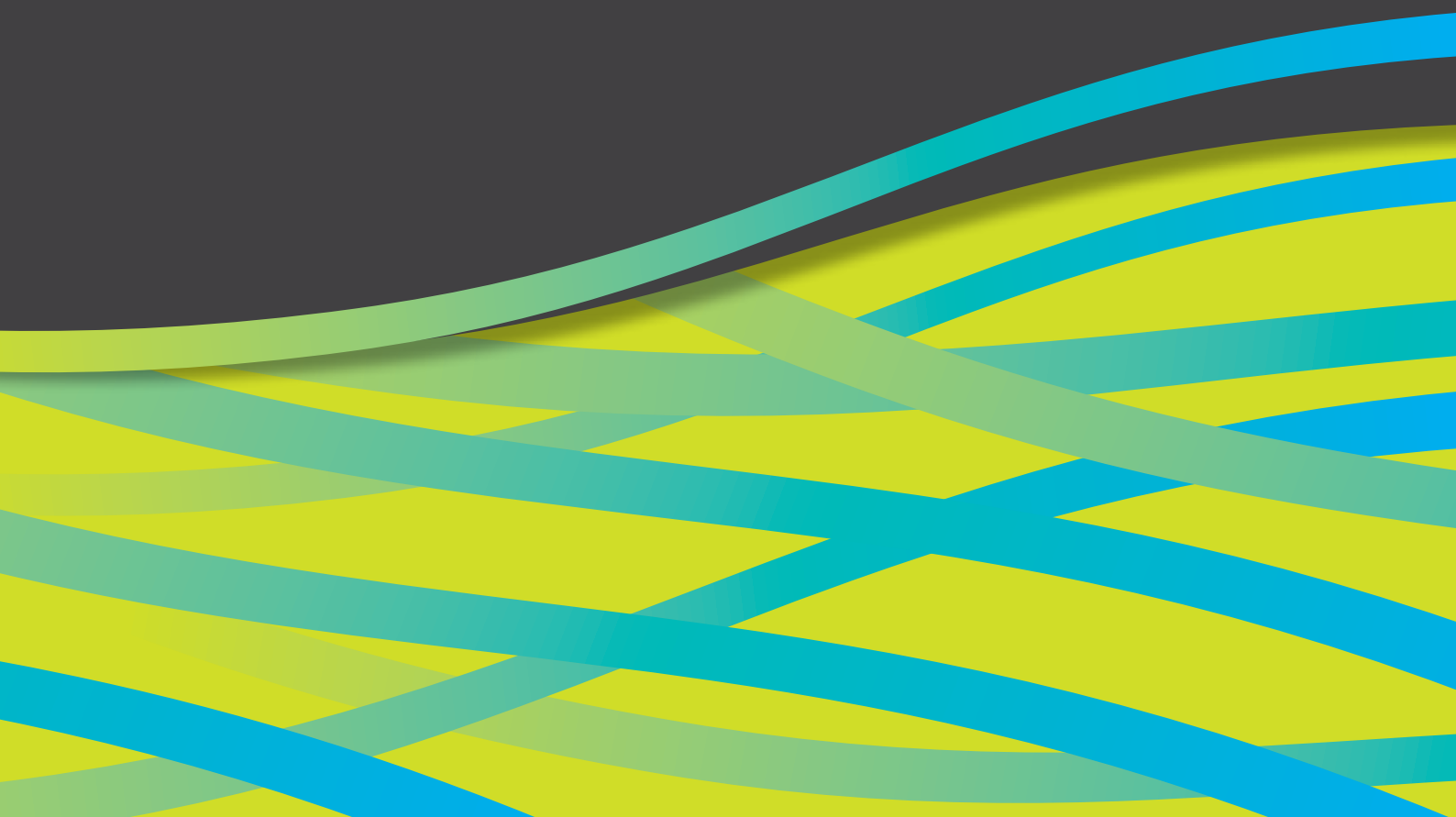




An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

Annual Report 2016



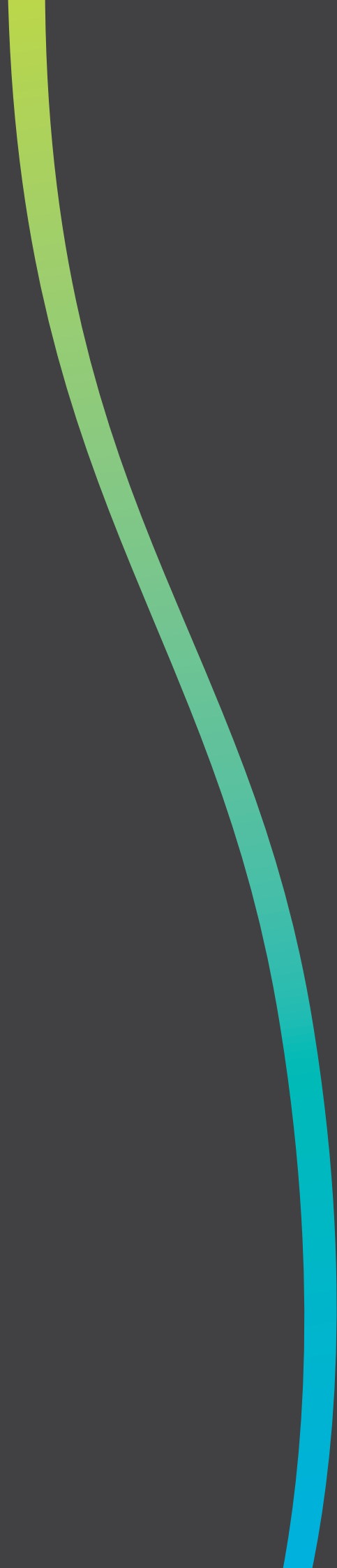


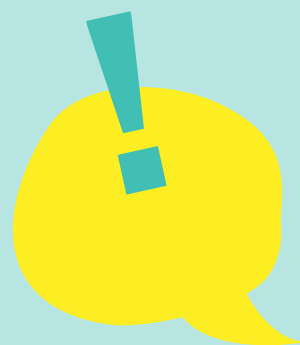
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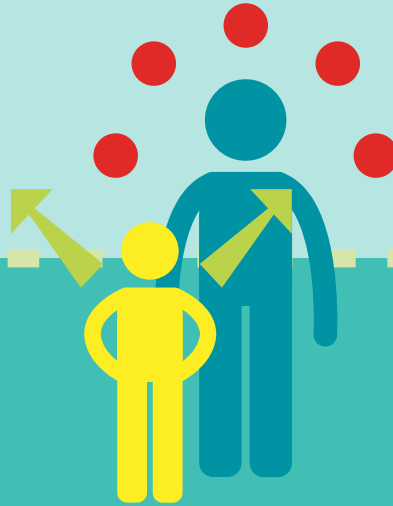
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Key Service Delivery Achievements in 2016



1,450 referrals to emergency out-of-hours social work services in 2016



Child Protection and Welfare Services

47,399 REFERRALS to Child Protection and welfare services in 2016 – an increase of 9% from 2015

38% (3,272) reduction in cases awaiting allocation to a named social worker since Agency established

25,034 number of cases open to social work (Dec 2016)

77% (2,734) reduction in high priority cases awaiting allocation to a named social worker since Agency was established

Alternative Care Services

1,880 young people in receipt of aftercare services (Dec 2016)

69%(211)

of unapproved relative foster carers (who had a child placed for 12 weeks) had a link worker (Dec 2016); up from 64% in 2015 and 57% in 2014

6,258 children in the care of the Agency (Dec 2016)

82% (3,376) of approved general and relative foster carers with a link worker (Dec 2016); up from 79% in 2015

93% of children in care in a foster care arrangement

99% of children in a general residential placement had an allocated social worker (Dec 2016)



Adoption Services



55 Fostering to Adoption assessments completed

95 Inter Country Adoption assessments brought to local adoption committee

27 Domestic Adoption assessments brought to local adoption committee

56 Step parent Adoption assessments brought to local adoption committee

911 new applications to trace birth relatives

Tusla Regulation Services



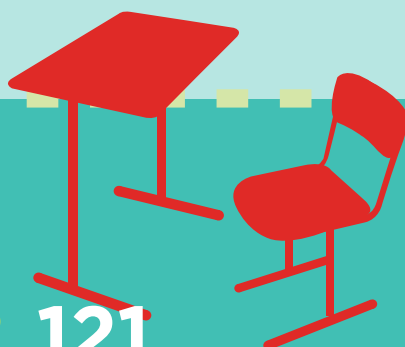
485 applications for home education processed

278 inspections of non-statutory children residential centres conducted in 2016

2,008 inspections of early years services carried out in 2016 and 432 new registrations/notifications in 2016; three-fold increase on 2015

Educational Welfare Services worked with 3,751 new individual children in the academic year 2015/2016

528 school attendance notices issued to parents in the academic year 2015/2016



121 court summonses issued about poor school attendance in the academic year 2015/2016

Educational Welfare Services

**Prevention,
Partnership
and Family
Support
Services**

30,980 children and 23,465 families
referred to family support services in 2016



1,041 Meitheal processes
initiated in 2016



155 family units of
accommodation
was provided (**147 Emergency
Refuge Family Units and 8
Emergency Safe Homes**) –
an increase of 6 units from 2015

**Domestic,
Sexual and
Gender Based
Violence
Services**

1,113 FOI requests received
across the Agency in 2016

**265 Parliamentary Questions and
190 Representations responded to**

1,172 formal complaints responded
to across the Agency

**Consumer
and
Public
Affairs**



Chairperson Foreword

I am delighted to present the third Annual Report of Tusla – Child and Family Agency. When appointed chairperson of Tusla in 2014, I remarked that the ambitious undertaking presented Ireland with an unprecedented opportunity to recast and transform our child protection, welfare and family support services into a single, unified Agency. Since then, significant progress has been made on building on the combined contribution of the individual strengths of each of these components of the service, promoting an appropriate, proportionate and timely response to children and families. Accepting of course that child protection is challenging for our staff who on a daily basis have to make difficult and far reaching decisions for children and their families.

This annual report is the second published under our Corporate Plan 2015-2017 which provides the overarching policy guidance and performance framework and a commitment by Tusla, to ensure that its priorities and outcomes for children and families are fully integrated with national priorities through its annual business planning process. Whilst 2016 presented ongoing challenges for the Agency, the 2016 annual report provides an overview of progress and achievements and highlights include:

- A 19% reduction, from December 2015, in the number of cases awaiting an allocated social worker, and a 20% reduction in the number of high priority cases awaiting allocation.
- The establishment of 75 child and family support networks as part of the prevention, partnership and family support programme.
- There were 432 new registrations/notifications of early years services representing a three-fold increase on 2015.
- Expanded educational welfare services worked with 3,751 new individual children in the academic year 2015/2016.
- The Tusla feedback and complaints policy 'Tell Us' went live in late 2016.

The establishment of the 'Transformation Programme' in 2016 was a hugely significant step for Tusla. It involves fostering an organisational culture based on collaboration and creativity supported by the programme management office; new strategies for information & communications technology; human resources and the implementation of the 'National Child Care Information System'. A new child protection and welfare strategy was developed and implemented to ensure all of our staff engage with children and families using a well proven consistent national standardised approach.

In late 2017, new legislation, the 'Children First Act', will be fully commenced. It will recognise all of society's responsibility for child protection and will place a statutory obligation on key professionals, known as mandated persons, to report concerns of harm without delay. Tusla welcomes this development and is focused on equipping itself, its funded agencies and all organisations working with children to meet the requirements of the new legislation. This will be achieved by providing training and support, internally and externally, as well as the establishment of 'Children First' implementation teams in the 17 local areas.

In 2016, 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 Officer, our Executive Team, our Board Secretary and all of our staff nationwide for their on-going hard work and commitment to delivering and supporting the delivery of high quality services to children and families, often in very challenging circumstances, and for their enthusiasm for the transformation journey we have embarked upon. I look forward to all of us, collectively, continuing to build on all of this momentum in 2017 and working with all stakeholders at a time of major transformation for the Agency.



Glossary of terms

| Term | Definition |
|----------|---|
| ACTS | Assessment, Consultation and Therapy Service |
| AFS | Annual Financial Statement |
| CAMHS | Child and Adolescent Mental Health Services |
| 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 |
| ICT | Information and Communication Technology |
| Meitheal | Early intervention practice model |
| NCCIS | National Childcare Information System |
| NIMS | National Incident Management System |
| 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

The Tusla – Child and Family Agency is now three years in operation after it was first established on the 1st January 2014 as the dedicated State Agency responsible for improving wellbeing and outcomes for children. The Agency was set up through merging Children and Family Services of the Health Service Executive, the National Educational Welfare Board and the Family Support Agency.

Tusla's remit includes a range of broad-based and targeted services, as follows:

- Child protection and welfare services, including family support services.
- Family Resource Centres and associated national programmes.
- Early Years services regulation and inspection.
- Educational welfare responsibilities, including statutory education welfare services, the 'School Completion Programme' and the 'Home School Community Liaison Scheme'.
- Alternative Care Services, including foster care, residential care, special care and aftercare
- Registration and inspection of non-statutory children's residential centres.
- Domestic, sexual and gender-based violence services.
- Services related to the psychological welfare of children.
- Assessment, consultation, therapy and treatment services (ACTS).
- Adoption services, including information and tracing.

Vision, Mission, Values, Behaviours

Tusla's vision is:

"All children are safe and achieving their full potential"

The Agency's mission statement outlines Tusla's core purpose and reason for being:

"With the child at the centre, our mission is to design and deliver supportive, coordinated and evidence-informed services that strive to ensure positive outcomes for children, families and communities."

Tusla has also committed to a set of values and associated behaviours to guide the Agency's approach to delivering services to children and families. They are as follows:

- **Courage and Trust**
 - Reliable, committed and accountable.
 - Professional, ethical and responsible.
 - Willing to stand up for our values.
- **Respect and Compassion**
 - Putting the individual at the heart of our services.
 - Protecting the most vulnerable.
 - Respectful and considerate towards all.
- **Empathy and Inclusion**
 - Fair, responsive and transparent.
 - Promoting collaboration and connected thinking.
 - Taking a long-term, whole-system view.

Corporate Plan 2015–2017 and 2016 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 fulltime 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 '2016 Business Plan' is the second business plan of a three year cycle based on the 'Agency's Corporate Plan 2015-17'. The '2016 Business Plan' is available at www.tusla.ie.

2016 Annual Report

Each year the Board of the Agency is required to publish an annual report in accordance with section 13 of the Act which states that the following is required:

- A statement of the activities undertaken by the Agency.
- A report in relation to the implementation of the Agency's corporate plan.
- A report in relation to the implementation of the Agency's business plan.
- An indication of the Agency's arrangements for implementing the code of governance.
- Particulars in relation to financial statements.
- Other particulars that the Agency considers appropriate or as the Minister after consulting the Minister for Health and the Minister for Education and Skills may require.
- A report on complaints and reviews.

The Annual Report is also in compliance with the '2016 Code of Practice for the Governance of State Bodies'. The '2016 Annual Report' is the third annual report published by the Agency and the second published under the 'Corporate Plan 2015-17'.

Better Outcomes, Brighter Futures

In 2016, Tusla continued to engage with the implementation infrastructure for Better Outcomes, Brighter Futures to progress 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 strategy.
- establishment of a human resource strategy.
- development of an information and communications technology strategy.
- 'National Child Care Information System' rollout.
- new organisational structure and culture.
- implementation of a resource allocation profiler.
- governance arrangements with section 56 and 59 organisations.
- development of a programme management office.

The objectives of the 'Transformation Programme' were as follows:

Overview of the Transformation Programme

Organisational Reform-Culture

Establish an organisational culture to support the way we wish to deliver services and achieve our vision.

Child Protection and Welfare Strategy

Development of a clear architecture as to how Tusla will design their child protection & welfare strategy, setting out a clear roadmap for the implementation of that strategy.

Strategic HR

Establish a HR Strategy which supports the recruitment and development of people to provide effective services to children and families and ensures that front line services are supported with essential administrative staff.

Organisational Reform - Structure

Further develop the corporate functions to ensure services are effectively governed and managed so that we can deliver safe and effective services.

Resource Allocation Profiler

Plan for the Implementation of a new Resource Allocation Profiler for Tusla that provides a decision support tool that enables the equitable distribution of resources, based on identified need, risk and effectiveness.

Section 56-59

Review and recommend revised governance arrangements for all organisations in receipt of funds under Section 56/59 of the Child and Family Act 2013.

Programme Management Office (PMO)

Establish a PMO to govern, support and monitor each of the transformation programmes and ensure integrated thinking in the delivery of our commitments. PMO handover to internal Tusla teams.

ICT Strategy & NCCIS

ICT Strategy to deliver ICT systems and services to support & standardise Tusla processes that will reduce manual and administrative demands. Continued development of NCCIS National Child Care Information System.

Considerable progress was made in 2016 across the Transformation Programme, as follows:

Child Protection and Welfare Strategy

Following an extensive stakeholder consultation process, a Child Protection and Welfare (CP&W) strategy was developed which sets out a clear roadmap for the implementation of the strategy. The CP&W vision and strategic objectives are outlined below:

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.



A number of roadshows were held across the country to communicate the CP&W strategy.

Programme Management Office (PMO)

The programme management office was established and focused on developing reporting and governance structures including regular status reporting meetings and updates to the sponsor group (Senior Management Team). A PMO target structure was agreed. Tusla project management processes, tools and templates were developed as part of the PMO handbook. The PMO also coordinated the development of a consolidated Transformation Programme Plan and facilitated some project management training.

Organisational Reform (Culture & Structure)

A cultural audit was carried out and the competing values framework was used to establish a sense of the 'As-Is' culture and corporate and high-level operations structures were designed.

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 and 59 organisations

A new governance framework for arrangements with section 56 and 59 organisations was developed and a new contract for organisations receiving funding over €250,000 was completed.

Human Resource Strategy

The HR team conducted a review of recruitment model and developed a three-year recruitment strategy. Formal placement programmes were developed in partnership with appropriate third level institutions.

- Training needs analysis conducted across the Agency.
- HR policy framework updated to reflect Tusla agreed policies and processes.
- KPI dashboard developed and implemented.

ICT Strategy Development

An ICT Strategy was developed which includes ICT vision, principles and objectives. It also includes a description of the current ICT function and an overview of the future ICT model for Tusla.

National Childcare Information System (NCCIS)

NCCIS was deployed in the Mid-West region in 2016 following detailed software analysis, development and testing. Roll-out into other areas is ongoing and due to be completed in mid 2018.

3.0 Key Achievements and Service Activity in 2016

This chapter outlines the 2016 Business Plan achievements and service activity organised according to the five short term outputs of the Corporate Plan 2015-2017.

Details of relevant services 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 2016 (where applicable).
- iii. '2016 Business Plan Priorities'.
- iv. 2016 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 in under output A are:

- A1 Child Protection and Welfare Services.
- A2 National Child Care Information Systems.
- A3 Emergency Out of Hours Service (EOHS).
- A4 Foster Care Services.
- A5 General Residential Services.
- A6 Special Care Residential Services.
- A7 Aftercare Services.
- A8 Adoption Services.
- A9 Separated Children Seeking Asylum Services.

A1: Child Protection and Welfare

The purpose of the child protection and welfare 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

- 47,399 referrals to child protection and welfare services in 2016, 9% more than 2015.
- 40% (19,087) were child abuse concerns and 60% (28,312) were welfare concerns.

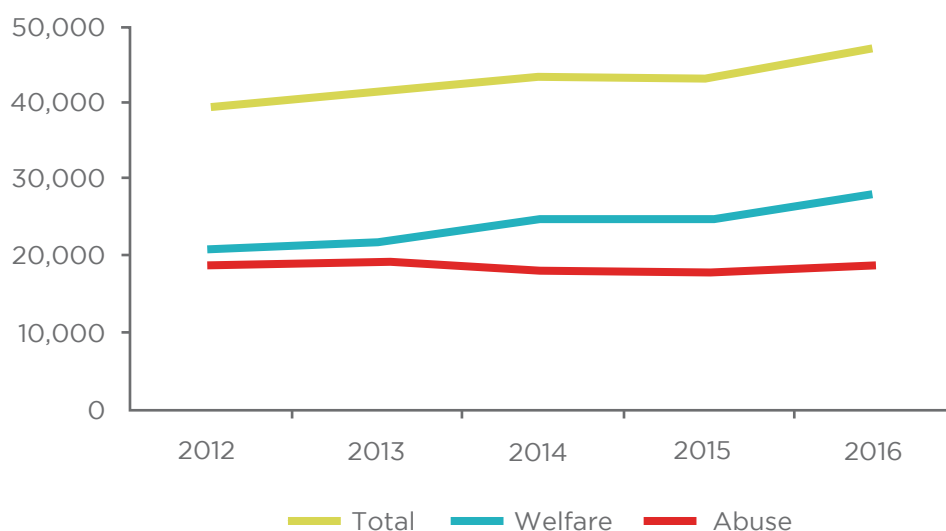


Figure 3.1: Number of referrals for a child protection and welfare response, 2012–2016

- Emotional abuse was the most common type of abuse reported, accounting for more than one-third of abuse referrals.

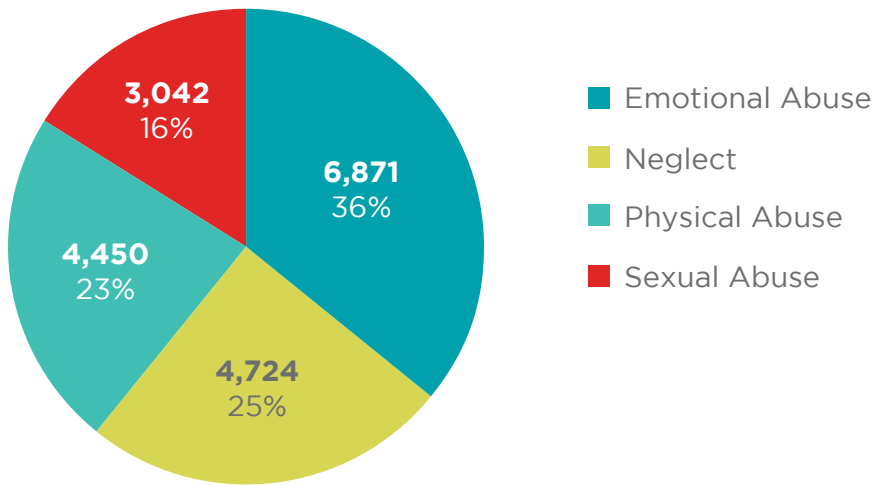


Figure 3.2: Breakdown of abuse types reported, 2016

At the end of December 2016:

- 25,034 cases open to social work with almost 8 out of 10 (78% ;19,621) allocated to a named social worker.
- 5,413 cases awaiting allocation to a named social worker, some 1,305 (19%) fewer than December 2015 and 3,272 (38%) fewer than January 2014 when the Agency was established.
- 801 high priority cases awaiting allocation, some 198 (20%) fewer than December 2015 and 2,734 (77%) fewer than January 2014.
- Almost two-thirds (62%) of cases awaiting allocation were waiting less than 3 months.

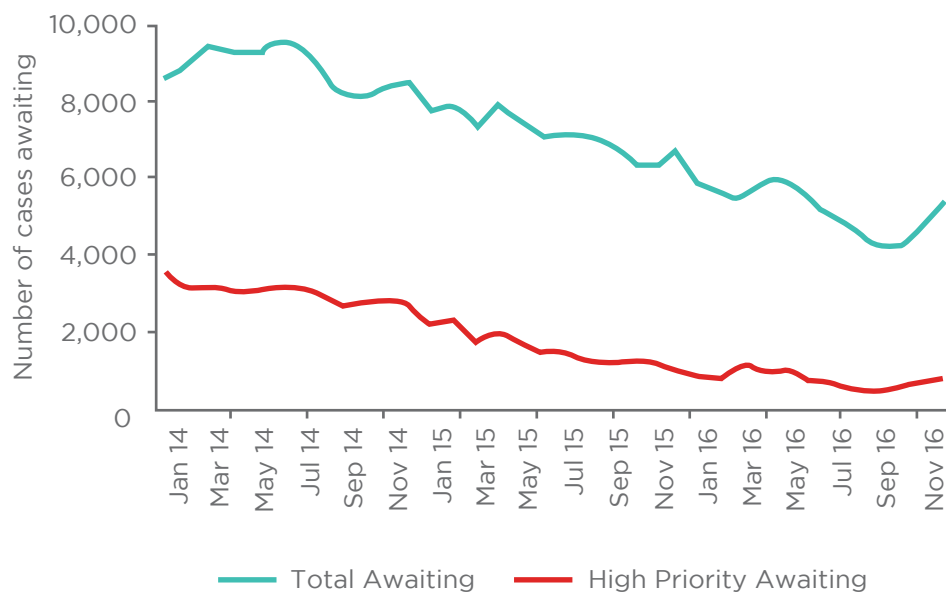


Figure 3.3: Reduction in open cases awaiting allocation to a social worker

- 1,272 children listed as active on the 'Child Protection Notification System' (CPNS)¹ at the end of the year; 82 fewer children than 2015.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> • Ensure an approach to responding to referrals which consistently provides an efficient, effective and proportionate response. • Targeted national reduction of cases awaiting allocation to child protection and welfare, children in care and retrospective cases of abuse. | <ul style="list-style-type: none"> • 19% (1,305) reduction, from December 2015, in the overall number of cases awaiting allocation of a named social worker, and a 20% (198) reduction in the number of high priority cases awaiting allocation. • Developed, modified and maintained the Child Protection Notification System (CPNS) to secure the safety of children at risk of harm. • Reviewed social work caseload management undertaken and adaptations made to framework. • Revised job description for senior social work practitioners agreed. Process for recruitment established to enhance child protection and welfare teams. Project approved for implementation in 2017. • Implementation plan developed in response to the national assurance review of retrospective cases of abuse. • National implementation plan of 'Children First' being developed within operations in line with policy development across all sectors of the organisation. • National audits conducted regarding cases awaiting allocation. • Established an international social services team in the national operations office. |

A2: National Childcare Information Systems (NCCIS)

The goal of NCCIS is to create an integrated national child protection and welfare system to support the care of every child and support the management of every case, from first contact with Tusla social work department through to case closure.

¹ The CPNS, in accordance with *Children First: National Guidance for the Protection and Welfare of Children, 2011*, 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.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> • Prepare for the implementation of NCCIS on a national basis in 2017. • Ensure appropriate resources are in place to support effective roll-out of NCCIS. | <ul style="list-style-type: none"> • NCCIS version 4 developed and user acceptance tested. • DPER approval received for project progression and Capital allocation for resourcing approved by the Department of Children & Youth Affairs. • Scope infrastructure upgrades and secure agreement with HSE to support upgrades and reconfiguration. • Data migration scoping and methodology developed. • Service releases delivered to Mid-West to support existing users. • Project team recruited and capacity developed internally to manage NCCIS. |

A3: Emergency Out of Hours Service (EOHS)

The purpose of the EOHS is to cooperate with and support An Garda Síochána in the execution of their duties and responsibilities under section 12(3) of the 'Child Care Act 1991' and referrals made under Section 8.5 of the 'Refugee Act 1996'. The EOHS provides a call centre with access to a local on-call social worker to An Garda Síochána for consultation and advice. The EOHS also provides placements for children under Section 12(3) of the 'Child Care Act 1991' and Section 8.5 of the 'Refugee Act 1996'.

Key Service Activity

- 1,450 referrals to emergency out of hours social work services in 2016 (includes EOHS, crisis intervention services and Cork out of hours service).
- 480 children placed in emergency placements.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|---|
| <ul style="list-style-type: none"> • Improve the delivery of the EOHS as a nationally led and nationally delivered service. • Produce monthly performance reports. | <ul style="list-style-type: none"> • National review of out of hours services completed. • Monthly performance reports now published. |

A4: 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.

Key Service Activity

At the end of December 2016:

- 93% (5,817) of children in care were in a preferred foster care arrangement;

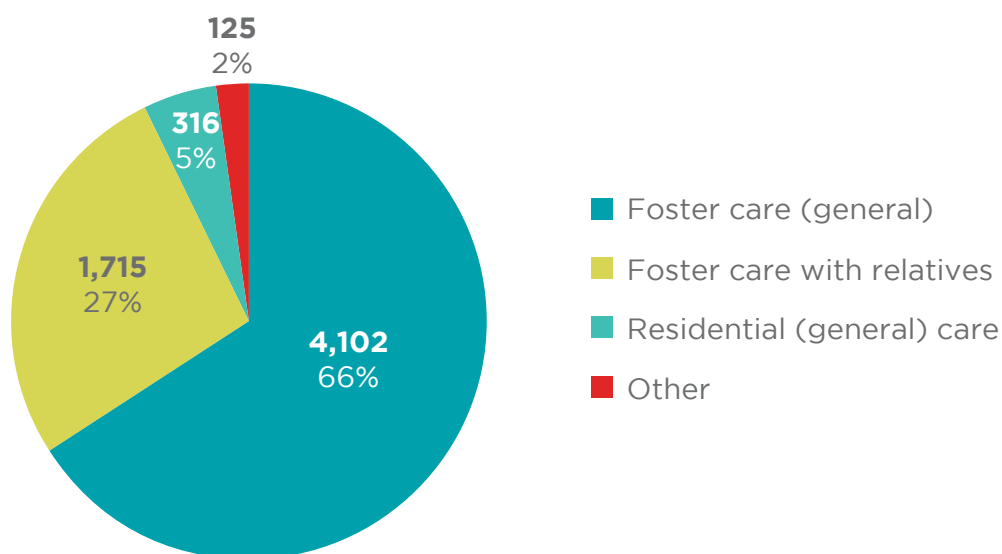


Figure 3.4: Breakdown of children in care by care type, December 2016

- 92% (5,374) of children in foster care had an allocated social worker.
- 94% (5,439) of children in foster care had a care plan against a target of 90%.
- 4,537 foster carers on the panel of approved foster carers; 94 more than 2015.
- 82% (3,376) of approved general and relative foster carers had a link worker; up from 79% in 2015.
- 69% (211) of unapproved relative foster carers (who had a child placed for twelve weeks) had a link worker; up from 64% in 2015 and 57% in 2014.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|---|
| <ul style="list-style-type: none"> Implement a strategic approach to the provision of foster care as part of the 'Alternative Care Strategy'. Increase the number of approved statutory foster carers. Ensure 100% of children in care have an allocated social worker. | <ul style="list-style-type: none"> The development of the 'Alternative Care Strategy' was commenced in 2016. Both national and international research was commissioned to examine the provision of alternative care in both Ireland and other jurisdictions. Reports were produced on both to gain a better understanding of what works well in alternative care and inform the development of the strategy. A national consultation was undertaken by Tusla and Irish Foster Care Association in 2016 with foster carers and social workers to provide space for them to discuss their experiences of providing a fostering service. This information is also being used to inform the alternative care strategy. Increased number of foster carers on the panel of approved foster carers. Increase in the percentage of foster carers with a link worker. Increased number of foster carers completing accredited training. |

A5: General 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. The requirements for placing a child in a children's residential centre and for the running of these centres are laid out in the 'Child Care (Placement of Children in Residential Care) Regulations 1995'. 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.

Key Service Activity

At the end of December 2016:

- 304 children in a general residential placement, 5% of all children in care.
- 99% (302) had an allocated social worker and 97% (296) had a care plan.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|---|
| <ul style="list-style-type: none"> Improving management and governance structures in the new national structure for residential care with a clear focus on improving quality and safety of services. Reduce dependency on residential care by developing intensive community based supports. | <ul style="list-style-type: none"> A national significant event notification system was launched, which supports CRS operational risk management and also the registration and inspection and monitoring functions nationally. Tobacco free campus 100% compliant at the end of 2016 in the statutory residential childcare centres. Residential childcare overreached their target in respect of staff attending brief intervention. Residential childcare in the South was regionalised and brought into the national service. |

A6: Special Care Residential Services

Special care is short term, stabilising and safe care in a secured 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 the assessed needs of that child/young person.

Key Service Activity

- 12 children in special care at the end of December 2016, all with an allocated social worker and a care plan.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|---|
| <ul style="list-style-type: none"> • Increase bed capacity in special care through capital programme of investment. • Ensure compliance with the new special care regulations. • Upgrade building works: Ballydowd | <ul style="list-style-type: none"> • Crannog Nua's building works are due to be completed in May 2017. When fully operational, this will increase the much needed capacity for special care provision for young people by 12 places. • The special care processes were established and launched in August 2016. These have created a structure to support young people's placements in special care and help to avoid unnecessarily lengthy placements. • Ballydowd upgrading works are also due to be completed in June 2017. This will support the continued care of the young people placed in Ballydowd. • Special Care Processes were developed and agreed between the HSE, Tusla and High Court. • A Court liaison staff member was appointed to specifically liaise with the courts system. |

A7: Aftercare Services

Under Section 45 of the 'Childcare Act 1991', Tusla provides leaving and aftercare services for young people that are responsive and relevant to each young person's circumstances. Services are provided on the basis of assessment of need, age and the length of time the young person was in care.

Key Service Activity

At the end of December 2016:

- 1,880 young adults in receipt of aftercare services; 45 more than 2015.
- Almost half (46%; 837) of the 18-22 years cohort in receipt of aftercare services remained living with their carers; about one in four (27%; 485) had moved to independent living.
- 58% (1,040) of the same cohort (18-22 years) were in full-time education.

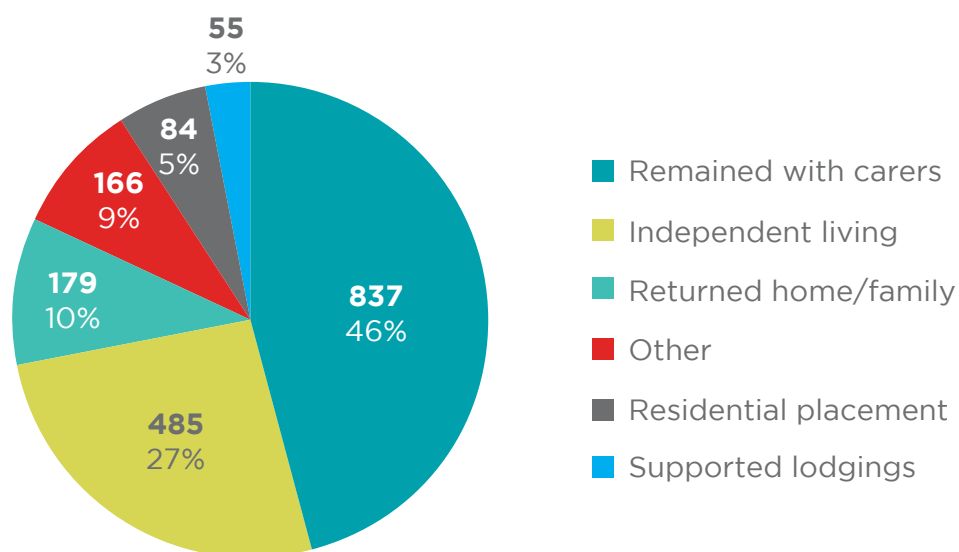


Figure 3.5: Living arrangements of young adults (18-22 years) in receipt of aftercare services, December 2016

| 2016 Business Plan Priorities | 2016 Achievements |
|--|--|
| <ul style="list-style-type: none"> Preparation for 'Child Care (Amendment) Act 2016'. | <ul style="list-style-type: none"> Nationally agreed job description for aftercare manager, aftercare worker developed. Mapped the current provision of aftercare service on a national basis. Audit completed of the financial supports for aftercare. |

A8: Adoption Services

Tusla adoption service carries out a number of functions:

- Assessment of the suitability and eligibility of persons to adopt a child as per 'Adoption Act 2010'.
- Provision of care for a child (ren) who has been put forward for adoption as per section 6 (3) of the 'Child Care Act 1991'.
- Provision of a search and reunion service to those who have been separated from birth families through adoption or alternative care arrangements.

Key Service Activity

- 177 adoption assessments (domestic, inter-country and fostering to adoption) completed in 2016.
- 64 applications for step-parent adoption.

- 690 applicants awaiting an information and tracing service (Dec 2016); 98 more than December 2015. Increase due to the transfer of files (13,600) from St Patrick's Guild in Q2 2016, which included 240 applicants already waiting for a service with SPG.
- Seven of eight services meeting the target of eight weeks or less for the provision of non-identifying information; significant improvement on 2015.
- The service currently holds 70,000 plus historical records relating to mother and baby homes, adoption societies and boarded out records dating back to early 1900's.

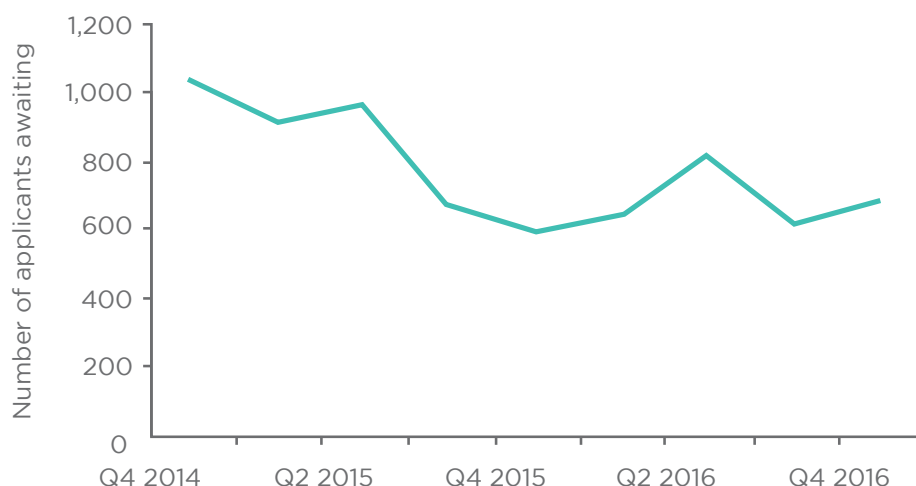


Figure 3.6: Number of applicants awaiting information and tracing services, December 2016

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> • Develop adoption service structures to improve consistency and streamlining of adoption services. • Reduce the waiting lists for information and tracing services. • Establish a secure, accessible and centralised interim archive for the protection of adoption records. | <ul style="list-style-type: none"> • The national adoption service structure was further enhanced with the filling of all five principal social work posts. • The reduction in waiting time and numbers awaiting information and tracing was not possible due to the transfer of 13,600 records in May 2016 from St Patrick's Guild Adoption Society with a waiting list of 240 applicants. • Reduction in waiting time for the provision of non-identifying information to applicants for information and tracing. • A storage facility for historical records has now been sourced, upgraded and staffed. • Adoption services continued through 2016 to facilitate and support the work of the Mother and Baby Commission of Investigation. |

A9: Separated Children Seeking Asylum Services

Tusla's social work team for separated children seeking asylum provides care, family reunification and aftercare support using an 'equity of care principle' framework to all unaccompanied minors who are in receipt of their services.

Key Service Activity

- 126 referrals in 2016, highest number since 2009 (203).
- 65% (82) of referrals placed in care.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|--|
| <ul style="list-style-type: none"> • The service's focus in 2016 was based on continuing its standard work serving the care and protection needs of unaccompanied minors identified in the State as well as providing support to aged-out minors who fall through the gaps of the current aftercare regulations. • At the same time, the service was additionally responding to the European refugee crisis. This required launching Tusla's response to the Government's commitment to accept up to 200 unaccompanied minors from Calais, France and supporting the Department of Justice's Irish Refugee Protection Programme. | <ul style="list-style-type: none"> • Tusla joined the Irish Refugee Protection Programme taskforce in October and agreed to support relocation of 20 unaccompanied minors under the EU Relocation Programme which began with 4 children arriving in 2016. • Expanded service capacity from 18 intake beds to 24, with an additional 6 long-term beds making a total of 30 residential beds for the service. • Aftercare services were provided to over 100 care leavers with varying levels of residency permissions and support needs. |

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 Quality Assurance Directorate
 - B2.1 Quality Assurance, Performance Information and Risk
 - B2.2 Services Experience and Consumer Affairs
 - B2.3 Health and Safety
 - B2.4 Alternative Care and Education Regulation
 - B2.5 Early Years Services Regulation

B1: The Policy and Strategy Directorate

The policy and strategy directorate provides a specialist advisory function to the Chief Executive and Senior Management Team to inform long term strategic planning and the development of key policy actions to achieve the organisation's strategic objectives.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none">Establish governance framework to ensure consistent development of policies, procedures, protocols and guidance documents.Implement 'Children First' in line with legislative commencement dates.Develop an alternative care strategy.Conduct an analysis of vulnerable groups to establish if targeted interventions and supports are required. | <ul style="list-style-type: none">National Policy Oversight Committee has standardised policy development across the Agency.Audit conducted of current policy catalogue to identify gaps and guide improvements.Research needs analysis completed.National research office established.Completion of the development of the universal e-learning programme for 'Children First'.Establishment of the 'Review Evaluate Direct' (RED) processes for implementation in 2017 in each Duty/Intake Team.Successful business case negotiated with DCYA to support additional front door resources before commencement of mandatory reporting. |

- 2 day national seminar held in March – *“Towards a Child Protection and Welfare Strategy”*.
- Development and acceptance of the child protection and welfare strategic objectives.
- Draft Child Protection and Welfare strategic implementation plan developed.
- Supported the alignment of NCCIS to facilitate mandatory reporting and substantiation of allegations to include ‘Children First’ metrics.
- Production of child animation/media to support understanding of child protection conference and ‘Child Protection Notification System’.
- EPPI toolkit pilot project launched and 1 day conference held in May – *“Strengthening Our Practice, Learning from the Evidence Informed Practitioner Programme”*.
- Case closure guidelines developed and launched.
- Guidelines were completed providing clarity on operational procedures between social work services and ‘Meitheal’ services.
- Review of children in care metrics completed.
- Review of Aftercare Policy and supporting documents to support pending legislation (Child Care Amendment Act).

B2: Quality Assurance Directorate

The quality assurance directorate is responsible for driving and supporting continuous improvement and the delivery of consistent high quality services to all service users, regardless of location. The functions of the QA Directorate are:

- B2.1 Quality Assurance, Performance Information and Risk
- B2.2 Services Experience and Consumer Affairs
- B2.3 Health and Safety
- B2.4 Alternative Care and Education Regulation
- B2.5 Early Years Services Regulation

B2.1: Quality Assurance, Performance Information and Risk

The quality assurance and risk function in the Quality Assurance Directorate is responsible for putting systems in place for the quality assurance and monitoring of all Tusla services to provide assurances that services are safe, well-led and child centred. This function is also responsible for the development and oversight of risk and incident management systems throughout the Agency and for analysing and reporting on operational performance data and metrics.

2016 Business Plan Priorities

2016 Achievements

Quality Assurance and Monitoring

- | | |
|--|---|
| <ul style="list-style-type: none"> • Implement the 'Quality Assurance Framework', including a full self-assessment cycle for all services in 2016. • Enhance operational performance reporting and oversight systems. • Conduct a second annual review of cases awaiting allocation to child protection and welfare services. • Conduct themed audits and reviews in services. • Reform and integrate the statutory monitoring service for Tusla services into the overall quality assurance framework. • Embed and further develop the process for tracking recommendations from internal and external sources. | <ul style="list-style-type: none"> • Publication of the Agency's 'Quality Improvement Framework' and supporting guidance. • Re-structuring and strengthening of the quality assurance and monitoring team into two teams with additional management and monitoring capacity. • The following national quality reviews were undertaken: <ul style="list-style-type: none"> • National review of child protection and welfare cases and the 'Child Protection Notification System' (CPNS). • National assurance review of adult retrospective abuse cases. • Review of Rathmines Women's Refuge. • National Assurance Review of allegations against foster carers of young people in care with a disability was commenced. • Reviews of foster care committees were commenced. • 31 monitoring visits were carried out in special care and 69 monitoring visits carried out in tusla residential centres. • Further to HIQA inspections, the monitoring team provided a verification role in the implementation of action plans. • Process for tracking recommendations from internal and external sources developed. |
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|---|---|
| <p><i>Operational Performance Information and Reporting</i></p> <ul style="list-style-type: none"> • Establish an ICT solution for presenting and analysing performance information. • Publish performance review methodology guidance. • Establish a clear business intelligence system that supports analysis of performance information to identify risks, trends and opportunities for learning and improvement. | <p><i>Operational Performance Information and Reporting</i></p> <ul style="list-style-type: none"> • Commenced development of an interactive data visualisation tool for presenting and interrogating performance and activity data. • Commenced development of a risk profile tool that brings together a broad range of qualitative and quantitative data and information for service areas and assists in identifying services or aspects of a service that are of a particular concern and require further examination. • Published the review of adequacy of services report 2014 (Section 8 Child Care Act 1991). • Developed performance review methodology guidance as part of the 'Quality Improvement Framework'. |
| <p><i>Risk and Incident Management</i></p> <ul style="list-style-type: none"> • Implement the Tusla 'Risk Management Policy and Procedure' throughout the Agency. • Full roll-out of NIMS incident module throughout the Agency. | <p><i>Risk and Incident Management</i></p> <ul style="list-style-type: none"> • Organisational risk management policy and procedure finalised and approved. • Tusla 'Incident Management Policy' finalised and approved, including two supporting documents: Look-back Review Guidance and System's Analysis Guidelines. • NIMS system further rolled out to support incident reporting. • Commenced the production of quarterly incident reports. • Established a National Incident Management System (NIMS) Oversight Group. • NIMS training for regional and area staff. |

B2.2 Services Experience and Consumer Affairs

The Tusla service experience and consumer affairs division is responsible for developing and maintaining systems for complaints and feedback management, Freedom of information, and parliamentary affairs.

Key Service Activity

- 1,113 FOI requests received across the Agency in 2016.
- 265 Parliamentary Questions and 190 Representations responded to.
- 1,172 formal complaints responded to across the Agency.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|---|
| <ul style="list-style-type: none"> • Implement 'Tell Us' complaints and feedback policy and procedure. • Roll out the NIMS complaint module. • Conduct complaints training programmes for all levels of staff. • Establish innovative channels for services user to make complaints. • Conduct national service user survey. • Produce quarterly synthesis reports based on complaints and feedback to improve service delivery. • Roll out protected disclosure and good faith policies and procedures. • Improve Tusla FOI systems at national and local level. | <ul style="list-style-type: none"> • The Tusla complaints policy '<i>Tell Us</i>' was developed and went live Q3 2016. Guidance for members of the public and staff and a complaints leaflet for young people were developed and published on the Tusla website. • Briefing sessions on '<i>Tell Us</i>' for Tusla staff commenced. • Quarterly service experience reports produced. • The development of the National Children's Charter advanced. • Tusla 'Protected Disclosure Policy' launched. • Tusla national FOI office has been providing support and guidance to staff regarding the handling of FOI complaints. A training programme has been developed and will be implemented in 2017. |

B2.3: Health and Safety

The purpose of the national health and safety department is to provide support and oversight on the implementation of the Agency's health and safety management programme. Specifically, this involves oversight of the Agency's compliance to the 'Safety, Health and Welfare at Work Act 2005' and associated regulations. The National Health and Safety department also develops relevant national policies on workplace health and safety and promotes positive health and safety initiatives throughout the Agency.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> • Establish health and safety function within the Agency. • Develop and implement a health and safety programme. | <ul style="list-style-type: none"> • National health and safety department established. • National health and safety manager appointed. • Health and safety gap analysis completed and health and safety improvement plan developed. • Completion of up to date risk assessments and site specific safety statements at 100 Tusla workplaces. • Review of all inspections carried out by the Health and Safety Authority at Tusla workplaces to date was commenced. |

B2.4: 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'.
- Assess applications and register children who are being educated in places other than recognised school settings. This includes home educations and independent school settings under Section 14 of the 'Education Welfare Act, 2000'.

Key Service Activity

- 1,322 children on the register for home education (December 2016).
- 485 applications for home education in 2016.
- 4,804 children (approx) attending 44 independent schools (December 2016).
- 1,244 applications for education in independent schools in 2016.
- 90 private residential centres and 28 voluntary residential centres registered with the Agency (Dec 2016).
- 278 inspections of private residential centres and voluntary residential centres conducted.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> • Transfer of function of Section 14 Assessment and Registration functions to quality assurance directorate. • Introduction of risk assessed application management and review process for alternative care and education. • Review the application process for registration of independent school settings. • Reform of the inspection and monitoring programme for private and voluntary children's residential services. • Recruitment campaigns to increase service capacity. | <p><i>Alternative Education</i></p> <ul style="list-style-type: none"> • The alternative education service moved to the quality assurance directorate from the education welfare service this year. • The service has commenced reviews of all the children on the register of home education. • The service has reviewed its register against a newly introduced risk assessment methodology with a view to identifying high risk cases and educational settings. • The application process for the independent schools sector is more rigorous with emphasis placed on the demonstration of health, safety and welfare aspects of services during the application process. <p><i>Alternative Care</i></p> <ul style="list-style-type: none"> • The rates of inspection and monitoring of children's residential centres has increased. • An inspection manager was recruited for the south west inspection team, increasing our governance of our processes and practices. • Registration panel for non statutory children's residential centres became operational. • A new intelligence led regulation model for the residential child care sector has been developed with a view for piloting in 2017. • A new administrative based registration model for non statutory foster care has been developed for introduction in 2017. • New methodology for assessment and regulation of alternative care governance systems was developed and implemented. |

B2.5: Early Years Services Regulation

Tusla is responsible for registering and inspecting pre-schools, play groups, nurseries, crèches, day-care and similar services which cater for children aged 0-six, under the Child Care (Pre-School Services) Regulations 2016.

Key Service Activity

- 4,507 early years services operating at the end of December 2016.
- 432 new registrations/notifications in 2016; threefold increase on 2015.
- 2,008 inspections of early years services carried out in 2016.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none">• Implement processes and systems for new regulations.• Establish central registration office.• Implement an ICT system to support intelligence driven inspections.• Re-register all services that were deemed registered on 1 January 2014. | <ul style="list-style-type: none">• Established a registration office and implemented processes to register new services supported by an ICT infrastructure.• Re-registered all services that were deemed registered on 1st January 2014.• Developed a draft Quality and Regulatory Framework for consultation in 2017.• Developed a suite of new inspection policies and procedures based on the new regulations.• Developed and implemented new processes and systems to support the 2016 Early Years Regulations. |

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. Prevention, Partnership and Family Support (PPFS)
- C2. Family Resource Centre Programme
- C3. Children and Young People Service Committees (CYPSC)
- C4. Commissioning
- C5. Assessment, Consultation and Therapy Service (ACTS)
- C6. Therapy Services
- C7. National Domestic, Sexual and Gender Based Violence Service (DSGBV)
- C8. Regional Sexual Abuse Assessment and Therapeutic Intervention Service
- C9. Homelessness

C1: Prevention, Partnership and Family Support (PPFS)

Tusla is committed to providing high quality services to children and families at the earliest opportunity across all levels of need. PPFS involves providing help to children and families at an early stage to prevent situations getting worse. This involves working in partnership with families, other agencies and professionals to respond quickly to the needs of children.

Key Service Activity

- 30,980 children and 23,465 families referred to family support services in 2016.
- 75 child and family support networks operating at the end of 2016 with a further 37 planned.
- 1,041 'Meitheal' processes initiated in 2016.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|--|
| <ul style="list-style-type: none"> • Continue the implementation of 'Meitheal' within Agency and partner organisations. • Develop a National Strategy on Participation of Children and Young People. | <ul style="list-style-type: none"> • Participation toolkit and national training programme developed and 37 trainers trained and national training in participation initiated in Q4. National Children's Charter advanced. • Establishment of 75 child and family support networks and 37 more identified to support timely responses and early intervention to children and their families. • Readiness checklists for Tusla's early intervention and prevention system conducted in all areas. • 'Meitheal'/social work interface protocol developed and approved. • 'Meitheal' practice model established in all 17 operational areas. • Participation toolkit and national training programme developed, additional trainers trained and national training in participation initiated in Q4. National Children's Charter advanced. • 'Parenting Participation Toolkit' completed and disseminated. Seed funding grant projects initiated in all operational areas. Parenting Support Champions in place. • 'Meitheal'/social work interface protocol approved and implemented in all areas. • Tusla has engaged with the consultation process on the development of the new Action Plan for Educational Inclusion by Department of Education and Skills with a view to enhancing interface between prevention and family support and the DEIS initiative. |

C2: Family Resource Centre Programme

National Family Resource Centre Programme

To support all Family Resource Centres (FRC) achieve optimum outcomes for young people and families they serve.

National Counselling Grants Scheme

To ensure that all recipients of Tusla funding under the Counselling Grants Scheme deliver high quality counselling services.

Key Service Activity

- 88 FRCs provided counselling services to 9,360 individuals (2,495 men, 5,855 women and 1,010 children).
- 162 referrals were received by FRCs from 'Meitheals'.
- 548 'Meitheal' meetings were attended by FRCs.
- 11,768 people were informed about mental health services.
- There were 306 occasions when people with suicidal thoughts were supported by FRCs.
- 329 evidence based parenting programmes delivered, with 1,814 parents and 960 children participating.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|---|
| <ul style="list-style-type: none"> • Integrate FRCs and counselling programmes into Tusla's service delivery framework. • ensure the readiness of family resource centres to assist with the refugee resettlement programme. | <ul style="list-style-type: none"> • National Counselling grant scheme devolved to each operational Area. • Increase in the number of FRCs represented on CYPSCs. |

C3: Children and Young People Service Committees (CYPSC)

The purpose of the CYPSC structure is to improve outcomes for children and young people through local and national interagency working by bringing together the main statutory, community and voluntary providers. They provide a forum for joint planning and co-ordination of activity to ensure that children, young people and their families receive improved and accessible services. CYPSCs' plans include consideration of local needs across the five outcome areas set out in 'Better Outcomes Brighter Futures' policy framework.

Key Service Activity

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none">• CYPSC established in each area.• PPFS and 'Meitheal' linked to the work of the CYPSCs. | <ul style="list-style-type: none">• National roll out of CYPSC coordinator posts.• All CYPSC have appropriate support structures.• Structures established within CYPSC – sub-committees to ensure strong linkages with PPFS.• DCYA agreed to fund a pilot project by Tusla through the quality and capacity building initiative where this involves the development of a data and information hub with a primary focus on CYPSCs. |

C4: Commissioning

The purpose of Tusla's commissioning process is to ensure a clearly defined approach to deciding how to use the total resources available for children and families in order to improve outcomes in the most efficient, effective, equitable, proportionate and sustainable way. Commissioning in Tusla will ensure that services have key objectives enabling commissioned services to become targeted, evidence informed, outcome-based, value for money driven and future-proofed.

Key Service Activity

| 2016 Business Plan Priorities | 2016 Achievements |
|--|---|
| <ul style="list-style-type: none">• Implement the commissioning approach with all externally funded organisations.• Enhance governance arrangements with externally funded organisations. | <ul style="list-style-type: none">• Strategy and toolkit for commissioning developed.• Commissioning "Market Positions Statements" developed in pilot areas.• Training on governance and commissioning developed. |

C5: Assessment, Consultation and Therapy Service (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. ACTS also supports other professionals in their ongoing work with young people and their families. The service includes psychology, social work, speech and language therapy, addiction counseling and social care professionals who work together to inform collective practice.

Key Service Activity

| 2016 Business Plan Priorities | 2016 Achievements |
|--|---|
| <ul style="list-style-type: none"> Enhance the capacity of the ACTS team to meet the needs of children in care who present with challenging behaviour. Provide services for children who exhibit sexually harmful behaviour. | <ul style="list-style-type: none"> The Tusla/CAMHS national operations group met on a number of occasions. Every young person referred in Oberstown Children Detention Campus was provided with a mental health screening in partnership with the National Forensic Service. Every young person in special care was assessed and an individual therapeutic plan provided. The special care process was implemented. Recipients of the Association for Psychological Therapies DICES Award for Excellence in Risk Assessment and Management 2016. |

C6: Therapy Services

To provide an integrated approach to the provision of therapy services, which supports and informs front line practitioners in their day to day work with children and families as well as providing multidisciplinary therapeutic services which address the broader psychological welfare needs of children and their families.

Key Service Activity

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> Ensure a strategic approach is taken to the development of services regarding the psychological wellbeing of children and families. | <ul style="list-style-type: none"> National review of current therapy service provision undertaken. Service development model for Tusla Therapy Services drafted and presented to Tusla Board. Procurement process to establish a framework agreement for the provision of psychology and other therapy services. |

C7: National Domestic, Sexual and Gender Based Violence Service (DSGBV)

The national DSGBV service provides a single line of accountability for DSGBV services in line with Tusla commitments under the second national strategy for the sector. It also provides oversight and support for the delivery of services that respond to the needs of those that experience domestic and sexual violence.

Key Service Activity

In 2016 Tusla provided funding, co-ordination and support to 60 organisations delivering services to victims of domestic, sexual and gender based violence throughout the country. Of these organisations:

- 20 provided emergency refuge or safe home accommodation to women and children who were victims of domestic violence (a total of 155 family units of accommodation was provided:- 147 in emergency refuges family units and 8 in emergency safe homes – this represented an increase of 6 units over the 2015 provision).
- 24 provided community-based services to women, children and men who were victims of domestic violence.
- 16 provided community-based services to women, men and older children who were victims of sexual violence.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|---|
| <ul style="list-style-type: none"> • Establish a full National DSGBV service team. • Implement a standard monitoring and reporting framework. • Contribute to the implementation of the Istanbul Convention. | <ul style="list-style-type: none"> • A standard monitoring and reporting framework for DSGBV services nationally has been established, with national DSGBV services team recruited to provide support for oversight and commissioning developments. • Progressed work in gathering data and evidence to underpin DSGBV services. Information available includes national dataset on DSGBV services activity; targeted reviews of evidence; data from extensive engagement with service provider organisations and with initiation of service user engagement project. |

C8: Regional Sexual Abuse Assessment and Therapeutic Intervention Service

The purpose of Tusla sexual abuse services is to provide welcoming, supportive and accessible multidisciplinary services which can identify abuse, assess risk and devise and implement management, protection and aftercare plans effectively, providing access to crisis support, specialist clinical and forensic care as well as access to a medical or forensic examination as required.

Key Service Activity

| 2016 Business Plan Priorities | 2016 Achievements |
|---|---|
| <ul style="list-style-type: none"> Establish Tusla services for children and young people who exhibit sexually harmful behaviour in order to enhance current multi-agency provision. | <ul style="list-style-type: none"> Implementation of national service model in Tusla DNE to provide specialist multidisciplinary service accessible across the region throughout-reach clinics provided on an inter-agency development basis. Establishment of multiagency implementation team for development of a specialist centre providing assessment and therapy services in Tusla West. Recruitment of 4 x regional co-ordinators for the sexually harmful behaviour service. South side interagency assessment treatment team service transferred to Tusla governance. Tusla is currently leading a national, multiagency process to implement a national service model for sexual abuse services for children and their families. The national steering committee for sexual abuse services has been established to facilitate and promote integration and coordination of the key stakeholder agencies in the development of sexual abuse services for children in Ireland. |

C9: Homelessness

Homelessness Liaison was established in October 2015, to ensure Tusla meets its statutory obligations and organisational objectives in the area of homelessness. This involves engaging with statutory and voluntary agencies that provide services and supports to children, young people and families experiencing homelessness.

Key Service Activity

| 2016 Business Plan Priorities | 2016 Achievements |
|---|---|
| <ul style="list-style-type: none">• Finalise and implement protocol for joint working between Tusla and the Dublin Region Homeless Executive (DRHE).• Provide accessibility to support services within Family Support and Community Services.• Provide appropriate responses to the child protection and welfare issues which arise within the homeless population. | <ul style="list-style-type: none">• Agreed final protocol for joint working between Tusla and the Dublin Region Homeless Executive.• Briefings were held in relation to agreed protocol (social work departments and DRHE).• Established networks in the family support context for example within family resource centres offering signposting services to families experiencing homelessness. |

SHORT TERM OUTPUT D: PROMOTING FULLTIME EDUCATION

Attendance, participation and retention in fulltime education is embedded in service delivery for all children.

The services included in under output D are:

D1: Educational Welfare Services

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 Educational Welfare Services and is supported by non-statutory services Home-School-Community-Liaison (HSCL) and the School Completion Programme (SCP).

Key Service Activity

- EWS worked with 3,751 new individual children in the academic year 2015/2016.
- 528 school attendance notices and 121 court summonses were issued to parents in the academic year 2015/2016.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|--|
| <ul style="list-style-type: none"> • Implement the new integrated management structure. • Strengthen governance within the SCP programme. • Continue to align EWS with Tusla's 'Service Delivery Framework'. • Establish systems to monitor the educational participation of all children in care. | <ul style="list-style-type: none"> • Developed performance metrics and KPIs for all EWS services. • Completion of full review of employment status and employment contracts across all SCP projects. • Appointment of permanent director of EWS and commencement of recruitment process for integrated service personnel in order to complete the integrated management structure. • Published and disseminated School Attendance Strategies to 4,000 plus schools. • All EWS completed 'Children First' training. • Worked with colleagues in DES and Tusla in the design and implementation of the Children in Care Home Tuition Scheme. • Commenced nationwide CPD Programme for all School Completion Staff. 400 SCP staff received a minimum of 3 training days to end December 2016 SCP Portal live from 15th December. • Developed and implemented school recording and reporting templates and metrics for HSCL to DES and Tusla. |

SHORT TERM OUTPUT E: AN ORGANISATION FIT FOR PURPOSE

A fit for purpose organisation to deliver on the Agency's intent.

The functions included in under output E are:

- E1 Legal Services Directorate
- E2 Finance Directorate
- E3 Human Resources Directorate
 - E3.1 Workforce Learning and Development
 - E3.2 Employee wellbeing and Welfare
 - E3.3 Recruitment and Talent Management
 - E3.4 Operations - Organisational Management
 - E3.5 Employee Relations and Industrial Relations
- E4 Information and Communications Technology (ICT)
- E5 Estates
- E6 Communications
- E7 Programme Management Office

E1: Legal Services Directorate

The purpose of the in-house legal services unit is to provide specialist legal services in the area of child care law and corporate advices. The unit also co-ordinates the work of 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.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> • Resource in-house legal services in order to reduce legal spend. • Develop ICT structure for legal services. | <ul style="list-style-type: none"> • Recruited the required staff to increase internal capacity to attend District Court cases arising from the transfer of some cases from the member firms. • Commenced a DNE legal project involving the transfer of files for that area from the member firm in-house in order to reduce the area's legal spend and improve operational efficiencies. • Reviewed the area of legal cost generally and in particular the Agency's counsel fee structure in order to reduce the Agency's legal costs by reductions in the counsel fees protocol and continue to control of counsel nominations. • Introduced and implemented the key house case and record management system to the in-house unit. • Continued to provide oversight and co-ordination of the member firms. • Designed an in-house system to review and analyse performance information regarding legal services. • Tendered for corporate and operational solicitors. • Continued the legal training programme nationwide to social work/educational welfare professionals in various areas of law that is relevant to their workload. • Further developed Tusla legal staff through the PMDS introduced in 2015 in conjunction with workforce development. |

E2: Finance Directorate

The purpose of the finance directorate is to support and assist the Agency in operating in the most efficient and effective manner possible and within the allocated funding and is responsible for the following:

- Managing accounting, treasury and financial reporting operations.
- Developing and managing internal controls to mitigate risk as well as reporting on Tusla's financial position.
- Developing best practice approaches and systems to inform resource allocation and value for money.
- Reporting to the DCYA on cash expenditure against profiled funding allocation.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|---|
| <ul style="list-style-type: none"> • Roll out 2016 Budget. • Establish Tusla Resource Allocation Model. • Establish Tusla-specific financial regulations. | <ul style="list-style-type: none"> • Financial performance partnering with internal and external stakeholders enabling resources to be managed to deliver effective services within allocated funding in 2016. • The Agency's Annual Financial Statement in respect of 2015 were produced in 2016 within the stipulated time frame and were signed off by auditors. • Established Resource Allocation Programme and delivered first phase of funding utilising resource allocation rules. • Developing business case for funding investment for 2017 as part of the estimates process. • Established the governance of grant aided agency programme to develop clear compliance arrangements. • Commenced the development of new financial regulations for Tusla. • Commenced implementation of Finance Operating Model. • Provided timely and accurate information for inclusion in Integrated Reports for DCYA. |

E3: Human Resources Directorate

The purpose of the HR directorate is to ensure a strategic approach to the management of human resources aligned to the organisation's intended future direction.

The key services that the HR directorate provides are:

- E3.1 Workforce Learning and Development
- E3.2 Employee wellbeing and Welfare
- E3.3 Recruitment and Talent Management
- E3.4 Operations - Organisational Management
- E3.5 Employee Relations and Industrial Relations

E3.1: Workforce Learning and Development

The workforce learning and development unit have responsibility for all learning and development activities within Tusla.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|--|
| <ul style="list-style-type: none"> Develop and implement new strategies and initiatives to develop Tusla as a learning organisation. Develop leadership in Tusla. In addition, workforce learning and development is progressing a range of initiatives such as a bespoke leadership and management development programme; implementation of a national strategy for continuous professional development; and the development a framework for engagement with third level colleges. | <ul style="list-style-type: none"> Launched agency CPD strategy with targets and timelines for agency-wide implementation. Delivered 758 training courses with 10,901 attendees. Provided access to standardised professional training of trainers (QQI level 6) to majority of WLD staff. Commenced strategy for development of coaching skills within the WLD function. Lead establishment of Third Level Liaison Framework forum to collaborate with third level institutions on issues of recruitment, practice placements, undergraduate and post qualification education. Ongoing support of Centre for Effective Services work on the Evidence Informed Practitioner Programme and Social Worker Toolkit. Development of WLD expertise and capacity to utilise digital learning tools and the piloting of a learning management system for online learning. Delivery of leadership development programme to Tusla senior managers and ongoing development of in-house model of leadership development. Ongoing support of agency strategies through targeted L&D plans and activities. |

E3.2: Employee Wellbeing and Welfare

The employee wellbeing and welfare unit provides the necessary systems and processes to enable staff to reach and maintain their full potential to deliver a quality service.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> Establish employee assistance programmes. Develop Tusla Retention Strategy. Develop health and wellbeing. | <ul style="list-style-type: none"> Head of health wellbeing and EAP was appointed. Implemented 'Workpositive Programme'. Setup 'Critical Incident Stress Management' (CISM) for staff. Developed Information for EAP, Tusla hub and staff policies. Developing health and wellbeing projects. |

E3.3: Recruitment and Talent Management

The purpose of the recruitment and talent management unit is to provide oversight to recruitment processes. This unit is responsible for all aspects of HR's people strategy; succession planning, workforce planning, attraction and retention, and vacancy management, including employment monitoring approval process. An analysis of 2016 activity acknowledges the continuing difficulty in recruiting social workers from the limited availability. In addition, whilst Tusla made significant achievements in recruitment of social workers, the increases in social work WTE numbers were offset by staff exits.

| 2016 Business Plan Priorities | Achievements |
|--|---|
| <ul style="list-style-type: none"> • 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. • Tusla brand to be promoted widely in NI, England, Scotland and Wales. • Tusla Garda Vetting Bureau to be fully operational with Authorised Signatories. • Tusla Garda Vetting Bureau to have fully compliant ICT database and operating technology needs. • Tusla Garda Vetting Bureau to commence e-Vetting in Q1 2017. | <ul style="list-style-type: none"> • Tusla Recruit completed its first year in operation, filling 584 posts. • Tusla created specific panels of social workers and commenced its first graduate panel. • The Tusla brand was promoted throughout Ireland and Northern Ireland via visits to 3rd level institutes. Preparations were made to introduce Tusla to England, Scotland and Wales in 2017. • Tusla recruit created Tusla specific regional panels for social work, social care, temporary clerical officer and bespoke panels for various grades. • The grade of family support practitioner was signed off and job specification approved. • Partnership arrangement with Health Business Service (HBS) for large volume admin campaigns agreed, including service provider to facilitate on-line testing. • Review of Tusla portal undertaken and revised ICT system to be progressed in 2017. • Scoping of Garda Vetting and requirements under the Vetting legislation (enacted 29 April 2016) completed. • Staffing for Tusla Central Vetting Bureau advertised and operating principles devised. • On target to commence Tusla Central Vetting Bureau in Q1 2017. |

E3.4: Operations - Organisational Management

HR Operations supports the following services:

- Organisational management;
- Management information;
- HR policies and procedures;
- Payroll processes;
- Managing Health Business Services/HR Shared Services Service Level Agreements;
- Implementation of new legislation and Department Circulars.

| 2016 Priorities | 2016 Achievements |
|---|---|
| <ul style="list-style-type: none"> • Develop and improve the services of the HR directorate. • Parameters for business warehouse developed with further development and rollout for 2017. | <ul style="list-style-type: none"> • Improved HR services developed through a more cohesive and integrated regional and national structure. HR processes and procedures were streamlined across the Agency. • Business partnership arrangement agreed for the service delivery by health business service for payroll, personnel administration, superannuation recruitment and HR systems. |

E3.5: Employee Relations and Industrial Relations

The purpose of the employee relations and industrial relations unit is to develop employee relations policies and strategies to achieve organisational objectives. It also conducts negotiations with the designated employee representative groups.

| 2016 Business Plan Priorities | 2016 Achievements |
|---|--|
| <ul style="list-style-type: none"> • Develop Tusla specific policies relating to employee and industrial relations. • Complete the clerical admin review. | <ul style="list-style-type: none"> • New grievance and disciplinary policies have been agreed with the staff panel. • Clerical admin review complete. • New family support practitioner grade agreed. |

E4: Information and Communications Technology (ICT)

The purpose of the ICT team is to develop and implement an ICT strategy for Tusla and provide day-to-day support to maintain and improve ICT services.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|---|
| <ul style="list-style-type: none"> Develop an ICT Strategy for Tusla to include an ICT operating model. | <ul style="list-style-type: none"> Completed development of Tusla ICT Strategy. Development and implementation of a number of ICT, systems including supporting legal case management. Continued development and support of ICT architecture, infrastructure and support services. |

E5: Estates

The estates team is responsible for the development and implementation of a 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.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|--|
| <ul style="list-style-type: none"> Deliver the Capital Plan to address key priorities for 2016. | <ul style="list-style-type: none"> Ballydowd Special Care development project progressed, project to be completed in 2017. Portrane Special Care Project progressed, project to be completed in 2017. Carlow new social care office completed and operational in 2016. 156 minor works projects on national basis completed to address risk. 'Cars Replacement programme': a further 22 cars were replaced in 2016. Ongoing implementation of minor capital works to address critical health and safety, fire safety and statutory compliance requirements. Projects identified in 2016 and progressed for possible inclusion to the Capital plan for 2017 include developments in Limerick, Drogheda and Cavan. This would include procurement, technical research and legal negotiations. |

E6: Communications

The purpose of the communications unit is to oversee the implementation of the Agency's communications strategy. This involves managing media engagement and ensuring a consistent approach to internal and external communications and branding.

| 2016 Business Plan Priorities | 2016 Achievements |
|--|--|
| <ul style="list-style-type: none"> • Increase public awareness of Tusla's functions and purpose. • Further develop the press office function. • Establish processes to improve internal communications. • Produce a branding protocol. | <ul style="list-style-type: none"> • Communications unit resourced and a strategic plan of activity developed. • Managing the Agency's press office which responds to over 500 media queries a year. • Effective communications and engagement mechanisms identified and established. • Managed the design and publication of a large suite of Tusla documents for directorates and project teams throughout the year. |

E7: Programme Management Office

The programme management office (PMO) is a centralised, coordinating 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.

| 2016 Priorities | 2016 Achievements |
|---|---|
| <ul style="list-style-type: none"> • Identify and develop programme and project management processes, best practices. • Consolidate and co-ordinate standard reporting on Tusla programmes and projects, including regular status reporting meetings. • Development of a PMO target structure including resourcing requirements. • Definition of PMO processes and the development of a PMO handbook. • Development of a consolidated 'Transformation Programme plan'. • Design and delivery of PMO training. | <ul style="list-style-type: none"> • 'Transformation Programme' reporting and governance established. • PMO structure including resourcing and training approach defined and agreed by SMT. • Communications and change activities incorporated into all transformation implementation plans. • PMO processes defined and agreed and Tusla PMO Handbook developed including all associated tools and templates. • PMO ICT Tool Options analysis conducted. • Consolidated Transformation Programme and tracking tool provided. • PMO training provided to programme managers involved in active programmes and projects. |

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 2016 Tusla provided seed funding under the prevention partnership and family support programme to 36 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 4.1.

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 educational 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 4.1: Lundy Model

In 2016, Tusla partnered with Empowering People in Care (EPIC) to establish fora for young people in foster care. In 2016, 13 fora were operating involving 142 young people. These fora facilitate young people in foster care between the ages of 12 and 17 to meet and share their experiences with local practitioners and policymakers.

Parental Participation

Tusla through PPFS has also provided seed funding for 28 parental participation projects in the 17 areas. Two consultations were undertaken with parent groups regarding the *Parenting 24 Seven* materials and web pages. Further consultation sessions are planned for 2017.

4.2 Development of a National Children's Charter

In 2016, Tusla commenced the development of a National Children's Charter in consultation with children and young people. This involved a number of steps outlined below:

- Following a review of children's charters from Ireland and abroad, four consultations were held, and approximately 50 children and young people took part with the consent of their parents/guardians.
- Following the consultations, every statement by these children and young people (approximately 250) was analysed. The analysis identified 14 key themes, outlined in Table 4.1.
- The Draft Charter was drafted based on these 14 themes and contains 17 statements regarding what the children and young people expected from Tusla workers when engaging with the Agency. These statements are reflected in Tusla's 13 commitment statements in the charter.
- Follow-up consultations with these young people will take place in early 2017 and publication of the charter is due in 2017.

Complaints and Feedback

Table 4.2 outlines the number of complaints received by the Agency.

| Year/Quarter | Total |
|-------------------|--------------|
| Q1 2016 | 221 |
| Q2 2016 | 338 |
| Q3 2016 | 306 |
| Q4 2016 | 307 |
| 2016 Total | 1,172 |

Table 4.2: Number of complaints received by the Agency

Table 4.3 is an analysis of 440 complaints received by Tusla, outlining the trends in relation to the complaints received.

| Theme | % |
|---|-------|
| Lack of response/no response to communications/poor communication | 28.9% |
| Insufficient service | 25.7% |
| Behaviour - Staff attitude | 10.9% |
| Breach of procedure/policy/standards | 9.5% |
| Unfair treatment | 5.2% |
| Tusla assessments and reports | 5.2% |
| Lack of consultation with service user | 5.0% |
| Delayed response/decision | 4.5% |
| Discrimination | 1.4% |
| Poor record keeping | 0.5% |
| Poor condition of building | 0.2% |
| Negligence | 0.5% |
| Delivery of Information | 2.5% |

Table 4.3: Analysis of 440 complaints received by Tusla

Feedback

Tusla does not systematically record positive feedback. This is something we hope to remedy in 2017. However, here are some samples the positive things people have said in 2016:

Child “I really appreciate the work the social worker has done to support me”.

Service user “I have been in contact with a social worker and her advice and help has been fantastic as has all the people I have dealt with and would like to say a huge thanks to all concerned”.

Child in Care “My social worker listens to me”.

Service User “I’d like to lodge a thank you message and note of appreciation to the Tusla Regional Adoption Service in Sligo.”

Foster Carer “Have had extensive dealings with the social work department but the social worker really did go the extra mile and it was much appreciated”.

Child in care “I have no worries and I feel safe”.

Positive feedback is also received from other sources such as guardians ad litem, the office of the ombudsman and judges.

Parliamentary questions and representations

Table 4.4 outlines the number of parliamentary questions and representations received per quarter.

| | Parliamentary Questions | Representations | Total |
|-------------------|-------------------------|-----------------|------------|
| 2016 Q1 | 30 | 61 | 91 |
| 2016 Q2 | 92 | 36 | 128 |
| 2016 Q3 | 70 | 38 | 108 |
| 2016 Q4 | 73 | 55 | 128 |
| 2016 Total | 265 | 190 | 455 |

Table 4.4: Number of parliamentary questions and representations received

Freedom of Information Requests

Table 4.5 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.

| Area | FOI requests received in 2016 |
|---------------------|-------------------------------|
| Corporate | 107 |
| West | 272 |
| Dublin North East | 198 |
| Dublin Mid-Leinster | 226 |
| South | 310 |
| Total | 1,113 |

Table 4.5: Number of FOI requests received

5.0 Strengthening Quality and Risk Systems

In the Corporate Plan 2015-17, 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 2015 and 2016, Tusla made progress in establishing these systems. Figure 5.1 below outlines the strategic framework by which the Agency has approached implementing these systems. Each feature within the framework is described in this section.



Figure 5.1: Quality and risk systems strategic framework

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, learning and minimise the negative effects of risk and incidents on the achievement of the organisation’s objectives.

Quality Reviews and Service Monitoring

Tusla has established a team that proactively reviews the quality of all services. This 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.

Health and Safety Management System

The establishment of a health and safety management system throughout the Agency will promote a safer working environment and practices for staff in line with our statutory obligations and other applicable requirements. The integration of robust health and safety policies and controls across all Agency functions will continue throughout 2017.

Quality Improvement Framework

Tusla has established a team that proactively reviews the quality of all services and provides a critical internal assurance function to the Tusla Senior Management Team and Board. This 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. 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 Quality Improvement Framework'.

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. 2017 will see further development of the systems and processes in place for performance reporting.

Protected Disclosures

In line with the 'Protected Disclosures Act, 2014' the Agency established a system for staff to make protected disclosures in 2016. This system supports any staff member to make disclosures to senior management or to external bodies regarding wrongdoing. This system can facilitate the prompt identification of risks.

In 2016, the Protected Disclosures Recipient (PDR) was Brian Lee, Director of Quality Assurance. The PDR received a number of disclosures in 2016, two of which resulted in a full investigation. The Chair of the Board concluded a full investigation from a disclosure made 2015. The outcome of these investigations have lead to service and governance improvements.

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 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 Senior Management Team in 2016. It also provides an overview of Tusla's compliance with the 'Code of Governance for State Agencies 2016'.

6.1 Tusla Board

The Board is the governing body of the Agency and was first established on 1 January 2014. The membership of the Board comprises of a Chairperson, a Deputy Chairperson and seven ordinary members. Board members are appointed by the Minister. The Board is a competency based Board providing a range of particular skills, expertise and experience in matters connected with the Agency's functions.

The Board is responsible for the appropriate governance of the Agency. It ensures that the Agency has effective systems of internal control, statutory and operational compliance and risk management. These provide the essential elements of effective corporate governance and compliance.

The Board has a formal schedule of matters specifically reserved for it for 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.
- Delegation of Board functions to the CEO.

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 Board itself.

Changes to the Board in 2016

In 2016 the Board welcomed the appointment of Paul White (3rd February) and Emer Egan (21st July) as members of the Board. Gary O'Donnchadha stepped down from the Board on the 21st March and was replaced by Emer Egan on the 21st July. Noel Kelly resigned from the Board on the 4th May 2016, creating a vacancy on the Board.

On the 31st December 2016, Emer Egan, Sylva Langford, Rory O' Ferrall and Noelle Spring completed their term of office on the Tusla Board.

Following the process undertaken under the 'Guidelines for Appointments to State Boards' the Minister approved the following appointments/reappointments:

| Board member | Role | Term of office |
|-----------------------------|-----------------|-------------------------------|
| Professor Áine Hyland | Ordinary Member | 1st Jan 2017 to 31st Dec 2019 |
| Deirdre Kiely | Ordinary Member | 1st Jan 2017 to 31st Dec 2021 |
| Pat McLoughlin | Ordinary Member | 1st Jan 2017 to 31st Dec 2020 |
| Rory O'Ferrall ² | Ordinary Member | 1st Jan 2017 to 31st Dec 2019 |
| Tony Rodgers | Ordinary Member | 1st Jan 2017 to 31st Dec 2021 |

The Board met 12 times in 2016, attendance is outlined as follows:

| Board member | Role | Meetings attended |
|---|---------------------------|-------------------|
| Norah Gibbons | Chairperson | 11 |
| Gary Joyce | Deputy Chairperson | 10 |
| P.J. Fitzpatrick | Ordinary Member | 10 |
| Sylda Langford | Ordinary Member | 11 |
| Rory O'Ferrall | Ordinary Member | 11 |
| Gary O'Donnchadha (<i>until 21 March 2016</i>) ³ | Ordinary Member | 0 |
| Emer Egan (<i>from 21 July 2016</i>) ⁴ | Ordinary Member | 5 |
| Noelle Spring | Ordinary Member | 9 |
| Paul White (<i>from 3 February 2016</i>) ⁵ | Ordinary Member | 10 |
| Noel Kelly (<i>until 4 May 2016</i>) ⁶ | Ordinary Member | 4 |

Board Committees

Four Board committees with specific responsibilities support the activities of the Board in governing the Agency:

Quality Assurance and Risk Committee

The Committee focuses primarily on quality assurance and service delivery risk matters, and supports the Board's oversight of the quality and safety of services provided to children and families by the Agency. A summary of corporate risks and control is provided in Appendix III.

The committee met five times in 2016.

Quality Assurance and Risk Committee membership and attendance is as follows:

² Rory O'Ferrall was reappointed for a second term

³ Gary O'Donnchadha was a Board Member until the 21st March 2016 and was eligible to attend 3 meetings.

⁴ Emer Egan replaced Gary O'Donnachada and was eligible to attend 5 meetings.

⁵ Paul White was appointed on 3rd February and was eligible to attend 10 meetings.

⁶ Noel Kelly resigned on the 4th May and was eligible to attend 6 meetings.

| Board member | Role | Meetings attended |
|---|--------------------|-------------------|
| Sylda Langford | Chairperson | 5 |
| Noelle Spring | Committee Member | 4 |
| Emer Egan ⁷ | Committee Member | 2 |
| Gary O'Donnchadha ⁸ | Committee Member | 0 |
| Bernadette Costelloe (Independent member) | Committee Member | 5 |
| Tony Rodgers ⁹ | Committee Member | 2 |

Audit Committee

The Audit Committee supports the Board by monitoring the Agency's compliance with its statutory functions and the effectiveness of the corporate governance, financial management, procurement and internal audit arrangements.

The committee met six times in 2016.

The Audit Committee membership and attendance is as follows:

| Board member | Role | Meetings attended |
|-------------------------------------|--------------------|-------------------|
| Rory O' Ferrall | Chairperson | 6 |
| P. J. Fitzpatrick ¹⁰ | Committee Member | 0 |
| Sylda Langford | Committee Member | 5 |
| Paul White ¹¹ | Committee Member | 4 |
| Richard George (Independent member) | Committee Member | 6 |

Organisation Development, Succession and Remuneration Committee

The Organisation Development, Succession and Remuneration Committee supports the Board to ensure that organisational development policy and strategy is aligned with the Agency's strategic plan and ensures adherence to prevailing government policy in relation to pay and rewards.

The committee met two times in 2016.

The Organisation and Development, Succession and Remuneration Committee membership and attendance is as follows:

⁷ Emer Egan was appointed to the committee on the 28th July and was eligible to attend 2 meetings.

⁸ Gary O'Donnchadha was a member of the committee until 21st March 2016 and was eligible to attend 1 meeting.

⁹ Tony Rodgers was appointed to the committee on the 28th July and was eligible to attend 2 meetings. Mr. Rodgers was appointed to the Board on the 1 January 2017.

¹⁰ P.J. Fitzpatrick resigned from the Committee on the 24th March and was eligible to attend 0 meetings.

¹¹ Paul White was appointed to the Committee on the 24th March and was eligible to attend 4 meetings.

| Board member | Role | Meetings attended |
|--------------------------|--------------------|-------------------|
| Gary Joyce | Chairperson | 2 |
| Norah Gibbons | Committee Member | 2 |
| Noel Kelly ¹² | Committee Member | 1 |

Governance Committee

The Governance Committee supports the Board to ensure that it fulfils its legal and functional responsibilities.

The Governance Committee met three times in 2016.

The Governance Committee membership and attendance is as follows:

| Board member | Role | Meetings attended |
|-----------------|--------------------|-------------------|
| PJ. Fitzpatrick | Chairperson | 3 |
| Norah Gibbons | Committee Member | 3 |

6.2 Tusla Executive

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

During 2016 the Senior Management Team comprised the following individuals:

Gordon Jeyes, Chief Executive – Retired February 2016

Fred McBride, Chief Operations Officer - Up until February 2016

Fred McBride, Chief Executive Officer - Appointed February 2016

Jim Gibson, Chief Operations Officer (Interim) – Appointed March 2016

Colette Walsh, Director of Human Resources

Brian Lee, Director of Quality Assurance

Pat Smyth, Director of Finance

Gerard McKieran, Director of Change and Special Projects – Retired September 2016

Cormac Quinlan, Director of Policy and Strategy (Interim)

Eibhlin Byrne, Director of Educational Welfare Services (Interim) – until April 2016

6.3 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.

On the 1st September 2016 a new 'Code of Practice for the Governance of State Bodies' came

into effect. Its provisions supersede the standards previously issued and takes account of governance developments, public sector reform and stakeholder consultations.

The Agency plans to achieve full compliance with the 2016 Code by the end of 2017.

The 2016 Annual Financial Statements and the 2016 Annual Report have been prepared based on the requirements of the 2016 Code.

The Agency will monitor Tusla's compliance with the legal and governance obligations as set out in the Act and the 2016 Code with the assistance of compliance checklists, Governance Committee meetings of the Board and governance meetings with the DCYA.

Code of Governance

The Agency is required under section 5 of the Act to prepare and submit a code of governance to the Minister for Children and Youth Affairs for approval. The Agency's first Code of Governance was approved by the Minister on the 26th of October 2016. The Code of Governance has been updated in order to comply with the 2016 Code of Practice and is scheduled to be submitted to the Minister for approval by June 2017.

Board Strategy Review

The Board held an strategy meeting on the 10th June 2016 to review how the Board directed Tusla during its first 18 months. The Senior Management Team joined the Board to reflect on key strategic issues, the planning process and options for organisation structure.

Board Evaluation

The Board reviewed in detail the recommendations of the external evaluation of the Board and sub-committees which was undertaken in 2015. At the end of 2016 Board members completed a Board self-assessment evaluation questionnaire. The Board will review the outcomes of the self-assessment evaluation at their 2017 strategy day.

7.0 Human Resources

The following section provides an overview of Tusla's workforce during 2016.

7.1 Workforce Breakdown

At year end there were 3,597 whole time equivalent employees (WTE) working in Tusla. The total headcount at the end of 2016 was 4,045. Table 7.1 provides an overview of the workforce in terms of staffing category and WTE.

| Staff by Grade | Total 2016 |
|-------------------------|-------------|
| Social Work | 1,457.67 |
| Social Care | 1,119.37 |
| Admin and Management | 625.03 |
| Family Support | 162.61 |
| Other Staff Grades | 146.37 |
| Educational and Welfare | 86.22 |
| Overall Total | 3597 |

Table 7.1: Employment by WTE and grade group

7.2 Absenteeism

In 2016, the level of absenteeism showed a slight increase from 2015. This is being addressed through enhanced monitoring and governance in the area and a continued focus on employee health and wellbeing and '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-15 | Dec-16 |
|-------------------------------|--------------|--------------|
| Residential Services | 8.22% | 9.26% |
| Corporate & National Services | 1.08% | 2.70% |
| Dublin Mid Leinster | 5.34% | 5.29% |
| Dublin North East | 3.55% | 4.20% |
| South | 4.64% | 4.38% |
| West | 5.33% | 5.30% |
| Total Absenteeism Rate | 5.23% | 5.50% |

Table 7.2: Absenteeism by Grouping, Dec 2015 – Dec 2016

7.3 Employment Monitoring Group

In 2016, the Employment Monitoring Group (EMG) operated 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.
- Consideration and approval of new service development requests.
- Consideration and approval of re-grading of approved positions.
- Approval of the manner by which the contract is to be filled, i.e. permanent/fixed term.
- Approval of temporary appointments to a higher position.

7.4 Employee Relations

Throughout 2016 there continued to be positive engagement with staff representative bodies. The National Joint Council was established in 2014 and continues to meet every two months as a forum for discussion on relevant staff and management issues.

As part of the framework agreement, a clerical administration review is now complete.

The memorandum of understanding (MOU) agreed between Tusla and the HSE on the establishment of the Agency continued to operate throughout 2016, thus assisting in ongoing employee relations matters at a regional level.

As part of our HR Strategy we are developing an IR strategy for the organisation which we hope will be complete in 2017.

7.5 Workforce Learning and Development

Workforce learning and development (WLD) had responsibility for all learning and development activities within Tusla throughout 2016. A full programme of learning and development activities, identified through training needs analysis of staff and organisational priorities was provided throughout 2016.

WLD have worked with service managers during 2016 in the development of learning and development plans to support various agency strategies, e.g. the child protection and welfare, ppfs and alternative care strategies. In addition, WLD lead on a range of initiatives such as leadership development programmes for senior managers, coaching development to support learning, and commencement of Tusla engagement in digital learning.

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 memorandum of understanding throughout 2016 and 2017. Tusla took part in a Critical Incident Stress Management (CISM) Work Positive Review in the later stages of 2015 and introduced workpositive supporting employee engagement and wellbeing in 2017.

7.7 Tusla Recruit

Tusla Recruit's workforce focus in 2016 included the formation of Tusla specific clerical officer panels, large scale recruitment of social care workers and graduate social work recruitment campaigns. The initial promotion of Tusla within third level institutions in 2016 generated strengthening of Tusla's presence in the market as an employer of choice, resulting in interested candidates from Northern Ireland.

HR have increased activities to attract new social work graduates in Northern Ireland and commenced in Scotland this year to supplement the limited supply of graduates in the Republic of Ireland. However, in order to allow social worker to focus on core duties, it is recognised that Tusla may need to focus on alternative skills mix incorporating social care and administration, with potential to include integration of the family support practitioner role as appropriate.

8.0 Financial Summary

Tusla spends public funds on the provision of services to children and families. The duties relating to expenditure incurred by Tusla are stringent in terms of accountability and transparency in order to fulfil the Agency's responsibility for funding received from the Department of Children and Youth Affairs (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 2016 and these have been audited by the Comptroller and Auditor General.

The Annual Financial Statements contain the following reports:

- Board Members' Report for 2016.
- Statement of Board responsibilities in respect of the Annual Financial Statements.
- Statement on Internal Control.
- Report of the Comptroller and Auditor General.
- Financial Statements for 2016.
- 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 Department of Children and Youth Affairs, and Section 13 (2) (d) of the 'Child and Family Agency Act 2013', the Chairperson of Tusla made a statement to demonstrate Tusla'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 Tusla, including the roles and responsibilities of the Board and Chief Executive Officer (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. Tusla'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 Tusla 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 Child and Family Agency that have ensured these responsibilities have been met.

The Annual Financial Statements (AFS) and financial position is summarised in tables 8.1 and 8.2 respectively. The full AFS is published as a separate document.

| | 2016 | 2015 |
|--|---------|---------|
| | € | € |
| | '000 | '000 |
| Revenue | 665,707 | 658,209 |
| Expenditure - Pay and Pensions | 239,081 | 233,970 |
| Expenditure - Non-Pay | 426,000 | 416,096 |
| Net Operating Surplus / (Deficit) for the Year | 626 | 8,143 |

Table 8.1: Statement of revenue income and expenditure for the year ended 31st December 2016

| | 2016 | 2015 |
|--|---------|---------|
| | € | € |
| | '000 | '000 |
| Total Non-Current Assets | 66,452 | 80,737 |
| Total Current Assets | 13,586 | 13,365 |
| Total Current Liabilities | -49,402 | -51,956 |
| Restricted Contributions (Deferred Income) | -620 | -351 |
| Capital and Reserves | 30,016 | 41,795 |

Table 8.2: Statement of financial position as at 31st December 2016

Appendix I

Corporate Plan 2015–17 Short Term Outputs

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

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 'Child Protection Notification System' 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 assessment, consultation and therapy service (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 prevention, partnership and family support (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 educational welfare service 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 multi-media 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 professional development plan 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. |
| Non-compliant health and safety management system and programme across the Agency. | <ul style="list-style-type: none"> Health and Safety review completed. Recruitment of health and safety team commenced. System for tracking non-compliance with HSA. Safety management system project plan under development. Site specific risk assessments conducted on a regular basis. |
| 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 & recruitment plan developed. Recruitment of Agency staff on 3 year contracts. Regular performance monitoring at all levels. Additional budget allocation for staffing from DCYA. |
| There is a risk of failing to meet statutory obligations (FOI, data protection, complaints) and codes of practice for governance due to insufficient resources, capacity and systems 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 in 2016. |
| There is a risk to the quality and continuity of service delivery due to additional demands being placed on the Agency as a result of pending 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. |

| Risk Statement | Controls |
|---|--|
| <p>Risk to the safety and wellbeing of children due to 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.</p> | <ul style="list-style-type: none"> • ACTS specialised clinical service in place. • Some psychology provision is sourced from private practitioners in some cases of high need. • Joint working group established with the HSE to develop working protocol. • Capacity and needs analysis being conducted. |
| <p>There is a risk to consistency and quality of service user experience due to inconsistent implementation and application of policies, procedures and protocols throughout the Agency.</p> | <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. • QA quality reviews and performance reports to identify risks and improvements. • Child protection and welfare programme initiated. |

