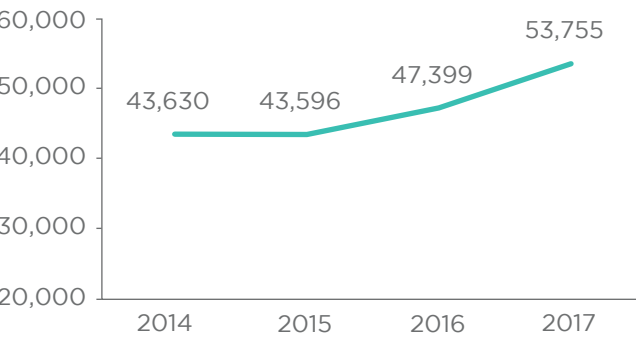


Chart 1: Figure for referrals for 2017 is provisional

% CPW Cases Allocated to a Social Worker

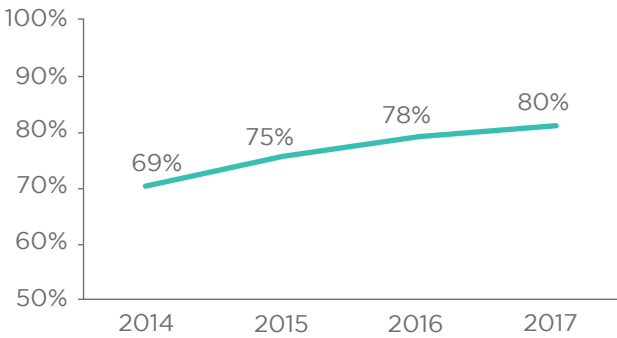


Chart 2

% Retrospective Cases of Abuse Allocated to a Social Worker

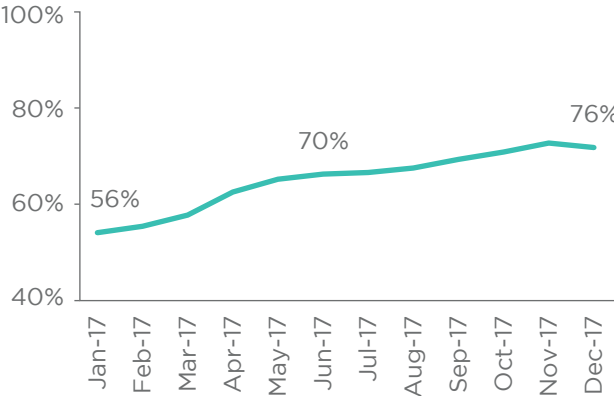


Chart 3: National collation of this data commenced in 2017

% Children in Care with an Allocated Social Worker

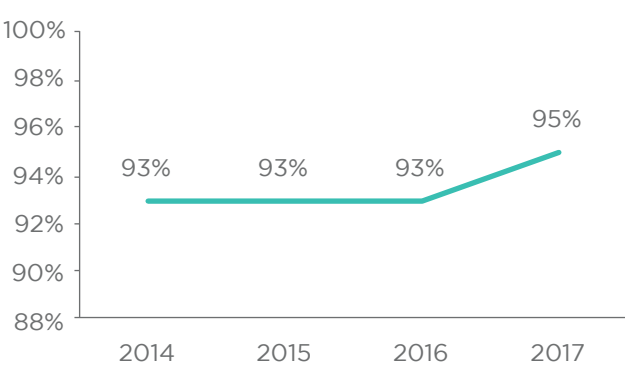


Chart 4

% Approved Foster Carers with a Link Social Worker

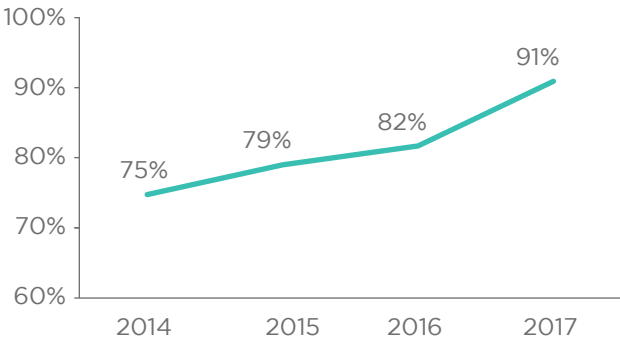


Chart 5

Unapproved Relative Foster Carers (with child placed > 12 weeks) awaiting a Link Worker

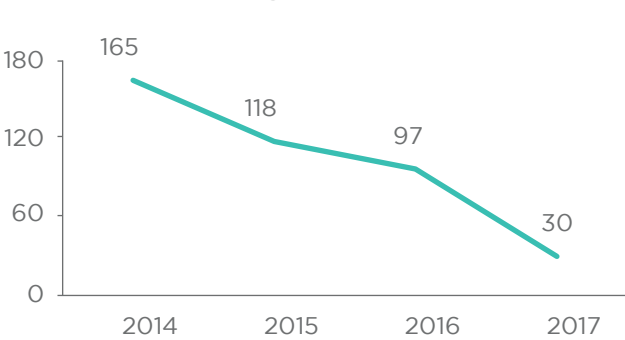


Chart 6

Chairperson's Foreword

I am delighted to present the fourth Annual Report of Tusla – Child and Family Agency. The establishment of the Agency and its development over the last four years has shown the importance of having a dedicated organisation to deliver high quality services for children, families and communities.

When appointed chair of Tusla's Board in 2014 I realised that Ireland had an unprecedented opportunity to recast and transform how we protected children and supported families.

We were setting ourselves the challenge of becoming a world leader with a unified national framework for delivering appropriate, timely and proportionate services for children, young people and families.

I am not going to pretend that the last four years have been easy or smooth. Child protection is challenging and the issues are often played out in public where the complexities of the daily decisions made by Tusla's dedicated staff are not always understood or easy to explain.

But despite these challenges and those of increasing demand, rising referral rates, legacy issues and operating during a period of austerity, Tusla is delivering on its ambitious journey of change.

The Board has overseen the consolidation of the key services of Child Protection and Welfare, Family Support Services including Family Resource Centres, and Educational Welfare Services into one Agency.

This annual report, the third published under our Corporate Plan 2015-2017, highlights the significant progress Tusla has already made in combining the strengths of each of these components of the service.

As I pointed out in the 2016 report the Transformation Programme was a hugely significant step for Tusla.

I can now report it has made significant progress in fostering an organisational culture based on collaboration and creativity supported by the programme management office; new strategies for information and communications technology; human resources and the implementation of the National Child Care Information System.

I particularly welcome our achievements in establishing a new national approach to practice, aligning all aspects of our work, and look forward to its full implementation in the coming years.

- *We will continue to take the lead in child protection and welfare working with families, communities and partner organisations while keeping safety and wellbeing at the centre of all we do*

The new Corporate Plan 2018-2020 provides an opportunity for Tusla to integrate the Child Protection and Welfare approach with the mainstreaming of Prevention, Partnership and Family Support, the Alternative Care Strategy; and with service areas such as Domestic Sexual and Gender-Based Violence, and Educational Welfare Services.

The significant work programme outlined for the coming years is based on reducing preventable risks to children.

While additional funding was provided for 2018, significant additional funding will be required for 2019 and 2020 to continue to grow Tusla as a self-sufficient organisation.

In 2017, the Board continued to enjoy an excellent working relationship with the Minister for Children and Youth Affairs and her Department and with all of our strategic partners.

I would like to thank the Minister, the Secretary General and their staff for their interest in and support for our important work. I would like to especially thank our Chief Executive, our Executive Team, our Board Secretary and all of our staff nationwide for their ongoing hard work and commitment to delivering and supporting the delivery of high quality services to children and families. I thank them for all their work, often in very challenging circumstances, and for their enthusiasm that keeps us buoyant on our challenging but very worthwhile journey.

I look forward to all of us, collectively, continuing to build on all of this momentum in 2018 and working with all stakeholders at a time of ongoing transformation for the Agency.

Norah Gibbons
June 2018

Glossary of Terms

Term	Definition
ACTS	Assessment, Consultation and Therapy Service
AFS	Annual Financial Statement
CISM	Critical Incident Stress Management
CP&W	Child Protection and Welfare
CPNS	Child Protection Notification System
CRS	Children's Residential Services
CYPSC	Children and Young People Service Committees
DCYA	Department of Children and Youth Affairs
DML	Dublin Mid Leinster region
DNE	Dublin North East region
DPER	Department of Public Expenditure and Reform
DSGBV	National Domestic, Sexual and Gender-Based Violence Service
EAP	Employee Assistance Programme
EMG	Employment Monitoring Group
EOHS	Emergency Out of Hours Service
EPIC	Empowering People in Care – advocacy organisation for children and young people in care
EWS	Educational Welfare Service
FOI	Freedom of Information
FRC	Family Resource Centre(s)
HBS	Health Business Service
HIQA	Health Information Quality Authority
HSCL	Home School Community Liaison
HSE	Health Service Executive
HR	Human Resources
ICT	Information and Communication Technology
Meitheal	Early intervention practice model
NCCIS	National Child Care Information System
NEWB	The National Educational Welfare Board
NIMS	National Incident Management System
NVB	National Vetting Bureau
PMO	Programme Management Office
PPFS	Prevention, Partnership and Family Support Services
QIF	Quality Improvement Framework
SCP	School Completion Programme
SMT	Senior Management Team
Tell Us	Tusla complaints and feedback policy
WLD	Workforce Learning and Development
WTE	Whole time equivalent employees

1.0 Introduction

Overview

Tusla – Child and Family Agency was established on 1st January 2014 and is responsible for improving wellbeing and outcomes for children. Through a process of comprehensive reform of services for the development, welfare and protection of children and the support of families, it brought together over 4,000 staff who were previously employed within Children and Family Services of the Health Services Executive (HSE), the National Educational Welfare Board (NEWB), and the Family Support Agency.

Tusla has responsibility for the following range of services:

- Child Protection and Welfare services, including family support services
- Family Resource Centres and associated national programmes
- Early Years (pre-school) and Alternative Education inspection services
- Educational Welfare responsibilities including School Completion Programme and home school liaison
- Domestic, Sexual and Gender-Based Violence services
- Services related to the psychological welfare of children

Corporate Plan 2015-2017 and 2017 Business Plan

In accordance with Section 41 of the Child and Family Agency Act 2013, Tusla prepared a Corporate Plan. This three year plan was underpinned by policy guidance and a performance framework provided by the Minister covering the period 2015-2017 and based on an identification of need to improve outcomes for children. The plan articulates five short term outputs which identify the key focus areas for the Agency in its first three years. The five short term outputs are:

Output A: Tusla's child protection processes and systems are responding to children at risk in a timely manner.

Output B: All processes and systems underpinning children and family policy and services are evidence informed.

Output C: A targeted range of family and parenting supports.

Output D: Attendance, participation and retention in full-time education is embedded in service delivery for all children.

Output E: A fit-for-purpose organisation to deliver on our strategic intent.

Each year a business plan is prepared in accordance with the requirements of Section 46 of the Child and Family Agency Act 2013. The 2017 Business Plan is the third business plan of a three year cycle based on the Agency's Corporate Plan 2015-2017. The 2017 Business Plan is available at www.tusla.ie.

Better Outcomes, Brighter Futures

In 2017 Tusla continued to engage with the implementation infrastructure for Better Outcomes, Brighter Futures to progress the whole of government working around children and young people. The Chief Operations Officer represented Tusla on the high-level Children and Young People's Policy Consortium.

2.0 Transformation Programme

2016 saw the establishment of the Transformation Programme, which in the initial phase included the following programmes:

- Development of a Child Protection and Welfare (CP&W) Strategy
- Establishment of a Human Resource Strategy
- Development of an Information and Communications Technology (ICT) Strategy
- National Child Care Information System (NCCIS) roll-out
- New organisational structure and culture
- Implementation of a Resource Allocation Profiler
- Governance arrangements with Section 56-59 organisations
- Development of a Programme Management Office (PMO)

The objectives of the Transformation Programme were as follows:



Considerable progress was made in 2017 across the transformation programme, as follows:

Child Protection and Welfare (CP&W) Strategy

A detailed national implementation plan was developed and split into various national work streams. Governance structures were then established and programme management support engaged. A large number of area implementation meetings took place. The CP&W vision and strategic objectives are outlined as follows:

TUSLA'S CP&W VISION – To provide an appropriate, proportionate, timely response to children “at risk / in need”, sharing responsibility and control with families and communities through co-created solutions and inter-agency collaboration



Programme Management Office (PMO)

The role of the PMO evolved from simply governing, monitoring, and supporting programmes and projects under the Transformation Programme to driving forward, supporting the Tusla lead, and monitoring each programme or project through the phases of the project management life cycle.

Organisational Reform (Culture & Structure)

In relation to the organisational structure, meetings with the Department of Children and Youth Affairs (DCYA) are ongoing. In relation to organisational culture, work is ongoing with Signs of Safety¹ to identify opportunities and there is an overarching organisational development plan under development.

Resource Allocation Profiler

A deprivation adjusted Resource Allocation Profiler was developed which provides an evidence-based methodology for the distribution of resources, by area, that is transparent and objective. The resource profiler is a decision-support tool.

Governance Section 56-59 organisations

A new governance framework for arrangements with Section 56-59 organisations was developed.

Human Resource Strategy

The Human Resource (HR) Strategy was base-lined following a PMO resource being allocated to the programme. A governance structure was agreed and monthly progress reports produced. This included a Senior Management Team (SMT) summary progress report and role definition.

¹The Signs of Safety is an innovative, strengths-based, safety-organised approach to child protection casework grounded in partnership and collaboration with children, families and their wider networks of support (Child Protection and Welfare Strategy for 2017-2022).

ICT Strategy Development

An ICT strategy was developed and the delivery of the strategy was split into service delivery, business applications, information and records management systems, and infrastructure and data management.

National Child Care Information System (NCCIS)

The NCCIS was deployed in the Mid-West region in 2016 following detailed software analysis, development and testing. This was followed by Cavan/Monaghan in May 2017. A Programme Structure was then agreed and resourced and a rapid deployment followed with Galway/Roscommon, Cork North Lee, Louth, Cork North, Donegal/Sligo/Leitrim/West Cavan, and Mayo all going live in 2017. In addition, 1,100 users were set up on NCCIS and 580 new laptops were distributed.

Children First 2015 Implementation

Preparing the Agency for the implementation of Children First was completed as part of the work under the Transformation Programme. A detailed plan for getting Tusla ready for commencement was devised and implemented successfully in time for the deadline of 11th December 2017.

3.0 Key Achievements and Service Activity in 2017

This chapter outlines the 2017 Business Plan achievements and service activity organised according to the five short term outputs of the Corporate Plan 2015-2017.

Details of relevant service areas are outlined under each output heading. Each service or function area is described in terms of:

- i. Statement of purpose
- ii. Service activity for 2017 (where applicable)
- iii. 2017 Business Plan priorities
- iv. 2017 achievements

SHORT TERM OUTPUT A: EFFECTIVE CHILD PROTECTION SYSTEMS

Tusla's child protection processes and systems are responding to children at risk in a timely manner

The services included under output A are:

- A1 Child Protection and Welfare Services
- A2 Foster Care Services
- A3 Children's Residential Services
- A4 Aftercare Services
- A5 Adoption Services
- A6 Separated Children Services
- A7 National Child Care Information System

A1: Child Protection and Welfare (CP&W) Services

The purpose of the CP&W service is to meet the Agency's statutory responsibilities in accordance with the Child Care Act 1991 and Children Act 2001. The Agency is required to identify and promote the welfare of children at risk or in need of protection and to provide family support services.

Key Service Activity

- 53,755 referrals to CP&W services in 2017, 13% more than 2016
- 24,891 cases open to social work at the end of December 2017 with eight out of 10 (19,999) allocated to a named social worker
- 4,892 cases awaiting allocation to a named social worker, some 521 (10%) fewer than December 2016 and 4,850 (50%) fewer than when the Agency was established (Figure 1)

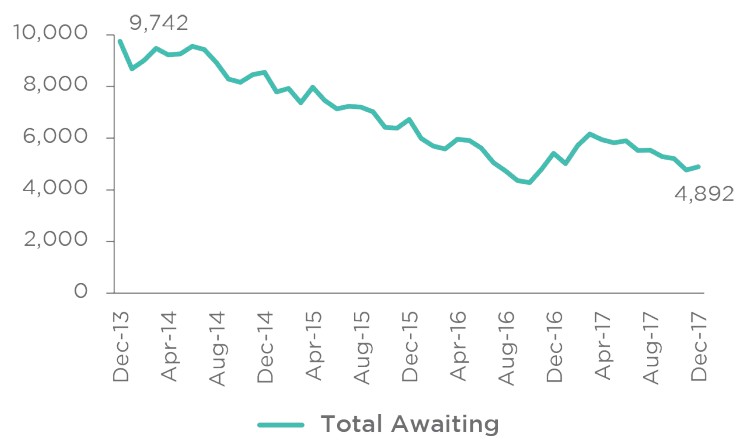


Figure 1: Reduction in open cases awaiting allocation to a social worker

- 1,304 children listed as active on the Child Protection Notification System (CPNS)² at the end of December 2017; 33 more than December 2016

2017 Business Plan Priorities	2017 Achievements
A.1.1 Reduce cases awaiting allocation and maintain the significant downward trend achieved in 2016	A.1.1 10% (521) reduction, from December 2016, in the overall number of cases awaiting allocation of a named social worker
A.1.2 Establish Review Evaluate Direct (RED) processes to review referrals to ensure a consistent approach to screening and assessment	A.1.2 RED processes established and implemented in 2017. RED teams has had a positive effect on reducing unallocated cases and the use of Signs of Safety at the 'front door' has resulted in an increased number of referrals being directed through local area pathways
A.1.3 Develop central point for referrals and implement a process to manage retrospective cases of abuse in all areas in accordance with policy	A.1.3 The areas of Dublin South East/Wicklow & Midlands, Kildare West Wicklow/Dublin South West, South and Dublin North East have all developed a central point for referrals and have implemented a process to manage retrospective cases of abuse across all areas
A.1.4 Review of the existing policy and procedure for responding to allegations of abuse	A.1.4 Existing policy and procedures reviewed for responding to allegations of abuse and benchmarked to practice and legal requirements
A.1.5 Establish implementation teams in each service area to prepare for full implementation of Children First	A.1.5 Implementation teams were established in each service area for the full implementation of Children First
A.1.6 Implement Garda vetting legislation (Children and Vulnerable Persons Act 2012) to comply with National Vetting Bureau (NVB)	A.1.6 Garda Vetting Legislation (Children and Vulnerable Persons Act 2012) to comply with NVB was implemented across all areas
A.1.7 Roll out Quality Improvement Framework (QIF) nationally to drive service improvements	A.1.7 The Agency's QIF was introduced in 2017 to promote an ongoing process of self-assessment, and to develop a culture of continuous quality improvement. The framework is being introduced incrementally over a three year period to provide a language to talk about quality and to identify what delivering services to high quality standards means in practice. The quality assurance and monitoring team will, as part of their engagement with services, undertake verification audits of the implementation of the framework and development of annual quality improvement plans arising from the cycle of self –assessment being introduced
A.1.8 Identify and develop creative community solutions that meet the child or young persons' identified needs within their family and community context as an alternative to care	A.1.8 Creative community solutions were developed across all areas to meet the child or young persons' identified needs within their family and community context, as an alternative to care

A2: Foster Care Services

Tusla has statutory responsibility to provide for the protection and care of children whose parents have not given or are unlikely to be able to give adequate protection and care.

² The CPNS is a national record of all children who are the subject of a child protection plan agreed at a child protection conference. The CPNS is accessible to named professional groups subject to strict protocols.

Key Service Activity

At the end of December 2017:

- 92% (5,700) of children in care were in a foster care arrangement and 29% (1,660) of these children were with in foster care with relatives (Figure 2)

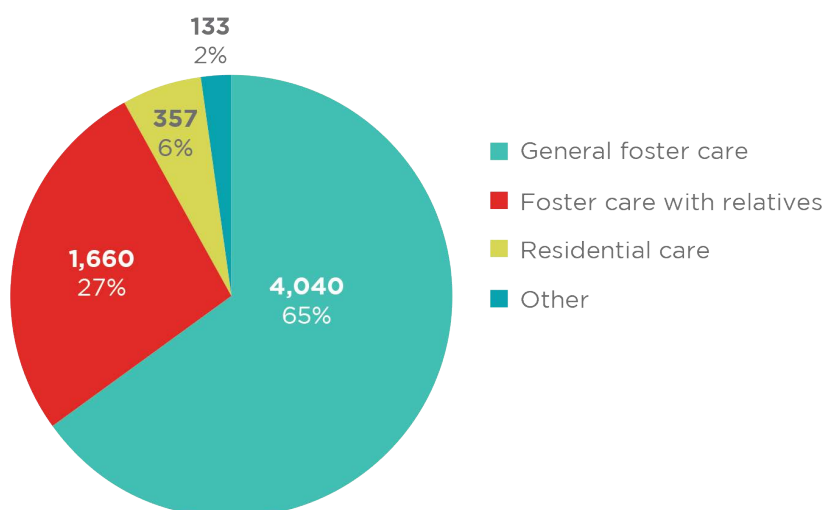


Figure 2: Breakdown of children in care by care type, December 2017

- 95% (5,413) of children in foster care had an allocated social worker
- 92% (5,230) of children in foster care had a care plan against a target of 90%
- 4,384 foster carers on the panel of approved foster carers; 153 fewer than 2016
- 91% (3,554) of approved general and relative foster carers had a link worker up from 82% (3,376) in 2016
- 88% (221) of unapproved relative foster carers (who had a child placed for twelve weeks) had a link worker; up from 69% (211) in 2016

2017 Business Plan Priorities	2017 Achievements
A.2.1 Initiate innovative operational responses to support compliance with standards and statutory regulations	A.2.1 A national implementation group was established; a draft procedure and guidance policy and a Garda vetting policy and training programme were developed. Intake teams were established in all areas
A.2.2 Undertake a review to explore community options to alternative care placements	A.2.2 Creative Community Alternatives Review completed. Creative Community Alternatives was rolled out as a pilot project in seven Tusla areas in 2017. The project is currently being rolled out to all 17 Tusla areas for 2018. An independent process evaluation was undertaken throughout the pilot, with draft report on track for completion in early 2018
A.2.3 Undertake a review of areas identified with a high proportion of children in care	A.2.3 Creative Community Alternatives Review was completed. Analysis were undertaken and seven areas were identified as being suitable for the Creative Community Alternatives pilot, these areas were Cork, Mid - West, Waterford/ Wexford, Dublin south West

A.2.4 Ensure 100% of children in care have an allocated social worker	<p>Kildare west Wicklow, Dublin North City, and Dublin North, Dublin South Central, and will be rolled for the rest of country in remaining areas in 2018</p> <p>A.2.4 At the end of Q4 2017, 99% of children in general residential care, 100% of children in residential special care, 96% of children in general foster care, 93% of children in foster care with relatives and 98% under the category of other were allocated a social worker. Average percentage of all children in care allocated a social worker is 95%</p>
A.2.5 Increase the number of statutory foster carers	A.2.5 A number of initiatives were rolled out in 2017 to increase the number of foster carers including local and regional recruitment campaigns
A.2.6 Establish a procurement framework for foster care services	A.2.6 A procurement process commenced for the provision of private foster care placements and supportive lodgings placements and for proposals to provide specialised foster care services
A.2.7 Develop reporting/indicators on educational attainment of children in care	A.2.7 A definition for children in full-time education was defined in the Children in Care Metric Definition document in 2017 and Tusla can now report on children in care in full-time education
A.2.8 Provide information on profile of children who entered care for the first time in 2016 and future years	A.2.8 A metric is in place for the routine collation and reporting of the number of children admitted into care for the first time by age, gender, reason for admission and placement type

A3: Children's Residential Services

Children are placed in residential care in order to provide a safe, nurturing environment for them when they cannot live at home or in an alternative family environment such as foster care. Residential care aims to provide a physically, emotionally and psychologically safe space, in a planned way, in which children and young people can heal, develop and move forward in their lives. Residential care can be provided by a statutory, voluntary or private provider. Special care is short term, stabilising and safe care in a secure therapeutic environment. The aim of the special care intervention is to provide an individualised programme of support and skilled therapeutic intervention which will enable the child/young person to stabilise and then move to a less secure placement based on assessed needs.

Key Service Activity

At the end of December 2017:

- 345 children in a general residential placement, 6% of all children in care
- 99% (342) had an allocated social worker and 97% (333) had a care plan

2017 Business Plan Priorities	2017 Achievements
A.3.1 Commission Crannog Nua service	A.3.1 Crannog Nua service was commissioned in 2017 with two beds opened in November 2017
A.3.2 Register Special Care Units	A.3.2 Tusla has continued its ongoing engagement throughout 2017 with Health Information Quality Authority (HIQA) regarding preparation for registration. The development of new policies and procedures documents has commenced

A.3.3 Implement European Working Time Directive (EWTD) in all Tusla/Voluntary Centres	A.3.3 All centres, with the exception of one centre in Sligo, are EWTD compliant. Funding has yet to be released for compliance in the voluntary sector
A.3.4 Develop Children's Residential Services (CRS) in-service training strategy and schedule 2017 and scope 'Model of Care Training'	A.3.4 CRS has developed a medication management policy and rolled out training. CRS has commenced the roll-out of the Welltree Model of Care, in special care - followed by mainstream in 2018
A.3.5 Adapt service provision in each region to meet placement needs	A.3.5 Throughout 2017, engagement took place with the regional management teams, with a view to ensuring CRS service provision was meeting the identified placement needs
A.3.6 Carry out review to determine the future use of all former industrial schools/High Support Units/Non-Commissioned Special Care Units	A.3.6 A three year Service Plan for Ferryhouse industrial school was developed
A.3.7 Implement National Information System for Residential Care Services	A.3.7 A review and redesign of CRS documentation system commenced in 2017 and it is expected to be completed by Q3 2018

A4: Aftercare Services

Aftercare Services are provided by Tulsa to eligible young people in preparation for leaving care, and to support and assist the young person in making a successful transition to independent adult life in the community.

Key Service Activity

At the end of December 2017:

- 2,037 young adults in receipt of aftercare services; 157 more than 2016
- Almost half (46%; 893) of the 18-22 years cohort in receipt of aftercare services remained living with their carers while one in 10 (196) returned home. Just over one in four (26%; 510) had moved to independent living (Figure 3)
- 57% (1,128) of the same cohort (18-22 years) were in full-time education

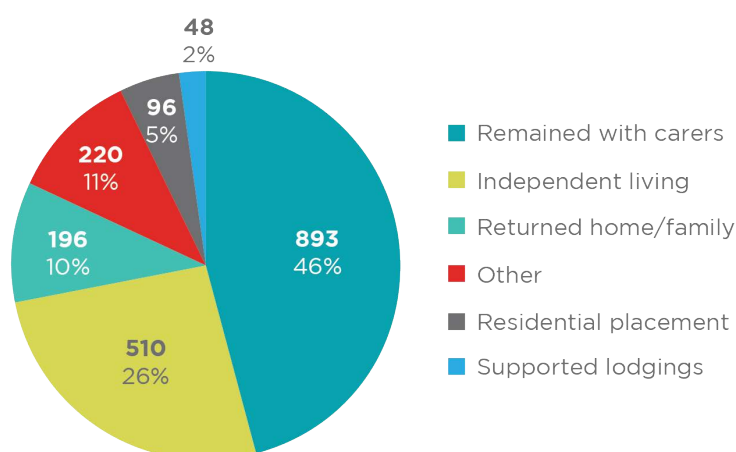


Figure 3: Living arrangements of young adults (18-22 years) in receipt of aftercare, Dec 2017

2017 Business Plan Priorities	2017 Achievements
A.4.1 Finalise service preparation for commencement of the Child Care (Amendment) Act 2015	A.4.1 Service preparation for commencement of the Child Care (Amendment) Act 2015 was completed in 2017. A full suite of aftercare support documents were developed with the accompanying implementation plans
A.4.2 Working with aftercare service providers and stakeholders to identify and align resource requirements and identify gaps	A.4.2 National aftercare implementation group ensured alignment of resources with stakeholder bodies for effective commencement of the Child Care (Amendment) Act 2015. A Capital Assistance Scheme for Care leavers was established and commenced in August
A.4.3 Support the national consultation on the revised draft Aftercare Policy and draft supporting documents	A.4.3 National consultation on the revised draft aftercare policy was carried out in 2017 and a supporting document for these policies was also drafted
A.4.4 Finalise and implement the national Aftercare Implementation Action Plan	A.4.4 A National Action Plan was developed and the implementation of the plan was commenced. A national briefing programme for staff and external stakeholders was implemented
A.4.5 Implement and support areas in standardisation of aftercare services	A.4.5 The implementation of the national aftercare policy and best practice supporting guidance documents, implementation of national aftercare standardised financial arrangements and the development of a national aftercare standardised service delivery model commenced in 2017

A5: Adoption Services

Tusla plays an important role in assessing possible adoptive parents and also provides services to people who were adopted or fostered and may wish to trace their birth family.

Key Service Activity

- 152 adoption assessments (domestic, inter-country, fostering to adoption and step-parent) completed in 2017
- 922 new applications in 2017 to commence tracing for a searched person
- 729 applicants awaiting an information and tracing service (Dec 2017)
- Seven of eight services meeting the target of eight weeks or less for the provision of non-identifying information
- The Adoption Service currently holds over 70,000 historical records relating to Mother and Baby homes, adoption societies and boarded-out records dating back to early 1900s
- It further secured another 13,600 records from St. Patrick's Guild in May 2016 and is currently providing a service to those clients

2017 Business Plan Priorities	2017 Achievements
A.5.1 Prepare for the commencement of the Adoption (Information and Tracing) Bill 2016	A.5.1 The Agency established and expanded a specific records management service to progress the centralisation of adoption records in preparation for commencement of the information and tracing legislation. Staffing of this facility was expanded throughout 2017
A.5.2 Development of Contact Register	A.5.2 The development of The Register of Adoption Contact Enquiries commenced in 2017

A.5.3 Hold media/public awareness campaign	A.5.3 A comprehensive public awareness campaign was planned and progressed and will be launched in conjunction with the commencement of the Adoption (Information and Tracing) Bill 2016
A.5.4 Establish intake team	A.5.4 The establishment of an intake team is on hold pending commencement of the legislation
A.5.5 Prepare for commencement of Adoption (amendment) Act, 2017	A.5.5 In preparation for the Adoption (amendment) Act, 2017 the updating of the policy and procedures assessment framework commenced
A.5.6 Develop permanency planning policy	A.5.6 A draft permanency planning policy was developed with implementation of plan to commence in 2018
A.5.7 Develop practice handbook for staff to support the legislation	A.5.7 A draft practice handbook was developed
A.5.8 Implement training for staff on the practice implications of the legislation	A.5.8 Briefing sessions were provided to the Adoption Authority of Ireland and to the Area manager/Services Directors group - adoption staff will commence in 2018
A.5.9 Develop standardised policy and practice in the area of Adoption Assessment frameworks	A.5.9 Standardised policy and practice in the area of Adoption Assessment frameworks was near completion

A6: Separated Children Services

Tusla separated children seeking asylum service provides care, family reunification and aftercare support with an equity of care principle to all unaccompanied minors who are in receipt of the services.

Key Service Activity

- 175 referrals in 2017, highest number since 2009 (203)
- 63% (111) of referrals placed in care

2017 Business Plan Priorities	2017 Achievements
A.6.1 Maintain the existing services in line with the equity of care principle including commitments under the Irish Refugee Protection Programme for Unaccompanied Minors (UAMs) in Greece and Italy	A.6.1 The target of 40 placements for unaccompanied minors was met in 2017
A.6.2 Develop and provide an appropriate, measured and quality response to the young people who wish to come to Ireland from refugee camps in Calais	A.6.2 The service has developed increased capacity and has successfully met its target of placements for 2017.
A.6.3 Sustainably grow the service to deliver enhanced services to the expanded UAM population in Ireland now and in the future	A.6.3 The service has developed increased capacity and has successfully met its target of placements for 2017
A.6.4 Strengthen governance and management structures	A.6.4 Governance processes were strengthened through the recruitment of an additional team leader

A7: National Child Care Information System (NCCIS)

The goal of the NCCIS is to create an integrated national child protection and welfare system to support the care of every child known to CP&W services and support the management of every case from first contact with Tusla to case closure.

2017 Business Plan Priorities	2017 Achievements
A.7.1 Recruit approved NCCIS project staff	A.7.1 A total of 17 staff consisting of data migration, administrative staff, programme managers and trainers were employed to assist in the data migration process
A.7.2 Roll out NCCIS within the allocation of €4 million provided for 2017 (hardware/other IT €750,000, project development and support services €1,684,000, third-party procurement €1,460,200)	A.7.2 NCCIS was rolled out to Cavan/Monaghan, Galway/Roscommon, Cork North Lee, Louth, Cork North, Donegal/Sligo/Leitrim/West Cavan, and Mayo in 2017
A.7.3 Continued development of NCCIS software in line with the implementation plan	A.7.3 NCCIS software was developed in parallel with the National Roll Out Plan and Release 4.8 was rolled out
A.7.4 Ensure all NCCIS operational areas have adequate ICT infrastructure to support the system	A.7.4 In addition to the system roll-out – 699 laptops and 739 mifi devices were distributed to staff. By the end of 2017 the system had 86,578 referrals (a combination of open and closed)
A.7.5 Ensure specified data is migrated into the NCCIS system pre go-live to a site	A.7.5 For each area being migrated onto NCCIS a detailed analysis was done to ensure all possible legacy data was migrated. This meant taking data from paper-based systems, Excel spreadsheets, Access databases and a myriad of legacy systems
A.7.6 Deliver training to all NCCIS users	A.7.6 All new users on NCCIS received two days training plus a half day refresher. Floor walking support was also put in place for a number of days immediately after go-live to support any questions that arose

SHORT TERM OUTPUT B: EVIDENCE BASED SERVICES

All processes and systems underpinning children and family policy and services are evidence informed

The services and functions included in under output B are:

- B1 Policy and Strategy Directorate
- B2 Prevention, Partnership and Family Support
- B3 National Quality Assurance and Monitoring Team
- B4 Alternative Care and Regulation
- B5 Performance Reporting and Information
- B6 Risk and Incident Management
- B7 Service Experience and Consumer Affairs
- B8 Corporate Governance

B1: The Policy and Strategy Directorate

The Policy and Strategy Directorate provides a specialist advisory function to the Chief Executive and SMT to inform long-term strategic planning and the development of key policy actions to achieve the organisation's strategic objectives. In addition it manages and co-ordinates all research activity across Tusla.

2017 Business Plan Priorities	2017 Achievements
B.1.1 Commence implementation and evaluation of the CP&W strategy	B.1.1 Implementation and evaluation of the CP&W strategy in 2017 has been achieved with 800 Duty Intake staff receiving training and practice leader groups established
B.1.2 Implement Children First in line with legislative commencement dates	B.1.2 Implementation of Children First was achieved in line with defined legislative dates
B.1.3 Support ongoing reduction in unallocated cases through implementation of the CP&W strategy's national approach to practice and revised duty/intake processes	B.1.3 A new referral prioritisation system reflecting the CP&W strategy's national approach to practice has been piloted in two areas and is on track to roll-out to all 17 areas in 2018
B.1.4 Replace HSE policies and procedures inherited at establishment	B.1.4 There were a total of 39 policies, procedures, protocols and guidelines developed and approved in 2017. Progress continues to replace individual HSE policies (including foster care, HR, finance and aftercare) adopted by the Agency on establishment
B.1.5 Evaluation of Prevention, Partnership and Family Support Services (PPFS) with National University of Ireland, Galway (NUIG)	B.1.5 An evaluation of PPFS was completed in 2017 by NUIG
B.1.6 Complete Strategic Statement for Alternative Care Strategy	B.1.6 Strategic statement for alternative care strategy was developed

B2: Prevention, Partnership and Family Support

Tusla is committed to providing high quality services to children and families at the earliest opportunity across all levels of need. Tusla's early intervention and prevention system involves working in partnership with families, other agencies and professionals to identify needs early and to provide practical support and help through full implementation of Meitheal, Tusla's Early Intervention National Practice Model, Quality Assurance and Performance Information and Risk.

2017 Business Plan Priorities	2017 Achievements
B.2.1 Expand the establishment of Child and Family Support Networks (CFSNs) and establish a self-assessment framework for CFSNs	B.2.1 PPFS's expansion of CFSNs and establishment of a self-assessment framework for CFSNs is underway with 99 of these now operational and a further increase expected in Q1 2018 as a result of recent appointment of staff
B.2.2 Expand implementation of Meitheal according to the National Policy Framework across the country	B.2.2 The expansion of Meitheal across the country according to the national policy framework is progressing with data collected bi-annually. Meitheal data collection at national level commenced in Q3 2016, so it is not possible to quantify expansion. However, 1409 Meitheals were opened in 2017
B.2.3 Roll-out the Participation Training Programme to enhance engagement with children and young people	B.2.3 Standardised child and youth participation training delivered nationally to over 900 participants during 2017
B.2.4 Further develop Tusla's approach to commissioning (see section on Commissioning for other details)	B.2.4 See section on Commissioning
B.2.5 Implement the Parenting Support Strategy, including public awareness campaign for PPFS	B.2.5 Development of a national commissioning framework for parenting support underway with expected completion date of Q1 2018
B.2.6 Complete and disseminate the Tusla Participation Strategy	B.2.6 Draft Tusla participation strategy was developed
B.2.7 Further develop joint working with HSE Addiction Services on Hidden Harm	B.2.7 Work continues to progress on developing a national toolkit on Hidden Harm in conjunction with HSE. Draft close to completion at end of 2017, and training plan being progressed
B.2.8 Implement Children's Information and Data Hub Project to support Children's Services Planning and build Children and Young People Service Committees' (CYPSC) capacity for using data as part of the Project	B.2.8 Children's Information and Data Hub project commenced in 2017 with staff recruited to work on project. Piloting of project progressed through 2017, with development of hub continuing. Indicators were identified and agreed with DCYA
B.2.9 Disseminate findings from the Child and Family Research Centre on the learning from the parenting, participation, commissioning and area-based work streams	B.2.9 Work supporting the research of the Child and Family Research Centre continued in 2017

B3: National Quality Assurance and Monitoring Team

The National Quality Assurance and Monitoring Team provides internal assurance to Tusla's SMT and Board that services are being delivered in accordance with standards, regulations and legislative requirements, and that service improvement activity takes place in response to reviews of services undertaken. A critical function of the team is to provide a verification process of progress in respect of service improvement planning and self-evaluation activity carried out, further to the implementation of Tusla's QIF and external regulation.

2017 Business Plan Priorities	2017 Achievements
B.3.1 Lead the implementation of the Quality Improvement Framework	B.3.1 20 briefing workshops were held with services in relation to the implementation of the QIF, and 13 areas completed the well led self-assessment - supported by the Quality Assurance and Monitoring Team
B.3.2 Engage with service managers to identify priorities for themed audits and reviews	<p>B.3.2 Meetings took place with Area Managers to identify priorities for themed audits and reviews</p> <p>The following themed reviews and audits took place during 2017:</p> <ul style="list-style-type: none"> • Quality Assurance review of the operation of CP&W service in Dublin South West/Kildare West Wicklow • Family Assessment Intervention Model review of Dublin South West/Kildare West Wicklow • National Report of Tusla Foster Care Committee Reviews 2017 • Audits of allegations against foster carers (Cork, Midlands, Midwest, Dublin South Central, Dublin North) • Quality Assurance Review of use of Section 4 (Voluntary Care, 1991 Child Care Act) for the Placement of Children and Young People (0-17 years) in the Dublin North City area • Verification reviews and audits of implementation of HIQA action plans in Cork, Midlands and Dublin South Central • Review of Separated Children Seeking Asylum team • National Review of allegations against carers of young people with a disability • National Review of the Educational Welfare Service • Case review of young person in special care • Pilot of the Quality Assurance Area Alternative Care Report with the Dublin North Area • Audit of children in care in Dublin North with out of date care plans
B.3.3 Ensuring intelligence led approach to identifying and responding to risk in Tusla services	B.3.3 Monitoring activity was targeted at high risk areas identified in HIQA inspections and Tusla performance data

B4: Alternative Care and Education Regulation

The purpose of the Alternative Care and Education Regulation Team is to:

- Register and inspect non-statutory children's residential centres under Part VIII of the Child Care Act 1991
- To assess applications and register children who are being educated in places other than recognised school settings. This includes home education and independent school settings under Section 14 of the Education Welfare Act, 2000

Key Service Activity

- 1,377 children on the register for home education (December 2017)
- 569 applications for home education in 2017
- 4,904 children (approx.) attending 43 independent schools (December 2017)
- 1,637 applications for education in independent schools in 2017
- 117 non-statutory residential centres (private and voluntary) registered with the Agency (December 2017)
- 96 inspections of non-statutory residential centres conducted

2017 Business Plan Priorities	2017 Achievements
B.4.1 Introduction of risk based prioritisation for reviews of young people and schools placed on the register of alternative education	B.4.1 Risk matrix was devised and applied retrospectively to the register of children educated outside of recognised schools in December 2016, and January 2017
B.4.2 Review the operation of the entire inspection and registration process for alternative education	B.4.2 Operation of service reviewed and new operational model and structure developed
B.4.3 Introduce a single model for registration, inspection and monitoring of non-statutory residential centres	B.4.3 A single model for registration, inspection and monitoring of non-statutory residential centres was developed

B5: Performance Reporting and Information

The Performance Reporting and Information function of the Quality Assurance Directorate is responsible for the collation, analysis and reporting of operational performance and activity data and information that is required to demonstrate where standards and targets are being met and to support decision making at all levels of the organisation.

2017 Business Plan Priorities	2017 Achievements
B.5.1 Continue to improve on the analysis and reporting of performance and activity data and information with a key focus on assisting managers in using data as an effective management tool for performance oversight and service improvement	B.5.1 Monthly comparative charts and area specific reports (for CP&W social worker activity) were developed and are being issued to operations on a monthly basis for dissemination to area managers

B6: Risk and Incident Management

The purpose of the Risk and Incident Management team is to implement and maintain risk and incident management systems within the Agency. The team aims to ensure Tusla is aware of the nature of its risks, their status and how they are being managed.

2017 Business Plan Priorities	2017 Achievements
B.6.1 Continue the implementation of the Tusla Risk Management policies and procedures	B.6.1 Briefings were rolled out across the Agency. National directorate risk registers were developed. Role and function of national and regional quality and risk governance groups were reviewed and re-developed. Corporate risk register working group was established
B.6.2 Continue the implementation of the Tusla Incident Management policies and procedures	B.6.2 Briefings on the policy and training on the National Incident Management System (NIMS) system were rolled out across the Agency. Revised national incident report form was launched. Risk management

<p>B.6.3 Ensure effective dissemination of learning across the Agency from incidents and risks</p> <p>B.6.4 Increase staff awareness of the protected disclosure policy</p>	<p>liaison committee with the State Claims Agency (SCA) was developed and terms of reference were defined</p> <p>B.6.3 Work commenced on full review of all child death reports to extract key themes for policy and practice</p> <p>B.6.4 Briefings on protected disclosures included in risk and incident briefings</p>
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B7: Service Experience and Consumer Affairs

The Tusla Service Experience Division comprises the functions of complaints and feedback, corporate Freedom of Information (FOI) and parliamentary affairs. It aims to improve how children, parents and carers experience our services. This is achieved through hearing their perspectives, conveying this feedback to the services concerned, and informing changes and improvements which may be required in the way services are delivered and experienced. In Q4 2017 the corporate FOI and parliamentary affairs functions transferred to the Corporate Services Directorate.

Key Service Activity

- 1,012 FOI requests received across the Agency in 2017
- 447 parliamentary questions and 324 representations responded to
- 615 formal complaints responded to across the Agency

2017 Business Plan Priorities	2017 Achievements
B.7.1 Further roll-out of the NIMS complaint module	B.7.1 NIMS module developed and training provided to all areas
B.7.2 Supporting the ongoing implementation of Tell Us	B.7.2 Process for ongoing support now available to all staff (telephone and email)
B.7.3 Improve the FOI system at corporate and national level to ensure compliance with legislation	B.7.3 More than 120 staff participated in dedicated training courses to assist in developing decision making skills. The development of a policy and procedure guide for staff commenced – roll out in 2018
B.7.4 Implement the new standing orders for parliamentary questions and parliamentary representations	B.7.4 In line with Dáil reforms and standards Tusla introduced a dedicated email address for Oireachtas members
B.7.5 Completion of service user survey	B.7.5 Draft survey developed with roll-out expected in 2018
B.7.6 Establish innovative channels for service user's feedback and complaints	B.7.6 New complaints leaflets and poster was developed in consultation with young people. WhatsApp was set up as a new platform to receive complaints
B.7.7 Report quarterly on the service user experience to promote and support the utilisation of this information	B.7.7 Quarterly reporting on the service user experience was completed throughout 2017 to promote and support the utilisation of this information

B8: Corporate Governance

The purpose of the corporate governance function in Tusla is to ensure the Agency complies with its obligations under the Code of Practice for the Governance of State Bodies 2016 and meets its legislative requirements.

2017 Business Plan Priorities	2017 Achievements
B.8.1 Implementing the Code of Practice for the Governance of State Bodies 2016	B.8.1 In 2017, the Agency continued to implement the Code of Practice for Governance of State Bodies 2016
B.8.2 Defining Tusla's risk appetite to support the risk register	B.8.2 Draft Risk Appetite statement was developed

SHORT TERM OUTPUT C: FAMILY AND PARENTING SUPPORT

A targeted range of family and parenting supports

The services included in under output C are:

- C1 Children and Young People's Services Committees
- C2 Commissioning (links to PPFS Programme)
- C3 Therapy Services
- C4 Assessment Consultation and Therapy Services
- C5 Regional Sexual Abuse Assessment and Therapeutic Intervention Service
- C6 Domestic, Sexual and Gender-Based Violence Services
- C7 Homelessness
- C8 Early Years Service Regulation

C1: Children and Young People's Services Committees (CYPSC)

CYPSC are the key structure identified by Government to plan and co-ordinate services for children and young people in every county in Ireland. The overall purpose is to improve outcomes for children and young people through local and national interagency working. CYPSC are county-level committees that bring together the main statutory, community and voluntary providers of services to children and young people to realise the national outcomes set out in Better Outcomes, Brighter Futures.

2017 Business Plan Priorities	2017 Achievements
C.1.1 To agree Memorandum of Understanding (MOU) with DCYA regarding oversight and development of CYPSC	C.1.1 MOU agreed with DCYA regarding oversight and development of CYPSC
C.1.2 To ensure the establishment and embedding of CYPSC in all areas	C.1.2 CYPSC established and embedded in all areas
C.1.3 To improve capacity of staff employed within CYPSC and those engaged with the delivery of the committees	C.1.3 A workforce development plan for CYPSC was delayed - proposed action in 2018
C.1.4 To develop good communications including website management to inform at local and national level	C.1.4 The national CYPSC website was managed and maintained as the focal point for local and national information. Two CYPSC ezines were developed and issued to 1,200 stakeholders. The national network of CYPSC co-ordinators met twice to share information on practice, learning and national and local developments
C.1.5 To identify, map and implement plans and structures which will make CYPSC most effective in the delivery of services to children and families	C.1.5 A CYPSC planning and reporting framework was developed and adopted by the National CYPSC Steering Group in 2017 for implementation in 2018
C.1.6 To ensure planning and coordination of parenting supports at local level through CYPSC (linked to PPFS)	C.1.6 Planning and co-ordination of parenting supports were implemented by local CYPSC including, the organisation of multiple agencies, stakeholders and interested parties around the theme of parenting support and information gathering and dissemination

C2: Commissioning (links to PPFS Programme)

The aim of commissioning in Tusla is to ensure that the total resources available to children and families are applied to improving outcomes in the most efficient, effective, equitable, proportionate and sustainable way. Commissioned services are targeted, evidence informed and outcome based.

Key Service Activity (for PPFS)

- At least 39,065 children referred to family support services in 2017
- At least 73% (28,562) of children referred to family support services in 2017 received a service
- 99 Child and Family Support networks operating at the end of 2017 with a further 35 planned
- 1,409 Meitheal processes requested in 2017

2017 Business Plan Priorities	2017 Achievements
C.2.1 Apply the commissioning process as outlined in the commissioning strategy and toolkit to all areas in Tusla	C.2.1 Tusla applied the commissioning process as outlined in the commissioning strategy and toolkit to all areas in Tusla in 2017
C.2.2 Extend the development of Commissioning Position Statement to all 17 areas	C.2.2 Tusla extended the development of Commissioning Position Statement to all 17 areas in 2017
C.2.3 Establish a national strategic commissioning support office	C.2.3 Development of a national strategic commissioning support office commenced with the appointment of a Service Director, the development of a staffing plan
C.2.4 Provide training and information sessions on commissioning and governance both internally and externally	C.2.4 There were four meetings with the Commissioning Advisory Group, three information sessions completed throughout the country and 10 information meetings conducted with umbrella representative organisations
C.2.5 Implement a revised Commissioning Governance Framework	C.2.5 A revised Commissioning Governance Framework was implemented in 2017
C.2.6 Utilise Children's Information and Data Hub Project (O4C) to develop data management capacity in CYPSC	C.2.6 Work progressed to develop a Children's Information and Data Hub

C3: Therapy Services

Tusla is required under the Child and Family Agency Act 2013 to support and promote the development, welfare and protection of children; to support and encourage the effective functioning of families and to provide services relating to the psychological welfare of children and their families.

2017 Business Plan Priorities	2017 Achievements
C.3.1 Publish the Strategic Plan for Tusla psychological and therapeutic services, and establish an implementation group	C.3.1 A strategic plan for Tusla psychological and therapeutic services was submitted to the Tusla Board and to the DCYA
C.3.2 Develop governance structures for Tusla therapy services	C.3.2 A proposed governance structure was included in the Strategic Plan

C.3.3 Pilot first phase of Community Therapy Support Service provision at area level	C.3.3 A pilot therapy service was established in Waterford/Wexford. Therapy staff were recruited in other areas
C.3.4 Ensure a strategic approach to the development of therapeutic services including Assessment, Consultation and Therapy Service (ACTS) and sexual abuse services	C.3.4 A Strategic plan was presented to the Tusla Board

C4: Assessment Consultation and Therapy Services (ACTS)

ACTS is a national specialised clinical service which has been developed in order to provide multi-disciplinary consultation, assessment and focused interventions to young people who have high risk behaviours associated with complex clinical needs.

2017 Business Plan Priorities	2017 Achievements
C.4.1 Implement the recommendations of the ACTS review	C.4.1 A working group was established to implement to recommendations of the ACTS review
C.4.2 Develop interagency working protocols with key partner agencies	C.4.2 A joint protocol with HSE was put in place
C.4.3 Scope the development of an electronic files and database system	C.4.3 The ACTS working group have scoped the development of an electronic files and database system

C5: Regional Sexual Abuse Assessment and Therapeutic Intervention Service

This service, in conjunction with local social work teams, provides a range of integrated specialist sexual abuse services to meet the needs of children and their families who have suffered sexual abuse and for children and young people with sexually harmful behaviour.

2017 Business Plan Priorities	2017 Achievements
C.5.1 Coordinate existing services to address sexually harmful behaviour as a national service with the governance structure, business processes and supporting infrastructure to ensure capacity to strategically develop Tusla sexual abuse services	C.5.1 A national service plan was put in place to address sexually harmful behaviour as a national service
C.5.2 Continue development of specialist centres providing assessment and therapy services to address key service gaps	C.5.2 Tusla is a partner in the EU Promise Project and was awarded €62,152 under the Promise Project for specialist training in the model

C6: Domestic, Sexual and Gender-Based Violence Services (DSGBV)

To provide leadership and support in the prevention, identification, intervention and ongoing services for victims of domestic, sexual and gender-based violence in Ireland. This is achieved through commissioned activities for prevention, early intervention and provision of domestic violence and sexual violence support services delivered by Tusla and through partner organisations.

Key Service Activity

In 2017 Tusla provided funding, co-ordination and support to 59 organisations delivering services to victims of domestic, sexual and gender-based violence throughout the country. Of these organisations:

- 22 provided emergency refuge or safe home accommodation in addition to other community based supports to women and children who were victims of domestic violence
- 21 provided community based services to women, children and men who were victims of domestic violence - these organisations did not provide accommodation directly to service users
- 16 provided community based services to women, men and older children who were victims of sexual violence

The 22 emergency accommodation provider organisations provided a total of 155 family units of accommodation, of which 145 units were in emergency refuges and 10 were emergency safe homes. The refuge units are located in 17 counties and the safe home accommodation in Sligo and Dublin. Of the 155 units, 10 units in Rathmines Women's Refuge were temporarily closed from September 2017 into 2018 for necessary refurbishments.

Other Service Activity

- Two national helpline services for domestic violence and sexual violence funded by Tusla and provided by Women's Aid and Dublin Rape Crisis Centre respectively. Increased provision in 2017 resulted in access to 24 hour, freephone helpline services for victims of sexual violence and domestic violence in line with requirements under the Istanbul Convention
- Having secured EU funding in 2016, The Manuela Project commenced roll-out in September 2017. This project, for which Tusla is lead partner, involves the delivery of a sexual violence prevention programme on a pilot basis. The programme focuses on issues of sexual consent, is targeted at young people aged 14-17 in educational settings and is being undertaken in collaboration with the sexual violence services sector and the Manuela Riedo Foundation Ireland. The programme commenced in 12 locations nationally in 2017

2017 Business Plan Priorities	2017 Achievements
C.6.1 Ongoing development of systems and processes for commissioning and oversight of DSGBV services, including co-commissioning approaches	C.6.1 Six commissioning pilots were commenced to establish an evidence base. Biannual governance and Service-Level Agreement (SLA) reviews took place with funded organisations –standardised quarterly reporting mechanisms were implemented
C.6.2 Commissioning of national DSGBV helpline services	C.6.2 Level of service for national helplines was formally agreed for 2018. Domestic violence and sexual violence helplines moved to freephone 24/7 service
C.6.3 Commissioning of additional services for victims of DSGBV in line with identified needs including defined targeted groups, and implementing measures to enhance sustainability in the delivery of services	C.6.3 Initiatives were implemented to reduce waiting times for urgent cases in sexual violence services; additional outreach provision services were put in place. Meetings and workshops completed in 2017 to assist with planning. Participation in commissioning process by targeted groups through the six pilot commissioning projects (NAPs) happened at a local level
C.6.4 Development of quality standards for DSGBV services, in line with Tusla Quality Assurance Framework	C.6.4 A draft paper on standards was developed in line with Tusla Quality Assurance Framework
C.6.5 Development of evidence base for responses to children who witness domestic violence	C.6.5 A draft literature review on child witnesses was produced and an evaluation of models of practice for working with children who experience/witness domestic violence commenced
C.6.6 Progressing data and information developments around services for victims of DSGBV	C.6.6 A full dataset was completed and a report on 2016 activity was compiled in Q4
C.6.7 Implementing service user engagement mechanisms	C.6.7 The six pilot commissioning needs analysis projects was undertaken in 2017, a process was completed to engage with service users and stakeholders and a workshop was held with funded service providers
C.6.8 Establishing mechanisms for technical/governance support for funded domestic violence services to enhance capacity	C.6.8 Safe Ireland was engaged to identify priority areas for support of funded domestic violence services and an outline programme of support was developed for 2018. Two workshops were held by DSGBV services for funded service provider
C.6.9 Implementing ongoing change processes to position service in line with best practice	C.6.9 Ongoing identification and assessment of training needs of service providers commenced
C.6.10 Establishing Tusla-led structures and fora for interagency working around DSGBV	C.6.10 Four regional 'clusters' responding to domestic violence were embedded with over 12 meetings held in 2017. An interagency advisory group was established for each of the six commissioning pilots

C7: Homelessness

Tusla has a role in relation to child homelessness under the Child Care Act 1991. In addition, Tusla participates on a multi-agency basis engaging with other statutory and voluntary agencies that provide services and supports to children, young people and families experiencing homelessness. Tusla Homeless Liaison service, established in October 2015, provides a service focus in the Dublin area. Tusla participates on the Inter-Agency forum established under the Government plan Rebuilding Ireland - an Action Plan for Housing and Homelessness.

2017 Business Plan Priorities	2017 Achievements
C.7.1 Arising from the review finalised in 2016 ensure the implementation of the agreed protocol between Tusla and the Dublin Region Homeless Executive	C.7.1 The protocol for the Dublin region has been updated and circulated
C.7.2 Extend the provisions of the agreed protocol nationally	C.7.2 The protocol was extended to Galway
C.7.3 Continue multi-disciplinary working between key agencies ensuring that children, young people and families known to Tusla have access to consistent services	C.7.3 Tusla provided training on PPFS to Dublin Regional Homeless Executive (DRHE) and contracted homeless services. CYPSC established subgroups on homelessness in two Dublin areas and Galway
C.7.4 Ensure a continuum of support for transient families where possible using national frameworks such as Meitheal	C.7.4 Systems were put in place to connect family hubs with Tusla
C.7.5 Work with relevant agencies and Family Resource Centres to consider what additional support can be provided	C.7.5 Tusla ensured close liaison between family hubs and the DRHE, the identified on-site support service and the local Tusla area

C8: Early Years Service Regulation

The Early Years Inspectorate is an independent statutory regulator of Early Years services in Ireland and has responsibility for registering and inspecting of pre-schools, playgroups, crèches, child minders (who care for more than four children) and drop in services. Its remit covers children aged 0-6 years and its authority is underpinned by Part 12 of the Child and Family Agency Act 2013 and the 2016 Early Years Regulations.

Key Service Activity

- 4,484 early years services operating at the end of December 2017
- 89 new registrations/notifications in 2017
- 2,033 inspections of Early Years services carried out in 2017

2017 Business Plan Priorities	2017 Achievements
C.8.1 Roll-out the Quality Regulatory Framework for the Early Years sector	C.8.1 Draft quality and regulation framework was developed
C.8.2 Commence re-registration of the existing register provider	C.8.2 Plan for re-registration of services was developed and will commence in 2018
C.8.3 Develop and implement phase II of the TEYIS ICT system	C.8.3 Phase II was moved to 2018
C.8.4 Develop and promote the work of the inspectorate	C.8.4 Forum for early years' sector stakeholders was established in 2017. Annual report for 2016 published in 2017 and quarterly newsletter was provided to the sector

SHORT TERM OUTPUT D: PROMOTING FULL-TIME EDUCATION

Attendance, participation and retention in full-time education is embedded in service delivery for all children.

The services included in under output D are:

D1: Educational Welfare Services

D1: Educational Welfare Services (EWS)

The Education Welfare Service (EWS) is a national service that holds the statutory responsibility for ensuring that all children attend school or otherwise receive an education. It comprises the statutory EWS and is supported by non-statutory services Home-School-Community-Liaison (HSCL) and the School Completion Programme (SCP).

Key Service Activity

- EWS worked with 3,522 new individual children in the academic year 2016/2017
- 721 school attendance notices and 156 court summonses were issued to parents in the academic year 2016/2017

2017 Business Plan Priorities	2017 Achievements
D.1.1 Reduce numbers of unallocated EWS cases through recruitment of additional staff and enhancing pre-referral work via HSCL and SCP, including the continuous embedding of PPFS approaches into practice using Meitheal and other evidence-based interagency approaches 27 including working with CYPSC 28	D.1.1 There was a 25% reduction in unallocated EWS cases between Q2 2017 and Q4 2017
D.1.2 Progress implementation of EWS integrated structure to ensure all three strands of EWS work together cohesively to support the whole child approach	D.1.2 The implementation of EWS integrated structure was progressed through the commencement of work on the development of a plan with the assistance of the PMO office
D.1.3 Continue to improve quality across the SCP programme by addressing governance and employment shortcomings identified in recent audits. Continue to up skill SCP staff through Continuous Professional Development (CPD)	D.1.3 The Expert Group on SCP Reform completed its work and made final recommendations to the Tusla Board which were approved by the DCYA. The report of the Expert Group was forwarded to the Minister in Q4 2017. Staff CPD for all SCP staff was provided throughout 2017
D.1.4 Commence CPD programme for all HSCL staff in partnership with the Department of Education and Skills (DES)	D.1.4 A comprehensive two day CPD Programme was provided for all 420 HSCL staff. This took place in seven venues nationally and school principals were included for day one in each venue. The DES and Tusla PPFS presented at each CPD session
D.1.5 Submission of School Attendance Strategies by all schools	D.1.5 57% of school attendance strategies were received by end of Q4

SHORT TERM OUTPUT E: AN ORGANISATION FIT FOR PURPOSE

The functions included in under output E are:

- E1 Office of the Chief Executive
- E2 Office of the Chief Executive – Programme Management Office
- E3 Information and Communication Technology
- E4 Estates
- E5 Finance
- E6 Procurement
- E7 Workforce Planning
- E8 Workforce Learning and Development
- E9 Employee Wellbeing and Welfare
- E10 Recruitment and Talent Management
- E11 HR Operations – Organisational Management
- E12 Employee Relations and Industrial Relations
- E13 Legal Services
- E14 Data Protection
- E15 Communications
- E16 Health and Safety

E1: Office of the Chief Executive

The Chief Executive is responsible for all the functions and activities of Tusla, which aims to achieve improved outcomes for children and families. The Chief Executive is Chair of the SMT of Tusla, and is accountable to the Board for all functions and activities of the Agency.

The Chief Executive advises the Board on all major issues relating to the Agency, including:

- Policy
- Strategic developments
- Governance arrangements
- Financial reporting and financial probity
- Performance
- Risk (organisational and service delivery)
- Updates on implementation of the Agency's corporate and business plans

The Chief Executive also collaborates with the Secretary General of the DCYA on relevant matters.

The Office of the Chief Executive is responsible for the administration of the activities of the Chief Executive as set out above.

2017 Business Plan Priorities	2017 Achievements
E.1.1 To drive the implementation of the Transformation Programme	E.1.1 See chapter two on Transformation programme
E.1.2 Lead the new organisational structure and organisational reform, to support the CP&W Strategy as the main programme within the	E.1.2 New senior management posts coming from the new organisational structure were recruited. Governance structure for the

Transformation Programme	CP&W Strategy established with the CEO as programme sponsor
E.1.3 Lead Tusla's 'to be' culture	E.1.3 Cultural development programme (2018-2020) developed and approved by the Board
E.1.4 Develop Tusla's second Corporate Strategy setting a new vision and mission for the Agency.	E.1.4 Tusla's second Corporate Strategy developed and submitted to the DCYA
E.1.5 Define Tusla's risk appetite	E.1.5 Draft risk appetite statement developed
E.1.6 Assess the capacity of the Office of the Chief Executive to undertake its responsibilities and functions	E.1.6 A review was undertaken to assess the capacity of the Office of the Chief Executive which resulted in the recruitment of additional administrative and management capacity

E2: Office of the Chief Executive – Programme Management Office (PMO)

The PMO is a centralised, co-ordinating unit which provides a focal point for all programmes and project management. The PMO develops, collates, and coordinates project management tools. These ensure quality, consistency, accountability, and transparency across programmes.

As a newly established unit, the PMO will support the SMT, programme managers, and project managers to implement the consolidation plan for the Transformation Programme and other programmes and projects.

2017 Business Plan Priorities	2017 Achievements
E.2.1 Fully resourced PMO	E.2.1 The Head of the PMO along with several programme managers and administrative staff were recruited and in place by the end of 2017
E.2.2 Agreement by SMT of programmes and projects to sit within PMO	E.2.2 All programmes reported into the SMT as Transformation Programme sponsor group
E.2.3 Support for Transformation Programme established, change management plan developed and governance for same in place	E.2.3 Transformation Working Group was established in Q2 2017. Charters were put in place for all programmes under Transformation Programme and programme managers and support staff were recruited
E.2.4 Establishment of Lean processes as part of PMO to support Transformation Programme	E.2.4 The recruitment of Lean specialist commenced
E.2.5 Produce end of year report on PMO activity – December 2017	E.2.5 End of year PMO report was produced and will be published in Q1 2018

E3: Information and Communication Technology (ICT)

The ICT strategy 2017-2019 was developed and progressed. The strategy sets out a roadmap based on six core themes (applications, infrastructure, data, service delivery, service design and strategy and increase capability) to establish a full ICT function within Tusla and to deliver on the vision of providing secure, integrated, and innovative ICT services that support Tusla and stakeholders in delivering better outcomes for children and families.

2017 Business Plan Priorities	2017 Achievements
E.3.1 Recruitment of ICT Director to lead Tusla ICT Directorate	E.3.1 ICT Director commenced role in 2017
E.3.2 Implementation of an agreed ICT strategy programme	E.3.2 A new ICT strategy and programme was developed and approved
E.3.3 ICT Audit and baseline of ICT landscape	E.3.3 This project was developed in parallel with the NCCIS roll-out and covered all offices where NCCIS staff are located. The project included auditing of users client devices, mobile devices, printer capabilities and also for some sites connectivity performance testing
E.3.4 ICT programme of projects in line with Tusla priorities	E.3.4 The following Tusla ICT priorities were commenced or delivered: NCCIS, Children First web portal launched December 2017; school returns portal and an infrastructure upgrade programme
E.3.5 Interim Scoping of Records Management Solution to address Action 75/76 of the Ryan Implementation Plan	E.3.5 This action will be re-baselined and re-planned in line with the roll-out of NCCIS

E4: Estates

The Estates team is responsible for the development and implementation of the Estates' strategy to ensure that the Agency has the necessary capacity to deliver services in optimum surroundings and in locations that are accessible to service users and staff.

Tusla Estates also manage the property portfolio at a national level and has full responsibility for all properties complying with statutory requirements and health and safety practices.

2017 Business Plan Priorities	2017 Achievements
E.4.1 Delivery of the Capital Plan 2017. The capital allocation of €13.5m will be used across various projects e.g. to continue with the essential refurbishment and upgrade works through the minor capital budget, and to fund fit-out costs for critical accommodation requirements nationally	E.4.1 Identified capital projects completed in 2017

E5: Finance

The purpose of the Finance Directorate is to support the Agency in operating in the most efficient and effective manner possible and within the allocated funding.

Finance is responsible for managing the accounting, treasury and financial reporting operations of the Agency, including the development and management of internal controls to mitigate risk and report on the financial position of the Agency.

Finance develops and manages internal controls, the performance management of the Agency and business planning. Additionally, the directorate manages financial governance requirements and oversees the implementation of those requirements.

Finance reports to the DCYA on cash expenditure against profiled funding allocation.

2017 Business Plan Priorities	2017 Achievements
E.5.1 Roll-out of Budget 2017	E.5.1 2017 Budget was rolled out with break-even budgetary situation at year end
E.5.2 Implement resource Allocation Programme Plan for 2017	E.5.2 The resource allocation profiler was used to inform the allocation of new monies provided in the 2017 budget, to the 17 areas
E.5.3 Production of 2016 Annual Financial Statement (AFS) and Comptroller and Auditor General (C&AG) audit	E.5.3 Production of 2016 AFS and C&AG audit were achieved within timeline
E.5.4 Oversight and tracking of Audit recommendations	E.5.4 Oversight and tracking of audit recommendations required for 2017 were completed
E.5.5 Cash Allowance Payment Project	E.5.5 Reorganisation of controls for Cash Allowance Payment system was put in place
E.5.6 Ongoing implementation of Finance Operating Model	E.5.6 Additional resources recruited in 2017 as part of implementation of the Finance Operating Model
E.5.7 Governance Model for grant agencies	E.5.7 New Governance arrangements communicated and put in place for S 56-59 grants agencies
E.5.8 Roll-out and development of Tusla specific financial regulations	E.5.8 Tusla specific financial regulations were developed and rolled out in 2017 in relation to Purchase-to-pay and travel and subsistence
E.5.9 Purchase-to-pay process improvement	E.5.9 Improvements to the purchase to pay process commenced in 2017
E.5.10 Development of enhanced support at national, regional, area and directorate level via business partnering	E.5.10 The development of a business partner model for financial services has been put in place at regional level

E6: Procurement

The purpose of the Procurement function is to establish support in the management and monitoring of contracts and provide guidance to managers and budget holders on compliance reporting and regulations of procurement requirements.

The function identifies procurement requirements for the Agency which assists in the development of the three years' Procurement Plan and assists with proper planning and evaluation of requirements ensuring governance and value for money (VFM).

Tusla utilises a shared service function with HSE/ Health Business Services (HBS).

This function also reports on the Department of Finance 40/02 Circular in relation to contracts in excess of €25k which have been awarded without a competitive process.

2017 Business Plan Priorities	2017 Achievements
E.6.1 Progressing private foster care services procurement plan	E.6.1 Procurement plan for private foster care services developed and progressed to tendering
E.6.2 Assist in identifying the key/common services for 'Other Managed Services' (psychology, therapy, etc.) and progress the procurement of same with the project lead	E.6.2 Procurement plan in respect of other managed services was developed

E.6.3 Support key Tusla procurement goals as identified in the service plan 2017	E.6.3 Tusla procurement goals supported as identified in the 2017 Business Plan
E.6.4 Roll out legal procurement in March 2017	E.6.4 Procurement of legal services completed
E.6.5 Manage residential care procurement	E.6.5 Two residential care procurements commenced: (i) Children's Residential Centres to care for Separated Children Seeking Asylum (SCSA) (ii) Residential Emergency Respite Service 5402
E.6.6 Access availability to centralised databases with HSE/HBS and Office of Government Procurement (OGP)	E.6.6 Online access to framework agreements/contracts and procurement initiative applications were developed by HBS and will be made available to Tusla – expected launch date May 2018
E.6.7 Develop a SLA with HBS for procurement services	E.6.7 The development of SLA with HBS commenced in 2017
E.6.8 Work with HBS to identify shared services with HSE/HBS and OGP	E.6.8 Work continues in respect of shared services with HBS and OGP
E.6.9 Additional resources for the procurement function	E.6.9 One additional resource was recruited to the procurement function
E.6.10 Provide procurement training for staff	E.6.10 Procurement training was provided to Service Directors, Area Managers and corporate budget holders

E7: Workforce Planning

Workforce Planning will evaluate the existing workforce designation in order to adapt to the changing needs of the Agency. It will take all the appropriate steps required to achieve a workforce that is valued and supported within a learning organisation.

Workforce Planning will support the development of an evidence-based resource allocation model to ensure appropriate resources are allocated to the needs of services.

2017 Business Plan Priorities	2017 Achievements
E.7.1 Develop a three year workforce plan in partnership with all directorates which identifies the current and predicted headcount and skills required	E.7.1 Workforce planning commenced in some areas of Tusla with the appointment of workforce planners officers in Q4 2017
E.7.2 Engage with Operations to ensure RAP implications and approach to team skills mix/composition agreed	E.7.2 This action has been deferred to 2018 pending completion of the Strategic Workforce Plan
E.7.3 Identify and develop new roles required for the Agency to ensure appropriate skill mix and multi-disciplinary working is fostered	E.7.3 This action has been deferred to 2018 pending completion of the Strategic Workforce Plan
E.7.4 Develop an approach to strategic resourcing and planning for key roles	E.7.4 This action has been deferred to 2018 pending completion of the Strategic Workforce Plan

E8: Workforce Learning and Development (WLD)

Workforce Learning and Development (WLD) has responsibility for all learning and development activities within Tusla.

WLD supports participation of staff in a broad range of applied learning and development activities, including formal training courses, conferences, practice development forums, e-learning and evidenced-informed learning activities.

A full programme of learning and development activities is provided annually, which is informed by corporate priorities and learning and development needs identified from all levels of staff using two distinct systematic processes, namely personal development planning and training needs analysis.

WLD aims to build the capacity and capability of Tusla staff that work directly or indirectly with children and families to achieve better outcomes for children and young people.

2017 Business Plan Priorities	2017 Achievements
E.8.1 Develop a learning culture by supporting participation of staff in a broad range of applied learning and development activities	E.8.1 The WLD Work Plan consisting of 775 training courses was delivered as planned. This accounted for 12,662 individual attendances at training courses of which 9,315 were Tusla staff and 3,527 were from other agencies
E.8.2 Support, encourage and facilitate staff through structured professional and career development	E.8.2 Progress was made in 2017 on embedding the Personal Development Planning (PDP) process into all staff practice
E.8.3 Strengthen leadership capacity and capability at all levels	E.8.3 Leadership development programme pilots ran in Q4 2017
E.8.4 Design and deliver associated training as part of the overall recruitment and retention strategy	E.8.4 National corporate induction workshops were piloted in 2017 and will inform the 2018 delivery model
E.8.5 Support the embedding of Prevention, Partnership and Family Support into practice and the national roll-out of the Child and Youth Participation Toolkit with accompanying training to Tusla staff	E.8.5 882 personnel attended 63 Child and Youth Participation Training courses nationally in 2017. An additional coaching support to embed learning in practice was piloted by WLD for participants on this programme. A total of 129 other training courses to specifically support PPFS implementation were delivered by WLD in 2017
E.8.6 Support the roll-out of NCCIS	E.8.6 NCCIS project team managed the training to support NCCIS, with support from WLD in development of training materials and internal capacity for training was delivered
E.8.7 Support the CP&W Strategy Learning and Development plan and the lead e-learning programme to support Children First implementation	E.8.7 E-learning programme was launched and Signs of Safety training commenced in 2017. 736 staff attended seven events of the two day introductory programmes and 267 persons attended the five day programme across four locations

E9: Employee Wellbeing and Welfare

The Employee Wellbeing and Welfare Unit provide the necessary systems and processes to enable staff to reach and maintain their full potential to deliver a quality service.

2017 Business Plan Priorities	2017 Achievements
E.9.1 Develop an Employee Wellbeing Strategy based on the HR Strategy 2016–2018	E.9.1 Employee Wellbeing Strategy was developed in 2017
E.9.2 Produce and Implement Tusla's Employee Retention Strategy	E.9.2 Survey has been completed and recommendations are being reviewed to develop Tusla's Employee and Retention Strategy
E.9.3 Establish Succession Management processes	E.9.3 Retirements programme has been put in place to ensure continuity and no loss of knowledge

E10: Recruitment and Talent Management

Recruitment and Talent Management manages and provides an end-to-end recruitment process which is responsive to the needs of the Agency in compliance with the Public Service Management (Recruitment & Appointments) Act 2014 and in accordance with Tusla's recruitment license granted by the Commission for Public Service Appointments under its codes of practice.

It also provides a complete vetting service for the Agency. Tusla Garda Vetting Bureau manages all vetting applications: from prospective employees, existing employees, fostering and adoption services in compliance with the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012-2016.

2017 Business Plan Priorities	2017 Achievements
E.10.1 Provision of available staff to address service needs, key focus on social work graduates, access to social care regional panels, recruitment for Family Support Workers, recruitment for admin grades IV – VII	E.10.1 A graduate drive for social workers was completed in 2017 and a social care panel was put in place
E.10.2 Tusla brand to be promoted widely in Northern Ireland, England, Scotland and Wales	E.10.2 Tusla completed visits to all third level institutions in Ireland, Northern Ireland and Scotland to promote Tusla as an employer of choice
E.10.3 Tusla Garda Vetting Bureau to be fully operational with authorised signatories	E.10.3 Tusla Garda Vetting Bureau is fully operational with authorised signatories in place
E.10.4 Tusla Garda Vetting Bureau to have fully compliant ICT database and operating technology needs	E.10.4 Work commenced with ICT to progress a fully compliant ICT database and operating technology needs
E.10.5 Tusla Garda Vetting Bureau to commence e-vetting in Q1 2017	E.10.5 Tusla Garda Vetting Bureau commenced e-vetting in Q1 2017

E11: HR Operations – Organisational Management

HR provides the effective delivery of transactional HR activity with HR systems, policies and procedures that support delivery of the Agency strategy and business plans.

HR provides and analyses HR data and management information (MI) that supports and

drives operational decisions. HR maintains the organisation structure in line with organisation design.

As a business partner we create positive and effective relations with key internal and external stakeholders, and provide professional HR support through dedicated HR teams.

2017 Business Plan Priorities	2017 Achievements
E.11.1 Review of DNE Payroll Project with a view to implementing new process through other regions and directorates	E.11.1 New payroll process was initiated in Tusla South
E.11.2 Further enhance MI reporting and develop HR dashboards for business needs at all levels	E.11.2 Data Analyst post was advertised in Q4 2017. SAP dashboard tested for business use at national, regional and local level
E.11.3 Develop an integrated HR report encompassing all areas of HR	E.11.3 Development of an integrated HR report commenced
E.11.4 Ensure all staff with access to System Applications Products (SAP) HR system are trained and confident in the processes	E.11.4 Training was delivered across all system areas as required with a focus on time and attendance
E.11.5 Maintain relationship with HBS and make recommendations for improvements	E.11.5 Regular structured meetings took place throughout 2017 and improvements were made to the shorter working year programme and the paternity leave processes was implemented
E.11.6 In conjunction with Regional HR maintains the organisation structure in line with agreed structure changes	E.11.6 All posts in each of the four regions were validated to ensure the structure was valid and reflects the regional organisational structure
E.11.7 Enhance the HR information and communication through the Tusla Hub and other effective methods	E.11.7 A working group was set up to progress communications and information on HR processes on the Tusla Hub and additional information was included regarding new policies on the Tusla Hub

E12: Employee Relations and Industrial Relations (ER/IR)

Create a constructive Employee Relations/Industrial Relations (ER/IR) environment that enables Tusla to meet Agency objectives and to deliver change.

2017 Business Plan Priorities	2017 Achievements
E.12.1 IR Strategy agreed and consultation process defined	E.12.1 Work commenced on the development of a Tulsa IR strategy and a consultation and engagement model for staff partners
E.12.2 Survival to Sustainability II, engagement and consultation with staff partners	E.12.2 Throughout 2017 there continued to be positive engagement with staff representative bodies regarding the implementation of Survival to Sustainability II
E.12.3 Ownership and line of sight of all ER/IR individual and collective cases and issues	E.12.3 The MOU agreed between Tusla and the HSE on the establishment of the Agency continued to operate throughout 2017, thus assisting in ongoing ER matters at a regional level. An analysis commenced on both third party and internal cases, to inform the future ER structures

E13: Legal Services

The in-house Legal Services Unit provides specialist legal services and support to our colleagues in all areas of child care law and corporate advice. Since May 2016 the in-house office runs District Court child care cases in the Dublin area together with running the majority of High Court applications.

The Legal Services Unit work closely with the 31 member firms, Agency staff and the DCYA in order to ensure a consistent and legally compliant approach to cases and the implementation of laws, policies and practices in line with the UN Convention on the Rights of the Child.

The Legal Services Unit monitors and reviews the area of legal cost and provides a legal training programme to staff nationally in various areas of law. The in-house office is the initial contact point for legal advice.

2017 Business Plan Priorities	2017 Achievements
E.13.1 Further recruitment of staff to meet increased legal service demand and to assist and contribute to meeting Tusla's 2017 priorities	E.13.1 A new solicitor was appointed in March 2017 and sanctioned to recruit a Knowledge Management Officer and a legal executive
E.13.2 Expansion of Dublin North East District Court legal project to provide legal services to Dublin Mid-Leinster	E.13.2 The North East District Court legal project expanded to provide legal services to Dublin Mid-Leinster
E.13.3 Utilise case and record management system (implemented in December 2016) to allow for greater review, analysis from both financial and quality perspective	E.13.3 Case and record management system used to analyse services from financial and quality perspective
E.13.4 Following 2016 legal tender provides greater oversight and co-ordination between member firms and the in-house Legal Services Unit	E.13.4 New contracts were entered into allowing for greater oversight and co-ordination between new member firms and the in-house Legal Services Unit
E.13.5 Establish an effective and efficient in-house knowledge management system to assist and support legal services	E.13.5 Approval was received to recruit a Knowledge Management Officer
E.13.6 Issue a revised and reduced fee protocol and continue to control the nominated of counsel to reduce legal spend	E.13.6 A revised and reduced fee protocol was issued and implemented in Q2 2017

E14: Data Protection

Tusla creates, collects and processes a large amount of data in multiple formats every day. Tusla has a responsibility to ensure that this data is obtained fairly, recorded correctly, used and shared both appropriately and legally, and stored securely.

2017 Business Plan Priorities	2017 Achievements
E.14.1 Compliance with existing Data Protection legislation	E.14.1 Data protection breaches were investigated and access requests were processed based on priority assigned by the Data Protection Officer (DPO). Amendments were made to breach notification forms and associated guidance. The Agency's Record Management and Retention Policy was finalised and approved

E.14.2 Preparation for new EU regulations in May 2018

E.14.2 A high level assessment and report of Data Protection compliance was completed and an interim Data Protection Officer appointed

E15: Communications

The Corporate Communications Section manages and ensures best practice in all communications' activities for the Agency, across all platforms and channels. Development of brand strategy, corporate identity, organisation engagement, corporate communications, stakeholder engagement and crisis management are key functions. Day to day the section provides strategic support and advice to the Chief Executive and SMT, manages media relations, internal communications, digital platforms and all proactive and reactive media engagement.

The Section works strategically with directorates and project teams to provide advice, and manage communications and public awareness campaigns and activities, ensuring there is a consistent approach to all communications.

2017 Business Plan Priorities	2017 Achievements
E.15.1 Recruit in line with agreed structure for the communications unit to enhance capacity	E.15.1 Recruitment commenced in line with agreed structure which ensured core team was in place by end of 2017
E.15.2 Communicate key outcomes of the Transformation Programme	E.15.2 Key achievements and outputs of Transformation Programme promoted and featured across several key platforms, including Tusla Hub. CP&W Strategy launched in May 2017
E.15.3 Strategic liaison with the Chief Executive and Chief Operations Officer to: <ul style="list-style-type: none"> • Further establish the Agency as a separate entity through targeted campaigns • Enhance proactive external communications 	E.15.3 Overarching communications framework in place
E.15.4 Proactive communication, including: <ul style="list-style-type: none"> • Communicate the Chief Executive's key messages on sharing power, and responsibility with children, parents and communities • Implementation of new legislation 	E.15.4 Proactive communication and key messages regarding Children First legislation and the new practice approach was delivered using numerous platforms and to a variety of stakeholders throughout 2017
E.15.5 Managing the Agency's press office which responds to over 500 media queries a year	E.15.5 New structures and systems were implemented to streamline and enhance activity in this area
E.15.6 Enhance public awareness (at a national and local level) of PPFS and how to access services	E.15.6 A plan was developed to promote PPFS projects in local, regional and national media. A live streaming and Twitter wall was used at national PPFS conference in Q3 2017
E.15.7 Development and awareness of a Tusla style guide, communications policy and a crisis communications plan	E.15.7 Interim communications plan devised and implemented including crisis communications plan agreed by SMT. Measures taken to deliver an interim internal engagement plan in Q4 2017 are ongoing
E.15.8 Enhance internal communications	E.15.8 The development of a newsletter commenced and multiple internal videos and newscasts were rolled out

E16: Health and Safety

The purpose of the Tusla National Health and Safety team is to develop, implement and monitor a safety management system to ensure compliance with health and safety legislation, best practice and to protect the health and welfare of staff, service users and the public.

2017 Business Plan Priorities	2017 Achievements
E.16.1 Development of national health and safety organisational structure and model	E.16.1 The development of the health and safety structure commenced in 2017 and will continue over the next two years. Six health and safety advisory posts were approved in 2017
E.16.2 Develop and commence implementation of a national health and safety management system	E.16.2 The process to establish a formal health and safety management system commenced in 2017 and a national health and safety programme plan was established

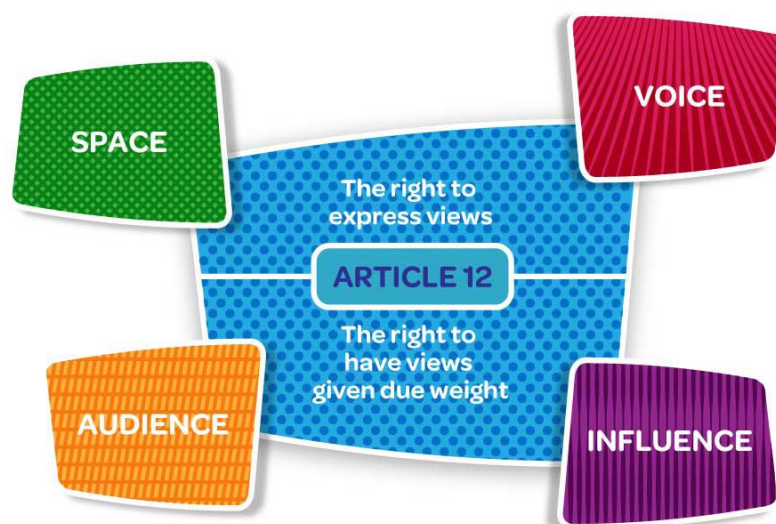
4.0 Listening to Our Service Users

Listening to the perspectives of people who use our services makes our services more child centred, responsive and effective. Tusla actively seeks out the views of the children and families we provide services to, including people who are reluctant or resistant to receive our services.

4.1 Participation

‘Participation’ means the involvement of children and young people in decision making on issues that affect their lives. A child or young person’s right to have their views heard in the decision-making process is enshrined in Article 12(1) of the United Nations Convention on the Rights of the Child (UN, 1989), ratified by Ireland in 1992. Tusla is committed to embedding this at the core of our work. In 2017 Tusla provided seed funding under the prevention partnership and family support programme to 41 new or developing programmes throughout the country that are engaging in participatory practice and who are adhering to the Lundy Model of Participation outlined in Figure 4.

A list of these programmes is available at www.tusla.ie.



This model provides a way of conceptualising Article 12 of the UNCRC which is intended to focus decision-makers on the distinct, albeit interrelated, elements of the provision. The four elements have a rational chronological order:

- **SPACE:** Children must be given safe, inclusive opportunities to form and express their view
- **VOICE:** Children must be facilitated to express their view
- **AUDIENCE:** The view must be listened to.
- **INFLUENCE:** The view must be acted upon, as appropriate.

Figure 4: Lundy Model

In 2017 Tusla, in partnership with Empowering People in Care (EPIC), had 15 fora for young people in foster care operating. In October 2017 a national fora event took place to provide a space for young people to present their messages to Tusla in relation to policy and practice. Young people presented to the SMT, guidance documents, posters, DVD for fostering, information leaflets and a dictionary, for consideration for national use. A national consultation process was agreed in 2017 to bring all their material to the National Oversight Committee in 2018 to make them available to all young people in care. New fora continue to be established.

Parental Participation

Parental participation, first and foremost, is about helping parents to be involved in their own child's care and education. It is also about facilitating parents' (and others who have a caring role) engagement in the planning, delivery and evaluation of services in their communities. The aim of parental participation within Tusla is about empowering parents and practitioners to work in partnership towards improved family wellbeing and better children's outcomes. This can happen through positive relationships and the participation in, and the delivery of, supports and services that are effective, friendly and accessible. A grant to support parental participation projects was launched in 2016 with an initial total budget of €340,000. In 2017 there were 28 projects being funded in all 17 Tusla areas (a report is available on www.tusla.ie).

There are a number of tools and resources that have been developed by Tusla and their partners to support parental participation and these include a toolkit for Parental Participation, the Parenting24seven website and a Parenting24seven general messages resource pack and booklet. The annual National Parenting Conference also includes parents as participants and presenters which enables parents' views to be heard. The Parenting Support Champions project which includes over 100 champions around the country has a remit to support parental participation at local level.

4.2 Development of a National Children's Charter

On 28 June 2017, Tusla launched the National Children and Young People's Charters. Tusla worked with a group of children and young people to develop charters that reflect the views and preferences of children and young people. Every statement by these children and young people (approximately 250) was analysed. The analysis identified 14 key themes, outlined in the table 4.1.

The Children and Young People's Charters aim to:

- Give children, young people and their families greater clarity about the quality of services they can expect from all Tusla staff members, how Tusla staff will interact with them to find solutions, and the principles that underpin this work
- Provide all staff with a clear guide and reminder of what is important to children and young people with whom we work
- The charters follow the development of Tusla's 'Toward the Development of a Participation Strategy for Children and Young People: National Guidance and Local Implementation' which identified the development of a Children's Charter as a priority action

Themes	Number of Young People's Comments	Rank Order
Respect	56	1
Information	40	2
Listening	40	2
Relationship Building	35	3
Positive Attitude	34	4
Child Friendly Process/ Environment	33	5
Family	26	6
Practical Help	23	7
Safety	19	8
Realistic/Honest	19	8
Confidentiality and Privacy	16	9
Suitability of staff	16	9
Broad Supports/ Other Services	14	10
Examining Alternatives	9	11

Table 4.1: Themes from the consultation with young people

The follow up consultation on the draft national Children's Charter was undertaken in January 2017 with each of the groups. Children and young people were broadly happy with the draft charter but considered it too 'wordy', too long and reported that two versions were needed – one for younger children, one for older children. They also provided ideas about the design of the charter and how it should be made available, for example: online, posters, audio version, braille version and in different languages.

Two charters were subsequently developed: A National Children's Charter and A National Young People's Charter.

A formal presentation of the charter was made to Mr Fred McBride, CEO of Tusla, at the children and young people participation conference in April 2017.

The charters and associated materials are available to download from the Tusla website.

Poster versions of the charter were circulated to all Tusla offices and services. A pack for Tusla staff was developed which contains a brief document setting out the process used in the development of the charter and its purpose, leaflets about the charter, copies of the charters, and a checklist for staff for implementing the children and young people's charters.



NATIONAL CHILDREN'S CHARTER

This Charter says how all children will be treated by all Tusla staff.
These are the key messages from children who took part in writing this Charter.



Tusla workers will:

- Be suitable for their job.
- Understand children and their situation.
- Respect children's privacy and confidentiality as far as possible.
- Respect children and put their best interests first.
- Build positive, caring and trusting relationships with children.
- Get children other services when needed.
- Listen to and involve children in plans and decisions.
- Meet children where they are comfortable and have privacy.
- Be realistic and honest about what Tusla can do.
- Give clear information about who they are, what they do, what will happen and when things will happen.
- Help families to care for children.

TUSLA
An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

The
ATLANTIC
Philanthropies

4.3 Service User Experience

Complaints and Feedback

The total number of complaints recorded on the Tusla databases for 2017 in relation to Tusla services was 615.

Table 4.2 is an analysis of complaints received by Tusla and recorded on the NIMS system outlining the trends in relation to the complaints received.

Issue	2016	2017
Lack of response/no response to communications/poor communication	28.9%	18.93%
Insufficient service	25.7%	22.72%
Behaviour - staff attitude	10.9%	13.63%
Breach of procedure/policy/standards	9.5%	4.04%
Unfair treatment	9.5%	5.30%
Tusla assessments and reports	5.2%	0.0%
Lack of consultation with service user	5.0%	3.78%
Delayed response/decision	4.5%	4.54%
Discrimination	1.4%	0.0%
Poor record keeping	0.5%	0.75%
Poor condition of building	0.2%	0.0%
Negligence	0.5%	3.03%
Delivery of information	2.5%	5.30%
Uncategorised	NA	17.98%

Table 4.2: Comparative analysis of complaints recorded on NIMS 2016 and 2017

Tusla with the SCA has developed a Tusla specific complaints module on the NIMS system which is regularly reviewed by both agencies.

Funded agencies are obliged to provide Tusla with complaints data under Section 70(2) of the Child and Family Agency Act 2013. Tusla has not yet developed a systemic way of gathering this information. A portal will come in to operation to facilitate information (including complaints data) being shared with Tusla in 2019.

Data received from those agencies who have complied indicate a low level of complaints.

Ombudsman Report - Taking Stock

Taking Stock, launched in July 2017, is an investigation by the Ombudsman into complaint handling and issues identified in complaints made about Tusla.

Tusla has accepted the recommendations of this report and has commenced the process for implementing the recommendations that relate to complaint management.

The Agency commenced the roll-out of further training in the Tusla complaints module of

NIMS in December 2017 and has agreed to a joint evaluation of the system with the SCA in Q1 2019.

The training programme and guidance for complaints officers is near completion and will be rolled out commencing Q1 2018.

Briefings on ‘Tell Us’ were delivered to 1,004 staff during 2017.

Feedback

Tusla does not systematically record positive feedback. However, some areas have started to record positive feedback. In one area, where this happens systematically, the number of compliments (97) exceeded the complaints (50). Samples of positive feedback included:

Young person *Thanked the Social Care Leader for the work since June... feels that she is in a better place. Very appreciative of same.*

Parent *“She is an excellent Social Worker and is very fair...she has been able to improve the lives of the children.”*

Parent *She (Social Worker) was “pleasant”, really listened and “clearly had the child’s best interests at heart.”*

Foster carer *“We are lucky to have the brilliant support of Link Worker to help us manage and care for foster son.”*

Positive feedback is also received from other sources such as guardians ad litem, the Office of the Ombudsman, other professionals and judges.

Parliamentary questions and representations

Table 4.3 outlines the number of parliamentary questions and representations received per quarter.

	Parliamentary Questions	Representations	Total
2017 Q1	129	60	189
2017 Q2	142	65	207
2017 Q3	48	87	135
2017 Q4	128	112	240
2017 Total	447	324	771

Table 4.3: Number of parliamentary questions and representations received

Freedom of Information (FOI) Requests

Table 4.4 captures activity in terms of numbers of requests received. Current methods of gathering activity data do not, however, capture the complexity of issues to be examined during request processing, or indeed record volumes associated with individual requests. In one area within the Midlands where details are gathered in terms of records processed for requests, it is noted that the processing of 70 requests involved an examination of 41,212 records. It is likely, because of the nature of the records we hold, that similar outcomes have been encountered in all areas handling access requests for client records.

Tusla Area	No. of Requests Received
Corporate	116
Early Years	10
Residential Services	3
National Adoption Services	4
West	185
Dublin North East	225
Dublin Mid-Leinster	173
South	296
Total	1,012

Table 4.4: Number of FOI requests received

5.0 Strengthening Quality and Risk Systems

In the Corporate Plan 2015-2017 it was stated that Tusla would adopt “... a strategic approach to quality assurance, information management and risk management that supports continuous improvement and good governance.” In 2017 Tusla made progress in developing these systems, as follows:

Risk and Incident Systems

In supporting strengthened governance within the Agency, the Organisational Risk Management Policy provides a clear process regarding risk management across the Agency. The Incident Management Policy supports the Agency to identify the nature, extent and types of incidents that occur. These two processes ensure that the Agency undertakes its activities in the knowledge that appropriate and adequate measures are in place to maximise the opportunities and learning and minimise the negative effects of risk and incidents on the achievement of the organisation’s objectives.

Key Activity 2017

- Launch of the Organisational Risk Management Policy
- Launch of the Agency’s Incident Management Policy and associated guidance
- Briefings for both policies rolled out across all Tusla services
- Training of staff for NIMS entry and report generation rolled out across the Agency
- Tusla specific incident entry screens and National Incident Report forms developed
- Development of Risk Management Liaison Group
- Development of Corporate Risk Register Working Group
- Development of Child Deaths Learning Group
- Continued development of child death notification management system
- Initial exploratory consultation with Social Care Institute of Excellence in the UK
- Escalation procedure developed for non-responses to information requests completed

Quality Reviews and Service Monitoring

Tusla has established a team that proactively reviews the quality of all services and provides a critical internal assurance function to the Tusla SMT and Board. Tusla has further developed this team through the recruitment of additional posts in 2017. This team proactively reviews the quality of all services which involves conducting quality reviews, audits, and verification visits. This process supports continuous quality improvement, the identification of risk, and provides an independent mechanism for the evaluation of services outside of operational management. Monthly and quarterly reports on the findings from audits and reviews conducted are provided for the Tusla Board. Urgent risks requiring action are brought to the attention of Service Managers for response and escalated where appropriate. This process supports continuous quality improvement, the identification of risk, and provides an independent mechanism for the evaluation of services outside of operational management. Working closely with Service Managers, the Quality Assurance and Monitoring team uses an intelligence-led approach, including response to HIQA reports, to target its activity, focusing on service improvement and action planning in accordance with the Agency’s QIF.

Health and Safety Management System

Tusla commenced the establishment of a National Health and Safety Department in 2017. This Department will be further resourced and developed throughout 2018. At the latter end of 2017, the National Health and Safety Department transitioned from the Quality Assurance Directorate into the Office of the CEO (Corporate Services). Tusla is in the process of designing a formal health and safety management system agency-wide. This new Department will provide an advisory function across Tusla. The development and implementation of this management system is also aimed at strengthening the health and safety management practices and promoting a positive health and safety culture across the organisation.

Quality Improvement Framework (QIF)

The Agency's QIF was introduced in 2017 to promote an ongoing process of self-assessment and to develop a culture of continuous quality improvement. The framework is being introduced incrementally over a three year period to provide a language to talk about quality and to identify what delivering services to high quality standards means in practice. The Quality Assurance and Monitoring team will, as part of their engagement with services, undertake verification audits of the implementation of the framework and development of annual quality improvement plans, arising from the cycle of self-assessment being introduced.

Performance Reporting and Information

Measuring performance through routine collection of metrics and interrogation of data has become an established practice at corporate and operational level. This means better availability of data to demonstrate where targets are being met, to plan service delivery and to support decision-making right across the Agency. Performance information is disseminated at all levels internally, submitted externally to other statutory bodies, and published on the Tusla website. 2018 will see further development of the systems and processes in place for performance reporting.

Protected Disclosures

2017 was the first full year that people working at Tusla had the Tusla 'Guide for Whistleblowing on Alleged Wrongdoing'. This useful guide continues to be embedded following its launch in 2016, and a number of disclosures were received and processed under the policy and procedure. Tusla continues to work towards procedures that are transparent, openly available, and encourage people to come forward with any concerns they may have. Two disclosures we received in 2017 met the criteria for a Protected Disclosure under the law, following preliminary evaluation. At the time of writing, one matter remains under an open investigation, while another matter has concluded, with governance improvements introduced.

Service Experience and Consumer Affairs

In 2016 Tusla launched its own complaints and feedback policy and procedure 'Tell Us'. The information gathered gives Tusla information on how service users and their representatives view the Agency. This information is communicated through the integrated risk and assurance report and used to identify emerging risks and trends that are used to inform service improvement.

6.0 Tusla Board, Executive and Corporate Governance

This section provides details of Tusla's Board and SMT in 2017. It also provides an overview of Tusla's compliance with the Code of Practice for the Governance of State Bodies 2016.

6.1 Tusla Board

The Board is responsible for ensuring that effective systems of internal control are instituted and implemented within the Agency including financial, operational and compliance controls and risk management. These systems of internal control are reviewed annually by the Board.

Where risks are identified that have a significant potential to impact on the overall objectives of Tusla they are recorded on the Agency's Corporate Risk Register. The Register is a mechanism to provide assurance and evidence to the Board that risk is being identified, assessed and managed and that a range of control measures and action plans are in place to mitigate the risks identified.

The Board is also responsible for establishing the Agency's overall strategic direction, ensuring that it operates within the limits of its statutory authority and sets corporate targets recommended by the CEO. The work and responsibilities of the Board are set out in the Standing Orders, Delegations of Authority and matters specifically reserved for Board decision.

The Agency's Board consists of a Chairperson, a Deputy Chairperson and seven ordinary members appointed by the Minister. The Chairperson and Deputy Chairperson were appointed for a period of five years. Members who were appointed by the Minister to be ordinary members of the Board hold office for either three, four or five years.

The CEO is accountable to the Board for the proper management of the Agency. The Board has delegated the performance of functions of the Agency to the CEO with the exception of functions reserved by the Board itself.

The Board has a formal schedule of matters specifically reserved for its decision and includes the approval of:

- Annual budgets and corporate plans
- Annual reports and financial statements
- Contracts and capital projects of a specific value
- All acquisitions and disposals of assets

6.2 Board Membership

Board member	Role	Appointment Period
Ms Norah Gibbons	Chairperson	1 Jan 2014 – 31 Dec 2018
Ms Gary Joyce	Deputy Chairperson Chairperson of the ORDS Committee	1 Jan 2014 – 31 Dec 2018
Mr PJ Fitzpatrick	Ordinary Member Chairperson of Governance Committee	1 Jan 2014 – 31 Dec 2017

Mr Rory O’Ferrall	Ordinary Member Chairperson of Audit Committee	1 Jan 2014 – 31 Dec 2019
Mr Tony Rodgers	Ordinary Member Chairperson of Quality Assurance & Risk Committee	1 Jan 2017 – 15 Dec 2017
Mr Paul White	Ordinary Member Pro-tem Chair of the Quality Assurance and Risk Committee July 2017	3 Feb 2016 – 2 Feb 2021

6.3 Changes to the Board in 2017

The Board would like to thank Mr PJ Fitzpatrick and Mr Tony Rodgers, outgoing Board members in 2017, for their dedication and valued contribution to the work of the Board of the Agency.

6.4 Board Sub-Committees

The Agency Board has established four committees with specific responsibilities to support the activities of the Board in governing the Agency.

The Code of Practice for the Governance of State Bodies 2016 recommends that some State Bodies have a combined Audit and Risk Committee. Due to the large scale of the Agency, the nature of the services provided and the need to focus on practice/operational risk as well as financial risk, the Agency has decided that it is more effective to have two separate committees. Both committees convene a joint meeting at least once a year.

The four committees are:

1. **Quality Assurance and Risk Committee:** comprises three Board members and one independent member. The Committee reports in relation to the design and operation of the risk management system and focuses principally on quality assurance and service delivery
2. **Audit Committee:** comprises three Board members and one independent member. The role of the Audit Committee is to report on the effectiveness of internal financial controls and on the progress made in implementing recommendations from internal audit and external audit and on other financial related matters
3. **Organisational Development, Remuneration and Succession Committee:** comprises three Board members and focuses principally on assisting the Board in fulfilling its duties by providing an independent and objective review to ensure the Agency’s adherence to Government policy in relation to pay and reward, succession planning for CEO and support the CEO with senior management succession planning
4. **Governance Committee:** comprises two Board members. The Governance Committee’s primary focus is to ensure the Board of the Agency complies with all legal and statutory requirements

6.5 Board and Committee membership and attendance in 2017

	Board	Audit Committee	Quality Assurance and Risk Committee	Organisational Development, Remuneration and Succession Committee	Governance Committee
	(12 Meetings)	(6 Meetings)	(3 Meetings)	(3 Meetings)	(4 Meetings)
Norah Gibbons Chair	12		2	3	3
Gary Joyce Deputy Chair Chair of the ODRS Committee	11			3	
PJ Fitzpatrick Chair of Governance Committee	10				3
Rory O'Ferrall Chair of Audit Committee	12	6			
Paul White Pro-tem Chair of Quality Assurance & Risk Committee	11	1	2		4
Aine Hyland	11		3		
Deirdre Kiely	11	5			
Pat McLoughlin	12			3	
Tony Rodgers Chair of the Quality Assurance & Risk Committee up to July 2017	5	3	1		
Bernadette Costello Independent Member Quality Assurance & Risk Committee			3		
Richard George Independent Member Audit Committee		6			

6.6 Tusla Executive

The Chief Executive, together with the SMT, manages the implementation of strategy in line with the Agency's statutory responsibilities and Corporate Plan.

Senior Management Team 2017

Fred McBride, Chief Executive Officer

Jim Gibson, Chief Operations Officer

Colette Walsh, Director of Human Resources

Brian Lee, Director of Quality Assurance

Pat Smyth, Director of Finance

Cormac Quinlan, Director of Policy and Strategy

Pamela Benson, Head of Legal

Fergus Ó Cuanacháin, Director of ICT

6.7 Corporate Governance

Tusla is committed to a high standard of governance by ensuring compliance with all statutory requirements and relevant codes of practice. The Agency's establishment legislation, the Child and Family Agency Act 2013 (the Act), outlines the purpose, functions, regulations, procedures and powers of the Agency.

The 2016 Code of Practice for the Governance of State Bodies 2016 came into effect on 1 September 2016. The Code sets out standards of good practice in relation to Board leadership and effectiveness, remuneration, accountability and takes account of governance developments, public sector reform and stakeholder consultations.

In accordance with the Child and Family Agency Act 2013 the Board is required each year to prepare and adopt an annual report in relation to the performance of the Agency's functions and approve the Annual Financial Statements. The Board considers the 2017 Financial Statements to properly present the state of the Child and Family Agency's affairs at 31st December 2017 and its income and expenditure for 2017, and that they have been properly prepared in accordance with the account standards specified by the Minister for Children and Youth Affairs as set out in the basis of preparation section of the accounting policies.

The 2017 Annual Financial Statements and 2017 Annual Report have been drafted in compliance with the 2016 Code of Practice for the Governance of State Bodies.

The 2017 Annual Report is the fourth annual report published by the Agency and the third published under the Corporate Plan 2015-2017.

The Agency monitors Tusla's compliance with the legal and governance obligations as set out in the Child and Family Agency Act 2013 and the 2016 Code of Practice for the Governance of State Bodies with the assistance of compliance checklists, biannual governance meetings with the DCYA and the Board's Governance Committee. The Agency is compliant with all aspects of the Child and Family Agency Act 2013 and has put in place appropriate measures to implement the 2016 Code of Practice for the Governance of State Bodies.

6.8 Tusla's Code of Governance

The Agency is required under Section 50 of the Child and Family Agency Act 2013 to prepare and submit a Code of Governance to the Minister for approval. The Agency's Code of Governance was updated in 2017 in order to comply with the 2016 Code of Practice for the Governance of State Bodies. Tusla's Code of Governance acts as a benchmark for the Board and is reviewed by the Board's Governance Committee on an annual basis. Any revisions of the Code are submitted to the Minister for approval.

Checklists are used to assist in the process of reviewing and assessing the Agency's compliance with the Code of Governance and the Code of Practice for the Governance of State Bodies. The compliance checklists, upon completion, are submitted to the Governance Committee of the Board and then submitted to the DCYA. In 2018 the Agency will commence a series of briefing sessions for staff on Tusla's Code of Governance and the Code of Practice for the Governance of State Bodies.

6.9 Board Effectiveness

The Board's effectiveness is reviewed annually. At the end 2017 the Board agreed to undertake an external review of the Board and its committees. The Review is scheduled to be completed in 2 Quarter of 2018.

7.0 Human Resources

The following section provides an overview of Tusla's workforce during 2017.

7.1 Workforce Breakdown

At year end there were 3,696 whole time equivalent employees (WTE) working in Tusla. The total headcount at the end of 2017 was 4,129. Table 7.1 provides an overview of the workforce in terms of staffing category and WTE.

Staff by Grade	Total 2017
Social Work	1465.98
Social Care	1127.15
Admin and Management	715.45
Family Support	155.45
Other Staff Grades	143.29
Educational Welfare	89.00
Overall Total	3696

Table 7.1: Employment by WTE and grade group

7.2 Absenteeism

In 2017, the level of absenteeism showed a slight increase from 2016. This is being addressed through enhanced monitoring and governance in the area and a continued focus on employee health and wellbeing and the Employee Assistance Programme. Absenteeism refers to unscheduled employee absences other than annual leave, public holidays, maternity leave and jury duty. Table 7.2 outlines levels of absenteeism in the Agency by service group.

Absenteeism by Grouping	Dec-16	Dec-17
Residential Services	9.26%	11.04%
Corporate & National Services	2.70%	4.18%
Dublin Mid-Leinster	5.29%	4.99%
Dublin North East	4.20%	4.25%
South	4.38%	5.39%
West	5.30%	5.37%
Total Absenteeism Rate	5.50%	6.10%

Table 7.2: Absenteeism by Grouping, Dec 2016 – Dec 2017

7.3 Employment Monitoring Group (EMG)

During 2017 the Employment Monitoring Group (EMG) was devolved to the regions and oversight of the process is now conducted through regional HR in conjunction with Regional Finance and the Service Director. It continued to operate within the Agency's employment control framework and approval processes.

The EMG has the following responsibilities for employment monitoring in Tusla:

- Validation of requests against approved position
- Monitoring of new service development requests
- Monitoring of re-grading of approved positions
- Oversight of the manner by which the contract is to be filled, i.e. permanent/fixed term
- Oversight of temporary appointments to a higher position.

7.4 Employee Relations

The HR policy framework, which transferred from the HSE has, in the main, been updated to reflect the Agency agreed policies and processes. Work commenced on the development of an IR strategy and a consultation and engagement model for staff partners.

Throughout 2017 there continued to be positive engagement with staff representative bodies. The National Joint Council continues to meet every two months as a forum for discussion on relevant staff and management issues.

The MOU agreed between Tusla and the HSE on the establishment of the Agency continued to operate throughout 2017, thus assisting in ongoing ER matters at a regional level.

7.5 Workforce Learning and Development (WLD)

WLD had responsibility for all learning and development activities within Tusla throughout 2017. A full programme of learning and development activities, identified through training needs analysis of staff and organisational priorities was provided throughout 2017. Over 700 standardised training courses of varying durations were provided nationally during 2017, with almost 12,000 individual attendances.

WLD continued to work with Service Managers throughout 2017 in supporting the implementation of Tusla's National Strategy for Continuing Professional Development. Personal development planning was mandated for all Tusla staff from January 2017 and WLD provided workshops and other supports to managers initiating PDP with their teams. These PDPs provided data for service area training needs analyses. Plans progressed in 2017 for a comprehensive agency-wide training needs analysis cycle to commence in January 2018.

During 2017 WLD led the development and deployment of a number of online training modules to support Tusla staff and other stakeholders in the implementation of the Children First Act 2015 and Children First Guidance 2017. To support this within Tusla WLD coordinated the successful registration and engagement of Tusla staff as users of the iLearn@Tusla learning management system. By the end of December 2017, more than 4,000 staff had registered as learners with iLearn@Tusla and over 3,000 had completed the introduction to Children First online training module.

Learning and Development (L&D) interventions to support key Tusla strategies were provided by WLD in 2017. WLD continued to focus on the consolidation and sustainability of L&D to support the PPFS programme. New staffing resources, systems and interventions were developed and implemented under WLD oversight to support the CP&W Strategy and the implementation of a national approach to practice. 736 staff attended introductory two-day workshops on the Signs of Safety Model, with 267 staff attending the five-day training during 2017. WLD also oversaw a number of initiatives in 2017 within the Tusla HR strategy: developing an in-house leadership programme; liaison with third level institutions on student placements and education; a grade III/IV development programme; staff induction; staff ICT skills; first time management, and development of a people management legal

framework for the Agency.

7.6 Employee Health and Wellbeing

Employee Wellbeing and Welfare provides the necessary systems and processes to enable staff to reach and maintain their full potential to deliver a quality service. Tusla continued to work with the HSE under the agreed MOU throughout 2017 and 2018. Tusla took part in a Critical Incident Stress Management (CISM) Work Positive review in the later stages of 2015 and introduced work positive supporting employee engagement and wellbeing in 2017.

The remit of the department has expanded over the course of 2017 and now includes:

- Health promotion
- CISM provision
- Counselling and employee assistance services
- Staff retention
- Staff engagement
- Staff rehabilitation
- Occupational health provision
- Policy formation
- Statistics
- The department supports the Director of Human Resources in coordination and the strategic development of the Health, Wellbeing and Employee Assistance Programme Office

A new staff resilience training programme was commenced in November 2017. In October 2017 the Health and Wellbeing Department was awarded the bronze Active@Work Award, from the Irish Heart Foundation, for efforts in increasing physical activity in the workplace. This included coordinating the first Tusla five week Step Challenge from May to July 2017, which was a huge success.

The Tusla Hub was redesigned and also made accessible through the web to include a new section for Health, Wellbeing and EAP. The Hub and website now display a new suite of leaflets, posters and worksheets, covering a wide range of topics to support staff.

During 2017 work with the HSE continued in providing internal EAP assistance for staff and an internal Tusla counsellor was also appointed. In July 2017 the retention survey was launched online; a report was published in October detailing the results of this survey and listing recommendations.

We amended the following HR policies during the year, which were approved by the policy oversight committee:

- Long-term absence guidelines
- Critical incident protocol
- Critical incident prevention
- Prevention and management of stress in the workplace
- Terms and conditions of employment
- Dignity at work
- Managing attendance
- Serious Physical Assault Scheme and Temporary Rehabilitation Remuneration Protocol
- General Sick Leave Scheme

- Staff Handbook
- Rehabilitation

In terms of engagement, an online exit interview was prepared in Q4 of 2017 and is now ready for publishing online for staff.

7.7 Tusla Recruit

In supporting the HR strategy and Tusla's 2017 Business Plan recruitment and talent management, initiatives were set to meet the objectives. Tusla's Recruit plans for 2017 were set to:

- Increase capacity for Tusla Recruit – the team have increased in size and training is ongoing to have an effective team of recruiters in place to deliver on workforce requirements
- Improve on recruitment turnaround timelines – KPIs are set and turnaround times are measured and continually monitored to deliver continuous improvements
- Streamline the recruitment process – the end-to-end process has been mapped and reviewed to deliver efficiencies at each step
- Improve mechanisms to report on recruitment activity – reports have been developed to provide live updates to the service on recruitment activity

This has resulted in increased recruitment activity in 2017. It is reported that a total of 551 staff appointments were made in 2017. Of these 394 new starters and 148 internal promotions were processed. The new starters include 180 in social work posts. At year end Tusla Recruit had a further 190 posts formally offered and accepted to candidates, of which 69 are social workers. It is projected that these candidates will be cleared to commence in Q1 2018.

The Tusla Recruit team continued to work the recruitment plan throughout 2017 and created national, regional and bespoke recruitment panels for most grades. Panels will be supplemented in 2018 and further bespoke panels created for senior and specialised roles.

The Graduate Programme 2017/2018 commenced in September 2017 with two visits planned by Tusla Recruit team members to each third level college to meet social work graduates. Social workers employed by Tusla attended the first sessions in 2017 to give students an overview of their experience of working in Tusla. The second visits planned for 2018 will focus on employability and members of the recruitment team will offer students direct support and advice on the application and interview process. The programme spans from September 2017 to April 2018. The recruitment campaign will open in April 2018 with interviews scheduled for May and June 2018. It is anticipated that the Tusla Recruit team will meet up to 280 students during the programme.

7.8 Workforce Planning

It is recognised that Tusla is at point where a more strategic, long-term view of the workforce is required going forward. HR Management developed a Workforce Planning (WFP) team to implement workforce planning and processes and work commenced in Q4 2017. Three workforce planners were appointed in 2017 with a further three identified to join the team early in 2018. HR Management, with the support of the newly appointed team, commenced drafting a strategic workforce plan which will provide plans to align workforce capacity and capability with the business and corporate plans of the future. The WFP team will assist Services Managers in the regions to implement workforce planning processes and to improve

the position management process. This in turn will improve the recruitment process. Work has commenced on the collation of data to form a minimum data set to inform future workforce plans.

The project to develop a three year strategic workforce plan has commenced and the timelines are set out to provide strategic direction and an action plan to implement processes. The draft plan will be prepared by end Q2 2018.

In 2017 HR Management continued to represent Tusla on the Department of Health Cross-Sectoral National Strategic Workforce Group which includes officials from the Departments of Education and Skills, Public Expenditure and Reform, Children and Youth Affairs, Justice and Equality, Business, Enterprise and Innovation as well as representatives of the HSE, the Higher Education Sector and agencies under the aegis of the Department of Health. The group was convened to develop a strategic framework for health and social care workforce planning for Ireland that will support the recruitment and retention of the right mix of health workers across the health system to meet planned and projected service need. The framework was approved by the Minister for Health at the end of October. Tusla will continue to work with the cross-sectoral group on the implementation plan for the framework in 2018.

7.9 Tusla Central Vetting Bureau

The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 commenced on 29 April 2016, introducing a legislative basis for the vetting and provision for the establishment of procedures that will apply in respect of persons who wish to undertake certain work or activities relating to children or vulnerable persons. In response to the enactment of this legislation, Tusla Central Vetting Bureau (TCVB) was established and commenced the e-vetting service for Tusla on Monday 13 February 2017. Prior to this date all applications were processed through the HSE's HBS.

Since the implementation of the e-vetting service, TCVB in 2017 has processed in excess of 9,900 applications providing vetting services for its personnel and those availing of Tusla's services.

Vetting for relevant existing employees and repeat vetting was introduced on a phased basis to comply with the statutory requirements and provide further safeguards for the children and families served by Tusla.

Garda vetting is conducted on behalf of registered organisations by An Garda Síochána NVB. Tusla currently employs four dedicated liaison persons supported by four clerical administrative staff who work closely with An Garda Síochána NVB to provide the e-vetting service. The e-vetting service has resulted in many increased safeguards and efficiencies when compared to the previous paper based application process, such as:

- **Speed:** Quicker turnaround times for organisations and vetting subjects. e-vetting removes days from the system lost to postage and data entry
- **Accuracy:** The accuracy of data in the system is significantly improved as interpretation of handwritten applications is removed from the system. The wizard format of the application will ensure that all necessary fields will be completed promoting efficiencies within the system
- **Automated Validation:** Automated validation is built into the application. This further ensures that applications are completed fully and accurately
- **Metrics:** A suite of metrics is available to provide statistics on applications processed and the status of any application in the process in known from the e-vetting system allowing for prompt actions

The team will continue to work on the delivery of an e-vetting service to the Agency in 2018 and deliver on continuous improvement initiatives set down including the implementation of improved technology to support and streamline the process.

8.0 Financial Summary

Tusla spends public funds on the provision of services to children and families. The duties relating to expenditure incurred by the Agency are stringent in terms of accountability and transparency in order to fulfil the Agency's responsibility for funding received from the DCYA. These duties are set out in the Child and Family Agency Act 2013 and in the Public Financial Procedures of the Department of Public Expenditure and Reform.

In accordance with Section 51 of the Child and Family Act 2013, the Agency has prepared Annual Financial Statements for 2017 and these have been audited by the C&AG.

The AFS contain the following reports:

- Governance Statement and Board Members' Report for 2017
- Statement on Internal Control
- Report of the Comptroller and Auditor General
- Financial Statements for 2017
- Accounting policies
- Notes and appendices to the financial statements

As required by the Department of Finance, The Revised Code of Practice for the Governance of State Bodies, under the aegis of the DCYA, and Section 13 (2) (d) of the Child and Family Agency Act 2013, the Chairperson of the Agency made a statement to demonstrate the Agency's arrangements for implementing a system of governance and financial control that includes the following:

- A. The guiding principles applicable to the Agency as a public body having regard to its functions as defined in Section 8 of the Child and Family Agency Act 2013
- B. The structure of the Agency, including the roles and responsibilities of the Board and CEO
- C. The processes and guidelines to be followed to ensure compliance with the reporting requirements imposed on Tusla by or under the Act
- D. The Agency's internal controls, including its procedures relating to internal audits, risk management, public procurement and financial reporting
- E. The nature and quality of service that persons being provided with or seeking services provided by the Agency can expect

This statement on internal control sets out how these duties have been carried out and includes an assessment of the corporate governance and risk management systems in place within the Agency that have ensured these responsibilities have been met.

The AFS and financial position is summarised in tables 8.1 and 8.2 respectively. The full AFS is published as a separate document.

	2017	2016
	€	€
	'000	'000
Revenue Income	704,217	665,707
Expenditure - Pay and Pensions	259,043	239,081
Expenditure - Non-Pay	444,510	426,000
Net Operating Surplus / (Deficit) for the Year	664	626

Table 8.1: Statement of revenue income and expenditure for the year ended 31st December 2017

	2017	2016
	€	€
	'000	'000
Total Non-Current Assets	73,215	66,452
Total Current Assets	18,376	13,586
Total Current Liabilities	-53,801	-49,402
Restricted Contributions (Deferred Income)	-694	-620
Capital and Reserves	37,096	30,016

Table 8.2: Statement of financial position as at 31st December 2017

Appendix I

Corporate Plan 2015-2017 Short Term Outputs

Outlined below is a complete list of short term outputs identified in the Corporate Plan 2015-2017.

Strategic Objectives and Short Term A

- A1. Implement an integrated information system covering referral, assessment and children in care (Strategic Objective 2).
- A2. Develop and maintain the CPNS to secure the safety of children at risk of harm (Strategic Objective 2).
- A3. Develop and implement national out-of-hours emergency service (Strategic Objective 1).
- A4. Implement Children First Policy internally and externally on a consistent basis (Strategic Objective 1).
- A5. Develop integrated reporting for Tusla, incorporating finance, HR and operational data suitable for management team, Board and the Minister (Strategic Objective 2).
- A6. Implement an integrated system to manage and learn from incidents and complaints (Strategic Objective 8).
- A7. Contribute to the reform of the Guardian ad litem system (Strategic Objective 1).

Strategic Objectives and Short Term B

- B1. Establish and maintain a standardised National Policy Catalogue (Strategic Objective 7).
- B2. Implement the Meitheal model to enable integrated service delivery through prevention, partnership and family support (Strategic Objective 1).
- B3. Operationalise Government policy and legislation and its integration into service delivery (Strategic Objective 7).
- B4. Develop a strategic approach to quality assurance that supports continuous improvement and positions Tusla as a self-evaluating organisation and meets its regulatory compliance requirements (Strategic Objective 8).
- B5. Generate evidence to support learning, continuous improvement, service design and decision making (Strategic Objective 8).
- B6. Develop the appropriate mechanisms to engage with children and key partners effectively (Strategic Objective 3).
- B7. Develop a capability to capture, share and disseminate research on national and international best practice (Strategic Objective 7).
- B8. Enhance our knowledge management systems and capability to support the development of our services and our people (Strategic Objective 7).
- B9. Develop metrics that demonstrate how Tusla is performing and to measure the impact it is having on children, families and communities (Strategic Objective 8).
- B10. Enhance participation and personalisation of children and families in policy formulation and review (Strategic Objective 3).

Strategic Objectives and Short Term C

- C1. Support parents through active interventions, cross-sectoral activities and an integrated service delivery model (Strategic Objective 1).
- C2. Develop the provision/commission of a psychology service (Strategic Objective 1).
- C3. Develop and expand ACTS (Strategic Objective 1).
- C4. Develop revised Alternative Care Strategy (Strategic Objective 1).
- C5. Develop and implement a Commissioning Strategy (Strategic Objective 1).
- C6. Develop a cohesive suite of services to support victims of sexual and domestic violence (Strategic Objective 1).
- C7. Ensure the full participation of Family Resource Centres in the Service Delivery Framework (Strategic Objective 1).
- C8. Develop and implement a Parenting Support Strategy to ensure accessible and friendly access to services (Strategic Objective 3).
- C9. Implement the Meitheal model to enable integrated service delivery through PPFS (Strategic Objective 1).
- C10. Develop the appropriate mechanisms to engage with children and key partners effectively (Strategic Objective 3).
- C11. Enhance participation and personalisation of children and families in policy formulation and review (Strategic Objective 3).
- C12. Introduce a registration and standards-based Early Years Inspectorate, supported by systems that are intelligence driven (Strategic Objective 8).

Strategic Objectives and Short Term D

- D1. Develop the statutory EWS in partnership with schools and parents and in the context of an evolving educational environment (Strategic Objective 1).
- D2. Firmly establish educational welfare interventions within the Service Delivery Framework. (Strategic Objective 1).
- D3. Support schools, parents and children effectively in relation to engagement in education whether school based or otherwise (Strategic Objective 1).
- D4. Introduce a registration and standards-based Early Years Inspectorate, supported by systems that are intelligence driven (Strategic Objective 8).
- D5. Support the effective participation and achievement in education of all children in care (Strategic Objective 1).

Strategic Objectives and Short Term Output E

- E1. Develop organisation structures and processes to support the achievement of Tusla's corporate objectives (Strategic objective 2).
- E2. Develop an ICT Strategy, including the utilisation of a Managed Service (Strategic objective 2).
- E3. Develop and implement a National Estates Strategy (Strategic objective 2).
- E4. Develop an evidence-based resource allocation model (Strategic objective 4).
- E5. Develop a Value-for-Money Strategy (Strategic objective 4).
- E6. Develop a systematic approach to managing risk within a defined risk appetite (Strategic objective 8).
- E7. Enhance financial and governance processes (Strategic objective 2).
- E8. Develop and implement a performance management system to align individual and Agency objectives to inform training and development requirements (Strategic objective 5).
- E9. Support, encourage and facilitate staff through structured professional and career development (Strategic objective 5).

- E10. Develop and embed a code of behaviours at all levels and within all of our policies, plans and procedures (Strategic objective 3).
- E11. Reform recruitment and retention policies to ensure that they are responsive to organisational needs (Strategic objective 5).
- E12. Establish an office of legal services to provide/procure good quality legal advice and support, which is cost effective, consistent and accessible (Strategic objective 2).
- E13. Develop an internal and external Communications Strategy (Strategic objective 6).
- E14. Embed a culture of effective communications throughout the organisation, supported by appropriate multimedia and other tools (Strategic objective 6).
- E15. Establish a protocol for the branding of estates and all Tusla-associated activities (Strategic objective 6).
- E16. Conduct regular stakeholder engagement surveys (Strategic objective 6).
- E17. Plan and support a number of key events throughout the year (Strategic objective 6).
- E18. Publish and promote key documents relating to Tusla-led activities (Strategic Objective 6).
- E19. Lead a proactive media campaign to assist information dissemination and crisis management (Strategic objective 6).
- E20. Develop the capacity to assess needs, plan services strategically, monitor and evaluate outputs and incomes (Strategic objective 2).
- E21. Design and deliver associated training as part of the overall recruitment and retention strategy (Strategic objective 3).
- E22. Design, develop and launch an annual staff survey in order to strengthen staff engagement and consultative networks (Strategic objective 3).
- E23. Develop PDP for social workers in order to foster greater self-regulation, accountability and professional leadership (Strategic objective 5).

Appendix II– Summary of Corporate Risks and Controls

Risk Statement	Controls
An ICT service and infrastructure that does not support the strategic objectives of the Agency or the management of its critical ICT risks	<ul style="list-style-type: none"> • National Director of ICT in place • ICT strategy developed • MOU in place with HSE • Additional resources for critical business projects • Recruitment and development of Tusla ICT team
A lack of a comprehensive safety management system and programme across the Agency	<ul style="list-style-type: none"> • Health and Safety review completed • Recruitment process for Health and Safety team commenced • System for tracking non-compliance with the Health and Safety Authority • Safety management system project plan under development • Site specific risk assessments conducted on a regular basis • National Health and Safety Steering Committee established
Insufficient capacity/resources to meet existing levels of service demand	<ul style="list-style-type: none"> • Children with immediate risk of harm are prioritised • Tusla Recruit established and recruitment plan developed • Recruitment of Agency staff on three year contracts • Regular performance monitoring at all levels • Additional budget allocation for staffing from DCYA • Policies, procedures and guidelines in place to support and guide practice • Unallocated cases project underway • Engagement with universities in Ireland and Northern Ireland re: new graduates underway • Service Improvement Plan underway to address retrospective cases of abuse
Capacity to meet statutory obligations and codes of practice for governance due to insufficient resources and systems (internally and via the MOU with the HSE) to support the necessary administrative processes	<ul style="list-style-type: none"> • Additional funding for 2017 provided • MOU with the HSE to provide some administrative supports • Training has been provided for FOI • Audit conducted on Data Protection Compliance • Service user feedback and complaints policy launched • New consumer affairs structure established in 2017
Capacity and capability issues due to additional demands being placed on the Agency as a result of recently introduced legislation in relation to Children First and aftercare	<ul style="list-style-type: none"> • Children First Project team established • Children First will be staggered to assist Agency preparation for full implementation • Aftercare Implementation Group established • Extra funding has been provided in 2017
The lack of access to psychological and psychiatric services due to a lack of a structured and effectively resourced service, provided both internally and via the MOU with the HSE	<ul style="list-style-type: none"> • ACTS specialised clinical service in place • Some psychology provision is sourced from private practitioners in cases of high need • Joint working group established with the HSE to develop working protocol • Capacity and needs analysis being conducted • MOU with the HSE

Risk Statement	Controls
There is a risk to the consistency and quality of service user experience due to inconsistent implementation and application of policies, procedures and protocols throughout the Agency	<ul style="list-style-type: none"> • Procedure in place for the development of policies • Policy and Procedure Catalogue in place • National Policy Oversight Committee operational • Quality assurance quality reviews and performance reports to identify risks and improvements • CP&W Programme initiated • PMO to support implementation
There is a risk of reputational damage to the Agency from ongoing adverse media attention	<ul style="list-style-type: none"> • Prompt and effective communication with all stakeholders • Continuous monitoring of threats to reputation
There is a risk to operational service delivery and meeting identified social work recruitment (as per the 2017 Business Plan) due to social work attrition rates and the limited number of available professionally qualified social workers	<ul style="list-style-type: none"> • Recruitment plan in place for social work vacancies • Social work panels formed in 2015 and 2016 are still in place • National Transfer Policy • Continued implementation of Tusla's CPD strategy
There is a risk to the operational delivery of services due to a lack of suitable and safe office space to accommodate the current and expected staffing levels for 2017 and beyond	<ul style="list-style-type: none"> • Some new accommodation requirements being explored • Estates restructured under new organisational reform
There is a risk of fraud and ineffective use of Tusla funding due to insufficient and robust financial governance, oversight arrangements and systems for funded services and foster care payments	<ul style="list-style-type: none"> • Contracts with external agencies are being established • Commissioning strategy developed • New governance systems developed for Section 56-59 organisations • Compliance statements sought from funded organisations • Tusla specific financial regulations under development • Procurement training for staff • Service Director for Commissioning in position