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As for other public service organisations, 2020 was a year like no other. The pandemic dominated global consciousness and, at local level, threw up unheard-of new challenges. This was especially true for Tusla because of the complexity and sensitivity of so much of its work in striving to care for the welfare and ensure the protection of so many children and families. It is a tribute to the dedication and professionalism of our staff that, notwithstanding the shock to routine life and work practices, every reasonable effort was made to discharge our mandate from government. The initial refocusing of our priorities during the pandemic was led by our Chief Executive, Bernard Gloster, and adapted along the way, as necessary. It is too early yet to analyse the legacy of the worst and most prolonged disruption in recent history.

2020 was also the year when we bedded down the governance reform of Tusla and initiated a comprehensive programme of reform of the Agency itself, authored by the Chief Executive after detailed iterations with the Board. Whilst these reforms were not finalised at the year’s end, we were enabled to complete a new three-year corporate plan and to make gradual improvements in the functioning of the Agency. Towards this end we have had the wholehearted support of our new Minister, Roderic O’Gorman, and we look forward to working with him in the year ahead to finalise the reform programme.

The pandemic has exposed the breadth of services and activities provided by the Agency and the value of working with the many voluntary organisations in providing these vital services.

I wish to thank the Minister, Roderic O’Gorman, and the Secretary General of the Department, Fergal Lynch, and his staff for their support throughout a uniquely difficult year. I also wish to thank my Board colleagues and Board Secretary for going the extra mile in 2020 to ensure that Tusla continues to strive to keep children safe and support families who require our services.

Pat Rabbitte
Chairperson
Message from our CEO

2020 was a year which fundamentally altered our world and all that we had come to expect as routine.

Reporting on the year that was, is very much underscored by the pandemic and all that it meant for us as a public service organisation responsible for the care, welfare and protection of so many children and families. It is, however, important to recognise that despite the worst and most prolonged global event in recent history, many essential services continued to be provided and the Child and Family Agency (Tusla) was and continues to be central to that effort. This Annual Report demonstrates a breadth of activity and work carried out in a heavily restricted social context. While the report is an instrument of accountability for our work, it is also an opportunity to inform the public of the importance of our many tasks, all of which are ultimately about keeping children safe and supporting families and communities through a range of professional and highly regulated services.

Some 5,000 people in Tusla work with several hundred funded voluntary and professional organisations every day in providing vital services. The willingness of all the professionals involved is evident in many previous reports. Their ability to rise to the challenge, change roles, change hours, and change locations was heartening in 2020. Staff, funded organisations, unions, statutory partners in the HSE, An Garda Síochána, schools and professional associations without fail supported Tusla as we focused on three immediate pandemic response priorities: Child Protection, Responding to Domestic and Sexual Violence, and Maintaining Children in Care. I offer sincere thanks to all.

As the year progressed, we increasingly restored other key priorities in supporting the early years sector to re-open, schools to return and key adoption support services to continue. Working with the Minister and the expanded Department of Children, our response to the pandemic moved from crisis to ‘normal’ working, a true measure of an essential and agile service.

2020 also saw the conclusion of our three-year corporate plan and we continued with our preparation for the coming three years. The Agency is now advancing through our continuous improvement plans, and new ways of working are becoming a reality in all that we do. The continuation of the impact of COVID-19 into 2021 is a concern for all but, as can be seen from our account of 2020, it will not limit us in the provision and growth of services to the children and families who need us to be there for them.

Bernard Gloster
CEO
Our Vision, Mission and Values

With our three-year corporate planning cycle (2018–2020) coming to an end, we developed our new three-year Corporate Plan 2021–2023 during 2020. As part of the development process, we reviewed and revised our vision, mission and values statements. We did this to ensure that the Agency’s purpose, what we are striving to achieve and how we reflect this in our work, is clear to all. These revised statements are reflected here.

Our Values & Behaviours

Trust
We will be honest, truthful and responsible when providing our services
We will respect privacy
We will seek your feedback and use it to inform how we improve
We will follow through on our commitments

Respect
We will treat people with dignity and fairness
We will collaborate and work in partnership with others
We will be informed and influenced by the opinions and experiences of others
We will communicate in a way that helps others to understand and we will listen to ensure we understand

Kindness
We will show care and compassion with those who need our help
We will help where we see others that require assistance
We will be compassionate in explaining decisions even when the decision is difficult

Empowerment
We will work hard to go the extra mile to help someone achieve their best
We will ensure we continuously learn and develop our knowledge and skills
We will work collectively with our stakeholders to achieve our collective goals
We will work hard with others to find solutions that work

Family Support Services

Children in receipt of a family support service in 2020
Child and Family Support Networks in place at the end of 2020
Meitheal processes requested in 2020

Children’s Services Regulation

Early years services registered with the Early Years Inspectorate at the end of 2020
Inspections of early years services in 2020
Children on the register for home education at the end of 2020
Inspections of non-statutory residential services in 2020

ICT

Additional laptops provided to enable remote working
Mobile devices provided
Staff on Microsoft Teams to support online meetings and collaborations

Footnotes:
1 Based on a response rate of 83%
2 The number of inspections is down 21% (496) on 2019 (2,308) due to the closure of services under COVID-19 restrictions.
3 1,921 applications received for home education in 2020, a three-fold increase on 2019 (617).
In 2020, 647 formal complaints were received, which represents a decrease on complaints received in 2019 (714).

Tusla aims to ensure that 100% of complaints data is available for analysis and has engaged in a programme of improvement concerning data capture to make this a reality. In 2020, 56.87% of complaints had sufficient detail captured to facilitate meaningful analysis. The table below represents this analysis:

<table>
<thead>
<tr>
<th>Complaint Issue</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behaviour or Attitude</td>
<td>11.31</td>
<td>16.89</td>
<td>17.22</td>
</tr>
<tr>
<td>Insufficient Service</td>
<td>15.08</td>
<td>14.80</td>
<td>10.22</td>
</tr>
<tr>
<td>Delivery of Information</td>
<td>9.30</td>
<td>10.61</td>
<td>6.71</td>
</tr>
<tr>
<td>Unfair Treatment</td>
<td>4.52</td>
<td>7.92</td>
<td>6.10</td>
</tr>
<tr>
<td>Lack of Response/Action</td>
<td>8.29</td>
<td>6.88</td>
<td>4.27</td>
</tr>
<tr>
<td>Poor Communication</td>
<td>7.79</td>
<td>6.73</td>
<td>3.21</td>
</tr>
<tr>
<td>Delayed Response/Decision</td>
<td>7.04</td>
<td>5.98</td>
<td>3.51</td>
</tr>
<tr>
<td>Lack of Consultation</td>
<td>3.77</td>
<td>4.04</td>
<td>3.21</td>
</tr>
<tr>
<td>Outcome of Assessment</td>
<td>3.27</td>
<td>2.84</td>
<td>1.07</td>
</tr>
<tr>
<td>Negligence</td>
<td>2.01</td>
<td>2.54</td>
<td>0.91</td>
</tr>
<tr>
<td>No Response to Communication</td>
<td>1.26</td>
<td>2.09</td>
<td>0.77</td>
</tr>
<tr>
<td>Failure to Adhere to Policy</td>
<td>2.26</td>
<td>1.79</td>
<td>1.38</td>
</tr>
<tr>
<td>Poor Application of Standards</td>
<td>2.26</td>
<td>0.75</td>
<td>0.96</td>
</tr>
<tr>
<td>Poor Condition of Building</td>
<td>0.50</td>
<td>0.75</td>
<td>0%</td>
</tr>
<tr>
<td>Failure to Adhere to Legislation</td>
<td>0.00</td>
<td>0.60</td>
<td>0.77</td>
</tr>
<tr>
<td>Poor Record Keeping</td>
<td>0.50</td>
<td>0.60</td>
<td>0.68</td>
</tr>
<tr>
<td>Discrimination</td>
<td>2.26</td>
<td>0.45</td>
<td>1.38</td>
</tr>
<tr>
<td>Telephone Unavailability</td>
<td>9.30</td>
<td>0.15</td>
<td>0.31</td>
</tr>
<tr>
<td>Breach of Procedure</td>
<td>0.75</td>
<td>0.00</td>
<td>4.27</td>
</tr>
<tr>
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<td>0.00</td>
<td>0.16</td>
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Tusla actively seeks out feedback from children, parents and other service users which helps us to understand where we are achieving successes and where we need to improve. To support our commitment to this engagement, Tusla operates a national feedback and complaints service called ‘Tell Us’.

Feedback and Complaints

In 2020, 647 formal complaints were received, which represents a decrease on complaints received in 2019 (714).

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Section 2  
Service Delivery

As an essential front-line service provider, Tusla continued to provide services to support children and families at risk. From the outset, our key service priorities during the pandemic were:

- Child Protection
- Children in Care
- Domestic, Sexual and Gender-Based Violence Services (DSGBV)

For many of the children, young people and families that we work with, supports were changed overnight. Children were not in school for a significant part of the year and could no longer benefit from things like football training or youth clubs, and parents could no longer rely on the physical presence of extended family or neighbours to give a helping hand when things got hard.

It was challenging for staff who, if they were concerned about children, young people and families, could not carry out their role in their usual way by calling to the house and meeting children face to face.

Across all services, staff, partner agencies and service users had to adapt to new ways of working and new ways of interacting, so as to ensure that children and families continued to be protected during this unprecedented time whilst complying with public health advice.

Despite the challenges, with the commitment and flexibility of staff across all services to make use of innovative ways of working in a restricted environment, we continued to deliver high-quality services for children and their families. The following pages provide an overview of this work across our regional and national services.
West

- Partner agencies supported ongoing engagement and communication with children and families.
- Food parcels were delivered to families that were struggling.
- A ‘Fit-Fest’ over three individual events was implemented to support young people who felt isolated and lonely, with their mental health negatively impacted during lockdown (Donegal).
- Promotional activities were instigated across media platforms to attract new foster carers.
- The Co-operation and Working Together project was developed to provide interventions and training in 2021 concerning adverse childhood experiences.
- A new office building was completed in Loughrea, County Galway to accommodate Tusla social workers, family support services, Tusla Education Support Services (TESS) and regional staff.
- The Child and Youth Advisory Panel enabled children and young people to influence and shape this building development.
- Limerick PPFS team, in partnership with ABC Start Right, delivered over 2,500 activity packs to families in need across Limerick during lockdown in March 2020.
- A Fostering and Supported Lodgings campaign was implemented to increase capacity for teenagers aged sixteen and over.
- Systems to allow more creative access were implemented, e.g. facilitating sibling access in outdoor spaces such as playgrounds.
- Thousands of care packages that included food, toys, arts & crafts, school supplies, and other essential supplies were delivered to families across the South.
- There was a focus on hearing the voice of the child in decision making.
- Virtual training of foster carers was conducted online.
- In collaboration with Children’s Books Ireland, ‘play packs’, including books, were delivered to 70 families living in direct provision centres, which also included information on parenting, parenting supports and signposting to local family support services.
- During the summer of 2020, the youth group from The Mill Family Resource Centre in Co. Kilkenny painted a mural on the walls of the centre.
- Engaging with vulnerable families was prioritised in order to support them in maintaining family life throughout the difficult restrictions.

South

- Child in care reviews and foster care reviews continued and were facilitated through teleconferencing and videoconferencing.
- Community families were a priority for Monaghan in 2020. This resulted in developing a partnership between Tusla, Education and Training Boards (ETB), and Monaghan Integrated Development to develop a Cultural Champion programme, to build capacity and support for vulnerable children and families from new communities. The initiative was also extended to Cavan with the ETB and County Cavan Local Development Board.
- Social media channels were used to continue our work with children and families, their networks, and other professionals.
- Louth/Meath Social Work Department was awarded the ‘Investing in Children Award’ in March 2020, reflecting the high level of youth participation work and focus on hearing and responding to children and young people’s voices.
- Staff in PPFS worked with partner agencies and schools in food distribution and providing activity packs to children, especially those in homeless accommodation.
- Student placements for both social workers and social care workers continued.
- Recruitment of foster carers continued.
- A peer-reflective practice group for new staff in the area was initiated.

Dublin North East

- Community families were a priority for Monaghan in 2020. This resulted in developing a partnership between Tusla, Education and Training Boards (ETB), and Monaghan Integrated Development to develop a Cultural Champion programme, to build capacity and support for vulnerable children and families from new communities. The initiative was also extended to Cavan with the ETB and County Cavan Local Development Board.
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- Student placements for both social workers and social care workers continued.
- Recruitment of foster carers continued.
- A peer-reflective practice group for new staff in the area was initiated.

Dublin Mid-Leinster

- The Regional Assessment Fostering Team (RAFT) continued to work with all DML areas to maximise fostering recruitment during the COVID-19 pandemic.
- The Family Welfare Conference Service in DML continued to empower family members and communities in keeping their children safe from harm.
- Dublin South Central reduced its unallocated case numbers by over 50% from 2019 to 2020.
- Social media and videoconferencing platforms were used to enable age-appropriate contact to be maintained with families.
- Staff in PPFS worked with partner agencies and schools in food distribution and providing activity packs to children, especially those in homeless accommodation.
- Student placements for both social workers and social care workers continued.
- Recruitment of foster carers continued.
- A peer-reflective practice group for new staff in the area was initiated.
Children’s Residential Services (CRS)

- A new respite centre, Sos Beag, Inchicore, Dublin, opened in Q1 2020 following extensive refurbishment work to transform it into a modern, fit-for-purpose respite centre for young people.

- CRS South hosted an event for 100 attendees in February 2020 to launch the Welltree Outcomes Framework (a methodology used in CRS to measure the progress of a child’s placement while in our care).

- A virtual baking competition was held across ten of our private providers’ children’s residential centres in Q2 2020.

- Two projects led by CRS were finalists at the Enterprise Risk Network Recognition Awards 2020, which recognise continuous improvement and progress in the management of risk in state authorities.

- Young people and staff continued with the Moyle Crescent’s Super Garden project and were creative in making great use of the space available.

- Young people attended Carlingford Adventure Centre, which incorporated a combination of classroom activities and those mainly focused on outdoor learning to develop social skills and team working, personal and interpersonal skills and actively encourage young people to learn new skills.

- Children’s Residential Services were successful in their application for EU funding to support the development and production of a youth-friendly version of policies. The project will include a consultation process with young people that will take place in 2021.

- In 2020, the suite of policies for Children’s Residential Special Care was completed.

- Eleven CRS staff completed their Bachelor of Arts (Honours) degree in Leadership and Management in Social Care at the Technical University of Dublin, Blanchardstown, and graduated in November 2020.

Tusla Education Support Service (TESS)

A significant development for TESS in 2020 was the announcement that functions of TESS and the Alternative Education Registration and Assessment Service (AERAS) would be transferred to the Department of Education, this will ensure policy direction and oversight of the service will come from the Minister of Education, with operational provision remaining integrated within Tusla’s service and through its response pathways. In addition, the service also had to adapt in response to the COVID-19 pandemic.

- All TESS staff across the three strands mobilised quickly to identify and support the most vulnerable students and families right across the education system (known already to our teams across the country or identified as vulnerable by their schools) due to the impact of COVID-19.

- A child welfare approach was taken to attending to the presenting needs, ranging from the provision of food parcels, providing educational materials, providing information, supporting families to other support services and assisting students with ICT resources to enable them to connect with remote learning opportunities provided by schools between March and June.

- There was quick adaptation to remote working, remote team meetings, and supervision and continuous professional development online.

- TESS worked intensively with the Department of Education and the wide range of other education partners throughout 2020 to respond to emerging issues relating to educational welfare.

- TESS supported students to return to school (August/September) and quickly identified those students and families who were finding the return to school challenging – more than 99.5% of students returned and re-engaged with the school.

- In October/November, a comprehensive review was undertaken with all schools to ensure that all possible supports were offered to them and their families.

Domestic, Sexual and Gender-based Violence Services

- In 2020, €25.3m ‘core’ funding, along with €2m COVID-19-related funding was provided by Tusla to over 60 non-governmental organisations to provide services to victims of domestic, sexual and gender-based violence (DSGBV). Forty-three organisations provided specialist support services to victims of domestic violence, including 22 services providing safe emergency accommodation. Sixteen Rape Crisis Centres provided specialist sexual violence services.

- Tusla also worked in partnership with organisations to undertake collaborative population-focused work, e.g. with children and ethnic minorities.

- DSGBV services were significantly impacted by the COVID-19 pandemic, both in terms of increased demand for services and the requirement to re-organise services to meet public health requirements.

- All Rape Crisis Centres and domestic violence support services used ICT and phone platforms to maintain support and therapeutic services, with good take-up by service users.

- Social distancing requirements had a significant impact on service delivery within refuges, with many units out of operation, particularly those with shared facilities.

- Tusla identified DSGBV services as one of the three highest-priority services at the outset of the pandemic and an additional €2m COVID-19-related funding was allocated to maintain front-line services and routine contact with front-line services was enhanced.
• Alternative arrangements, including access to social housing units through local authorities, private rental sector accommodation, and other local solutions meant that the number of safe accommodation units remained in line with the pre-COVID-19 situation after the initial crisis period. Maintaining multi-site supports did, however, bring a range of challenges for all concerned.

• Two new refuge centres opened in 2020, providing eight additional family units. These were the new Saoirse refuge at Rathcoole, Co. Dublin, and the redeveloped Cope Galway refuge.

• New premises opened for Wexford Rape Crisis Centre and Athlone Rape Crisis Centre. Wexford Rape Crisis Centre’s new refuges. This approach, undertaken initially to support COVID-19 responses, was developed into a formalised process through engagement with the domestic violence services sector.

Adoption services

While 2020 and related COVID-19 restrictions presented the team and service significant challenges, the service continued to operate to near normal level right through the pandemic, with a number of activities moving online successfully.

In our adoption assessment and support service, we maintained focus on our statutory responsibility to ensure children continued to achieve legal permanence through domestic adoption, inter-country adoption, step-parent fostering and fostering to adoption. The service received 158 applications for adoption across the areas of domestic, step-parent, inter-county and fostering to adoption. All children eligible and assessed for adoption in 2020 had their adoption orders granted.

Further improvements included:

• Further integration of practice with our colleagues in child protection and welfare services to improve the lives of children in care seeking permanence through adoption. A newly appointed dedicated fostering-to-adoption manager post was also established to ensure that fostering-to-adoption applications are progressed in a timely fashion for all children where adoption is in line with their best interests.

• The high level of applications for fostering to adoption where the child was over sixteen at the time of application was significantly challenging to both the Agency and the Adoption Authority. In response, the two agencies have commenced a joint regular case management meeting which successfully progresses cases to ensure no child misses an opportunity to benefit from a permanent lifelong adoptive family.

• Ongoing support was given to adults through our information and tracing service, including ongoing support to adults affected by illegal birth registration. In 2020 the service also finalised our St Patrick’s Guild Illegal Birth Registrations project and reported on this extensive work to the Minister.

• Continued excellent working relationships and a collaborative approach to legislative and policy development with the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) Adoption Policy occurred throughout the year and in particular in respect of the Mother and Baby Home Act and forthcoming information and tracing legislation.

• Adoption Amendment Act 2017: Introduction to Permanency Planning Handbook was completed in 2020 and will be published in 2021.

• Dormant account funding was awarded for the third year running and this continues to support the expansion of vital national post-adoption therapeutic services in collaboration with our funded partners in Barnardos.

• Extensive preparation, with data protection and ICT colleagues, took place to support the transfer of the Mother and Baby Home database from the Mother and Baby Home Commission of Investigation.

• The service also maintained a focus on quality improvement, and driving greater consistency and responsiveness through the development of a full standardised national suite of policies, procedures and practice guidance, and the implementation of a quality-improvement plan arising from an audit of adoption committees.

Separated children seeking international protection

• Tusla’s social work team for separated children seeking international protection received 80 referrals in 2020.

• Fifty-one of those young people were brought into care. Eighteen young people were reunited with their families.

• Our aftercare service has continued to provide a high level of support, with over 100 care leavers actively engaged with and supported by the service.

• In June of 2020, eight unaccompanied minors were received from Greece. Social workers from the team met the young people in September of 2019 to conduct welfare assessments. The team continued to work with Greek authorities, the European Asylum Support Office, and new cooperation was established with the Irish Refugee Protection Programme.

• In late 2020, an additional 14 minors were identified, nominated to be matched with Ireland, and accepted for the relocation to Ireland programme.

• Foster carers across the country have been recruited to help meet the needs of these young people when they arrive in 2021.

Services to vulnerable groups

• The Tusla NTRIS (National Traveller and Roma Inclusion Strategy) Employment Support Scheme was launched in August 2020. A memorandum of understanding was agreed between Tusla and the Department of Further and Higher Education, Research, Innovation and Science (DFHERIS) to support five students annually from the Traveller and Roma community in undertaking social work and social care courses.

• The Homeless Liaison Service developed a guidance document for families and services to provide a framework of responses and supports in circumstances where homeless parents/guardians were not able to provide care to their children during the pandemic.

• In collaboration with the CYPSCs and the Early Learning Initiative (National College of Ireland), Tusla rolled out the ‘My Place to Play’ project to increase children’s developmental activities in 2020, including tummy time and sensory development, and to encourage parent-child bonding in limited accommodation spaces.
Children first information and advice service (CFIAS)

- The CFIAS has adapted several briefing resources for delivery in a virtual learning environment to build capacity and enable continued service delivery to funded, partner and other agencies while complying with public health guidelines during the pandemic.

International social service (ISS)

- The ISS dealt with 183 referrals in 2020, 89 of which were outgoing referrals from Tusla social workers to other ISS member countries.
- The service also dealt with approximately 150 queries from Tusla social workers and other jurisdictions.
- With the UK leaving the EU at the end of 2020, it is no longer subject to the Brussels II regulation, resulting in a new procedure for dealing with cases under the Hague Convention 1996 needing to be developed.

Assessment consultation and therapy service (ACTS) & national interagency prevention programme (NIAPP)

- Throughout 2020 and the COVID-19 pandemic, ACTS maintained a face-to-face clinical service to the young people in special care.
- The service continued to grow the community referrals offering a clinical service to young people at risk of special care or detention.
- The service offered clinical training placements to various disciplines, including social work students and clinical and counselling psychology trainees.
- The service completed a suite of draft policies, procedures, protocols and guidelines (PPPGs).
- In collaboration with residential care colleagues in Special Care, ACTS are rolling out Storm Skills Training in suicide prevention and self-harm mitigation to all staff in both services.
- NIAPP developed an online counselling programme.
- NIAPP's sixth initiative was developed in Galway/Roscommon/Mayo with another two initiatives, one in Sligo/Leitrim/West Cavan and one in the Midlands in the early stages of development. These joined NIAPP's five existing initiatives in Cork, Donegal, Louth/Meath, Cavan/Monaghan and Southside (South Dublin, Kildare and Wicklow).

National Developments 2020

Out of hours & children in care services (foster care, aftercare)

- TUSLA Out of Hours Service (OOHS) continued to provide emergency responses throughout the pandemic. The team carried out home visits, spent time with children and young people in settings such as hospitals, Garda stations, and airports, considering COVID-19 safety measures as part of their overall practice and recruiting additional relief staff from local social work departments to ensure additional service demands were met.

- The National Aftercare Implementation Project Group (NAIPG) revised and implemented the National Aftercare Policy 2020, to ensure robust governance structures, processes and policies to deliver aftercare services.
- Several children initially placed in short-term care through the panel now remain with their carers, providing a positive outcome for the children concerned.
- Additional temporary residential resources were assigned to the OOHS to ensure placement options for children and young people, with four residential centres initially available to support children aged 0–18 and agreement was reached with two providers to ensure those services would be operational for 24 hours a day.
- The campaign won the prestigious National Public Relations Awards. The Awards for Excellence in Public Relations, organised by the Public Relations Consultants Association and the Public Relations Institute of Ireland, celebrate the very best of Irish public relations and communications work over the previous 12 months.
- In response to COVID-19, a temporary National Emergency Foster Care Panel (NEFCP) was established by Tusla to centralise foster placements and to respond to emergency requests.

- Emergency regulations were sought, approved, and have been extended until May 2021. These regulations allowed for establishing a National Emergency Foster Care Committee and the assessment of applicants to foster using a COVID-19 Emergency Interim Assessment, which provides approval status for foster carers and relative carers to provide emergency responses to children.
- The CPWS reached the halfway mark in its implementation in 2020. The cornerstone of the strategy is the national approach to practice, Signs of Safety (SoS) and additional system-wide changes to support the practice implementation (in HR, policy, ICT, learning and research). The key milestones reached in 2020 include:

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- In response to COVID-19, a temporary National Emergency Foster Care Panel (NEFCP) was established by Tusla to centralise foster placements and to respond to emergency requests.
Practice-Aligned Standard Operating Procedures for Child Protection and Welfare

A special project team was established by the CPWS with staff from NCCIS, ICT, and the Programme Management Office to align existing operating procedures, standard forms and the information system with our national approach to practice. The work completed included:

- A fully aligned system with national deployment in July 2020.
- The development and implementation of an eLearning programme to support the changes, with an emphasis on immediate safety planning and ongoing planning which fulfilled and completed the actions for both Business Plan and HQA Oversight Group commitments. The changes also allowed for the case prioritisation system to come into effect from July, capturing the priority based on workers’ professional judgement following scaling of the child’s safety and the context of the referral.

Staff Survey

The second staff survey report was compiled and completed with commentary and analysis by Professor Eileen Munro. The results were disseminated, and Service Directors engaged with their teams locally to discuss the findings and provide feedback to the Programme Team. The survey demonstrated improved confidence amongst staff in using Signs of Safety and support for group supervision, and raised concerns about the extensive caseloads carried by workers.

CPWS Learning Team

The staff survey emphasised the importance and relevance of having practice support and implementation leads available to practitioners. In order to meet the challenges of COVID-19, a suite of practice workshops was designed and delivered virtually. These workshops addressed the most immediate needs of practitioners.

- Online. Plans are under way to develop a formal suite of practice workshops was designed and delivered virtually. These workshops addressed the most immediate needs of practitioners.
- Implementation of the National Childcare Scheme continued, as well as engagement with DCEDIY and Pobal to ensure the successful roll-out of the scheme – 625 children accessing the scheme through Tusla in 2020.
- A significant amount of training and capacity building work was revised for virtual delivery, including restorative practice, infant mental health networks, early years mentoring and support services.
- Tusla received funding under the DCEDIY What Works initiative to develop and implement a Traveller Parenting Support programme across each of its four regions. In each region, PPFSS is partnering with a local Traveller community organisation to employ a Family Link Worker who will work with Traveller parents. Representatives from the Traveller community are involved in the oversight and implementation of this initiative.

PPFS, along with Amárach Research, began work on reviewing the Tusla Parenting24Seven initiative to ensure that it meets the needs of parents.

DCEDIY provided ‘What Works’ funding for a Level 8 Certificate in Prevention, Partnership & Family Support. This Level 8 module in PPFSS was administered twice in 2020 with Carlow Institute of Technology and will be available online again in 2021. It was designed to develop professionals engaged in the Child and Family Support Network (CFSN), from the community, voluntary and statutory services.

Implementation of the Tusla Child and Youth Participation Strategy 2019–2023 was ongoing:
- 55 Children and Young People’s seed funding initiatives were completed across the four regions; 13 new Investing in Children Membership Awards were achieved in 2020, alongside 14 renewals. These awards give national recognition and celebrate examples of imaginative and inclusive practice, where children and young people engage in dialogue leading to change.
- Tusla Commissioning Resource for Children and Young People was launched in 2020. It was developed for and by children and young people in partnership with Limerick PPFSS.

Barnahus Model

- The implementation of the Barnahus model of support for children who have experienced sexual abuse has seen the Galway Barnahus develop beyond a pilot to support children in the West region who have experienced sexual abuse.
- Galway Barnahus developed a suite of interagency protocols that can set a national lead for other additional centres to follow.
- Participation in the EU Barnahus network has also added to the development of high standards in this area. Tusla are active participants in and contributors to this network.

Child Abuse Substantiation Procedure (CASP)

- Extensive work on the CASP has been ongoing throughout the year. Completing the Data Protection Impact Assessment (DPIA) has allowed for the refinement of the procedure and accompanying guidance and the opportunity to engage in further consultation with internal and external stakeholders.
- The final CASP procedure will reflect best practice in such cases, ensure consistency of practice across the country, and support the Agency in fulfilling its legal obligations to protect children.

Evidence-Informed Practitioner Programme

- A new Practice Development and Improvement Project (PDIP) was progressed in 2020 to train, recruit and retain skilled, competent, and quality social work and social care staff who are equipped to practise effectively in delivering services to and improving outcomes for children and families.
- To improve the quality and consistency of student placements and to support recruitment and retention of new graduates, there is now a national student placement coordination system operational in Tusla with 20 student placement coordinators in place.
- The Empowering Practitioners and Practice Initiative (EPPSI) Toolkit survey was disseminated to all Tusla staff in May 2020 to collect data and information about the use, usefulness, and impact of the EPPSI Toolkit for front-line practice staff in Tusla.

Throughout 2020, PPFSS staff and Child and Family Support Network (CFSN) members across the country were engaged in integrated and collaborative working with funded agencies such as the Area Based Childhood (ABC) Programme, Family Resource Centres, Barnardos and the School Completion Programme, adapting to remote service delivery in response to the COVID-19 pandemic.

- During one week in May, over 9,000 remote calls took place, over 8,000 food parcels were delivered, over 1,700 ‘Meitheal’ check-ins were carried out, and over 2,100 new families accessed services.
- The implementation of the National Childcare Scheme continued, as well as engagement with DCEDIY and Pobal to ensure the successful roll-out of the scheme – 625 children accessing the scheme through Tusla in 2020.
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Parent of a child who received family support services

"Thank you so much for being there when we needed it. It means a lot to us, you are a wonderful person. We wish you all the best to you and to Tusla!"
Key improvements made in 2020 included:

- Inspections were shorter and focused on specific areas informed by intelligence and an understanding of risk.
- Several documents providing advice and guidance to early years services about (a) how to operate safely and (b) how inspections would be undertaken and progressed were developed and issued to all registered providers.
- A dedicated section on the Early Years Inspectorate website was created for COVID-19 related documents and messaging, and a dedicated advice line was established to support services with queries.
- A consultation exercise was undertaken with parents to understand how they would like to be involved. This led to an improved process to enable parents to provide feedback to Tusla on their views and opinions of the service their child attends. The parents’ section of the website has been revised and three information leaflets have been published. In the interests of transparency, the date of all inspections is now published on the website so that parents and others can immediately see when an inspection has taken place.
- An eLearning programme was developed to support the implementation of the Quality and Regulatory Framework (QRF). This programme went live in November, and already by the end of the year, 5,870 people had undertaken some or all of the four available modules.

Notifications and Enforcement

In 2020 there were 774 notifications of incidents, a significant increase from 2019 (403), which reflects the duty of registered providers of early years services to report outbreaks of COVID-19 in addition to a range of other incidents.

The number of concerns about early years services (previously named unsolicited information) submitted to Tusla fell from 597 in 2019 to 253 in 2020. Three services were removed from the register of early years services for consistent failure to meet regulatory requirements.

School-Age Services

Throughout 2020 school-age services across the country have been facilitated by Children’s Services Regulation to complete their registration via the dedicated online portal.

Due to the impact of COVID-19 the final date for registration has been extended into 2021 to allow all services to submit the required documentation and complete the process. At the end of the year, 952 school-age services were registered, 490 were stand-alone school-age services, and 462 were combined services.

As part of our regulatory function in relation to school-age services, CSR has developed a robust and transparent process for managing any concerns about school-age services brought to our attention by parents, members of staff, or other interested parties. The process ensures that information is responded to in a timely way, that inspection is undertaken in response to serious concerns, and that any required actions to address the concerns are put in place.

During 2020 several initiatives were introduced as we continued to enhance the quality of the work we do and improve engagement with the sector we regulate.

We committed in 2020 to enhancing engagement with parents of children attending early years services and to facilitate their involvement in the inspection process.

National Child Care Information System (NCCIS)

NCCIS (our case management system) currently supports over 2,000 Tusla staff to manage over 25,000 active child protection or welfare cases. Over 1,200 new referrals are created on the system every week. NCCIS was reconfigured to align with the new standard business processes. The developments allow the case worker to record their practice, reflecting the analysis and decision-making using Signs of Safety, with a number of reporting developments in 2020.

- Case and Referral Reporting – national ‘Measuring the Pressure’ report allowing, for the first time, reporting of national standardised case and referral information directly from NCCIS.
- Signs of Safety (SoS) Reporting – a suite of new reports which provides a comprehensive insight into how SoS processes are being embedded in social work practice both locally and nationally.
- ‘SoS Scaling’ Reporting – displaying how children’s safety levels (0-10) are improving or deteriorating over time as they move through the SoS process, facilitating both aggregated and child-level analysis and immediate intervention if required.
- Child in Care in Education Reports – inspection is undertaken in response to our attention by parents, members of staff, or other interested parties. The process ensures that information is responded to in a timely way, that inspection is undertaken in response to serious concerns, and that any required actions to address the concerns are put in place.

Children’s Services Regulation (CSR)

Each of the five regulatory functions has needed to adapt and shift its activities and processes to ensure that adults and children are kept safe and that the sectors we regulate are supported through a difficult period, whilst at the same time ensuring that standards remain high, requirements continue to be met, and children continue to be well provided for. All regulatory functions have been focused on providing clear and transparent information to those who work in the sectors we regulate as we adapt to fluctuating circumstances.

In 2020 we made progress in bringing together the various registration and enforcement functions across the Registration and Enforcement Office regulatory areas. We have developed a Common Regulatory Enforcement policy to ensure that the action we take across the regulatory functions concerning services that do not engage or are unable to achieve and maintain compliance with regulatory requirements is equitable and consistent.

Early Years Inspectorate

It was necessary to make considerable changes to inspection methodology and practice during 2020 because of COVID-19. The aim was to balance the safety of all with ensuring that regulatory requirements continued to be met. Despite the pandemic, inspection rates remained generally high. Similarly, the numbers of new services applying for and achieving registration remained high. The number of services that registered closed in 2020 (96) was almost identical to 2019 (97).

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Alternative Care Inspection and Monitoring Service (ACIMS)

In 2020, ACIMS continued themed inspection of non-statutory residential centres reflecting HIQA’s National Standards, 2018. The regulatory framework for inspection now includes all eight themes, and onsite inspections against this expanded framework have commenced.

Concerning non-statutory foster care organisations, we developed and introduced a pre-approval model to support the effective commissioning of these placements in partnership with Tusla operations. All new foster care agencies now require pre-approval via this model, and existing services must submit applications following the model to remain an approved provider.

During the year, 140 non-statutory children’s residential centres were registered, and 101 thematic announced inspections were undertaken.

Alternative Education Registration and Assessment Service (AERAS)

The Alternative Education Registration and Assessment service experienced a particularly challenging year as parents across the country explored alternative educational provision for their children in response to the pandemic. This led to a very significant increase in the number of enquiries and applications for children’s home-schooling during 2020. Applications increased from 617 in 2019 to 1,923 in 2020. The service has responded effectively, prioritising where required and processing applications promptly. The number of children awaiting assessment at the end of the year was 1,435.

The number of applications for the independent schools’ register (maintains a list of students) fell from 1,637 in 2019 to 734 in 2020. The total number on the independent schools’ register increased from 5,511 in 2019 to 6,282 in 2020.

Child Safeguarding Statement Compliance Unit (CSSCU)

2020 was a busy year for the team, with a large number of statements submitted or referred for review. Overall, there were high levels of compliance and just one service placed on the register of non-compliance.

<table>
<thead>
<tr>
<th>Description</th>
<th>2019</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Safeguarding Statements compliant on first review</td>
<td>264</td>
<td>264</td>
</tr>
<tr>
<td>Child Safeguarding statements referred for review internally</td>
<td>350</td>
<td>350</td>
</tr>
<tr>
<td>Pieces of unsolicited information submitted</td>
<td>28</td>
<td>28</td>
</tr>
<tr>
<td>Services placed on register of non-compliance</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Submitted Child Safeguarding Statements for review</td>
<td>105</td>
<td>105</td>
</tr>
</tbody>
</table>
**Human Resources**

**Response to COVID-19**

Tusla Recruitment, in response to COVID-19, developed an online video process for interview boards and candidates. All recruitment schedules for campaigns and interviews remained on track, and recruitment targets were surpassed.

Following an agreement with our staff partners on a COVID-19 redeployment policy, Tusla Recruit centrally coordinated all internal realignments and external redeployment requests from the Health Service Executive (HSE) to ensure critical services were maintained and supported provided to the HSE in front-line services.

Tusla Central Vetting Bureau adapted the Garda vetting process to facilitate an email submission system for all priority vetting applications, i.e. emergency placements in fostering/adoption and Section 36 applications. An Garda Síochána National Vetting and Tusla agreed on a priority notification to facilitate quick turnaround times, including emergency COVID-19 staffing requirements.

Tusla Central Vetting Bureau conducted 10,003 Garda vetting applications, including 6,086 fostering applications, 2,912 employee re-vetting applications, 492 new employee applications and 482 adoption applications.

**Recruitment and Retention**

Tusla adapted its approach and practice to provide a more enhanced and regional Recruitment process in 2020.

Despite the challenges of 2020, Tusla successfully completed 1,027 appointments (new employees and internal promotions), which included the conversion of 408 agency employees to direct employees of Tusla. This rebalanced the dependency on agency usage and ensured a more stable workforce whilst reducing the costs associated with agency usage in previous years.

A breakdown by grade categories is as follows:

<table>
<thead>
<tr>
<th>Appointments</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Work</td>
<td>400</td>
</tr>
<tr>
<td>Social Care</td>
<td>243</td>
</tr>
<tr>
<td>Psych &amp; Counselling</td>
<td>13</td>
</tr>
<tr>
<td>Other Health Professionals</td>
<td>12</td>
</tr>
<tr>
<td>Management Grade VIII +</td>
<td>29</td>
</tr>
<tr>
<td>Family Support</td>
<td>32</td>
</tr>
<tr>
<td>Education Welfare</td>
<td>12</td>
</tr>
<tr>
<td>Admin Grade III to VII</td>
<td>286</td>
</tr>
<tr>
<td>Grand Total</td>
<td>1027</td>
</tr>
</tbody>
</table>

In 2020, Tusla’s Pay and Number Strategy development led to the introduction of forecasting against agreed targets for whole-time equivalent (WTE), retention and absenteeism.

HR targets for 2020 were achieved and informed Tusla’s HR targets for the Corporate Plan 2021–2023.

**Health and Wellbeing: Employee Assistance Programme (EAP)**

Tusla’s Health and Wellbeing EAP team provided a coordinated, holistic approach to employee wellbeing during the COVID-19 pandemic. COVID-19 emphasised the importance of staff being able to access supports from the home or workplace environment. Our Health and Wellbeing portal allows staff to manage their mental and physical health proactively through personalised plans.

A ‘Working from Home during COVID-19’ webinar was made available to all staff to educate them on appropriate workstation setup, the importance of taking breaks and maintenance of a safe workspace. Staff are also offered virtual ergonomics assessments of home workstations. Our Occupational Health service has continued to provide services to staff and has introduced telephone and video consultations where appropriate.

Tusla provides a 24/7 counselling service for staff. This service aids staff in coping with COVID-19 and with broader issues within their work/personal life.

The critical incident stress management programme offers a comprehensive, integrated, multi-component crisis intervention system organised for the reduction and control of the damaging stress resulting from critical incident exposure or workplace crisis. In 2020 the Health and Wellbeing EAP team won the Enterprise Risk – People Award from the States Claims Agency. This award recognises a risk management project or initiative that demonstrates the Delegated State Authority’s ability to improve overall risk and safety culture. The award was for the Work-Positive project.

**Workforce Planning**

2020 was the final year in Tusla’s Strategic Workforce Planning Implementation Plan 2019/2020. The plan outlined the Agency’s intent to transition over time from a short-term operational approach to a mature approach.

Seven portfolios of work – Recruitment, Supply, Retention, Capability, Organisational Design, Workforce Planning process, and Governance – were developed within the plan to focus on priorities to ensure that the Agency attracts and retains a capable, efficient and effective workforce.

Implementation of initiatives and deliverables under each portfolio resulted in positive outcomes for Tusla’s workforce. Here are some of the key achievements:

- A continued focus on the supply of social workers through collaborative work with the Social Work Education Group established by the DCEDIY.
- Development of a Practice and Development Framework to train, recruit and retain a skilled, competent, and quality social work and social care staff.
- Comprehensive reviews were conducted in five selected areas that focused on vacancies and retention issues resulting in the development of action plans to address concerns and implement recommendations.

**Corporate Employee Relations**

In 2020 work commenced on a number of employment policies, including a policy for annual certification of registration for social workers with CORU and a secondment policy, and we assisted Agency directors in reviewing policies in the employment context.

In 2020 engagement with staff partners and management was very positive, ensuring staff needs and issues were addressed. Our staff partners supported the conversion of agency staff into permanent Tusla employees and the success of this project was due to integrated working across HR and operational line managers.

Tusla’s employee relations team had a high level of engagement with staff partners from the commencement of the COVID-19 related emergency measures. Engagements and negotiations included staff redeployment, the implementation of health and safety measures, and any process changes required to provide continuity across services.

**ICT Services**

The ICT team increased to 41 staff in post by the end of 2020, a net increase of 11 over the year. The total ICT spend for the year was €13.6m. The following major initiatives were delivered over the course of the year:
A rapid mobile enablement project was delivered in response to the COVID-19 crisis to ensure all staff could work from home. In total, 1,073 additional laptops and 2,492 additional mobile devices were provisioned to staff in 2020.

Microsoft Teams was rolled out to almost 4,500 staff to support web conference and virtual collaboration. Tusla staff now host over 10,000 online meetings every month.

61,000 ICT help desk support tickets were handed from users.

There were 1,248 setups for new joiners (898 for new staff and 350 student placements).

ICT fit-out projects were delivered in 30 offices; these included new phones systems, audio visual systems and network installations.

Tusla’s two data centres in Cork and Dublin were further upgraded to provide the core infrastructure required to power all ICT systems and services.

The applications team developed 14 new apps to provide digital solutions to support business operations. Some examples included enhancing the Tusla portal to further support PFPF Meitheal referrals, TESS COVID-19 school absence returns and Commissioning funding applications. New applications were also developed for Risk Management, Business Plans, Action Trackers, PMO project management, as well as several key applications required in response to COVID-19 such as return to work and PPE ordering systems.

The data team developed 46 new reports and business intelligence dashboards for child protection and welfare, HR, and Finance reporting.

A new Records Management Office was established and Tusla’s first National Records Manager was appointed. A new records management policy and best practice guide were developed, and a records management help desk was opened to assist staff.

The data and infrastructure teams managed the ongoing operations of 75 databases and over 300 servers.

Commissioning (incl. Family Resource Centres (FRCs) and Counselling Services)

**Tusla Commissioning – ‘Stepping Up during COVID-19’**

COVID-19 presented challenges for the community and voluntary sector and our priorities expanded to enhance our support for, and engagement and collaboration with the sector in order to deliver and maintain critical front-line service activity for children, families and individuals impacted by the pandemic.

Some of our key achievements for the year include:

- **Tusla Counselling funding supported families, individuals, children and young people to access cost-efficient counselling in 91 Family Resource Centres and 138 voluntary organisations nationwide providing community-based counselling and psychotherapy.**

- **Administration of over €18m in funding to 121 Family Resource Centres during 2020 to cover a range of services offered to local families and communities during COVID-19.**

- **70 funding approvals for the Family Resource Centre Programme and Wider Voluntary Partners.**

- **The delivery between May and September 2020 of the ‘My Place to Play’ project for families living in International Protection Accommodation.**

- **The delivery of a number of training sessions to our local Tusla Commissioners and funded agencies on our commissioning portal.**

- **New local initiatives including the Dublin 8 Health Promotion project and the Flourish Programme – Bouncing Back - providing new therapeutic service for young people.**

**Strategy & Business Planning**

In 2020 the Strategy and Planning Unit undertook the development of the Agency’s Corporate Plan (2021–2023), which included the development of Business Plan 2021.

The impact of COVID-19 resulted in alternative methods being adopted to ensure that the level of collaboration an engagement required for developing such plans was realised. The Corporate Plan was developed with a focus on driving service improvements through a number of targets and activity measures under the priorities of Practice, Culture and Structure, and through four goals and twenty objectives which are detailed in the plan. With the approval of the Minister for Children, Equality, Disability, Integration and Youth, these plans will formally launch in 2021.

The Annual Report 2019 was published in July 2020. The report demonstrated the significant and constructive progress that had been achieved in 2019 in delivering Agency services. The report was shortlisted for the 2020 Chartered Accountants Award (presented by the Chartered Accountants Ireland Leinster Society) and Tusla were announced as one of the finalists for the awards in 2020.

**Programme Management Office (PMO)**

2020 saw the temporary cessation of many large change projects and the need to refocus on sustaining front-line service delivery through the pandemic. PMO support was prioritised with a focus on:

- **Support to the Tusla Crisis Management Team (CMT) to ensure business continuity and safe delivery of essential services.**

- **Development of the National Emergency Foster Care Panel project to ensure the continued availability of foster placements.**

- **Refocus of TESS education welfare projects including the deployment of the COVID-19 school return project in September to ascertain post-lockdown school return levels.**

- **Under the Child Protection and Welfare Strategy (CPWS) the PMO supported the transfer of social work practice training onto an online platform.**
Despite the challenges experienced, all PMO projects were monitored and refocused and project delivery was sustained. Throughout 2020 the PMO supported 33 projects, ten of which were successfully closed with a significant majority of objectives achieved. The team also undertook a full review of our training offering to staff, and developed with ICT new project management software called PPM (Project Planning), which will enhance how Tusla governs, monitors and supports its broad portfolio of business change and service-improvement projects.

National Policy

National Policy for Family Support and Social Inclusion

The National Policy Manager for Family Support and Social Inclusion is leading an integrated approach to policy with national working groups to support Tusla’s actions in whole-of-government strategies including child and family homelessness, the needs of Traveller children and young people, and ethnic data collection in the development of an intercultural strategy.

Cross-agency collaboration with the HSE continues in the Hidden Harm project and joint actions in the national drugs strategy, Reducing Harm, Supporting Recovery.

National Policy for Alternative Care

The National Policy Manager for Alternative Care in Tusla delivered several projects across alternative care services during 2020, including the development of a National Suite of Policies for Special Care Services and a National Suite of Policies for Residential Care.

This is the first time that special care services and residential care services have had standardised suites of policies for services nationally. Work was also completed on the Pathways to Permanency Practice Handbook and several reviews of existing policies were completed, including the financial support in aftercare and financial payments in alternative care services.

Some initiatives also commenced during 2020, including the development of supported lodgings policy, foster care information leaflets, and foster care reviews.

The National Policy Manager also supported the Crisis Management Team in dealing with the increase to COVID-19 with the development of the emergency fostering assessment framework and supporting material.

Child Protection Policy

In 2020 the National Policy Manager for Child Protection led out on several national policy developments under the child protection workstream within the Child Protection Welfare Strategy.

These included the lead on the review of the National Case Transfer Policy which was approved by National Policy Oversight Committee in November 2020, the coordination of the amendment of the National Referral Closure Guidance and involvement in the Missing Child Alert protocol.

The National Policy Manager for Child Protection also led on the revision of the National Child Protection and Welfare Definition documents, incorporating a revised definition of how a referral informs the work of the Metrics working group under the governance of the National Data and Information Oversight Committee.

The National Policy Manager provided a policy role as a member of a number of national working groups, including, the national working group developing the court report template guidance document, the Barnabos Oversight Committee, the NCCIS practice sub-group, the national AGS/Tusla sub-group, Measuring the Pressure working group, and Connecting for Life suicide prevention national group.

National Garda Liaison Office

The Tusla National Garda Liaison Office works collaboratively with An Garda Síochána (AGS) at national level to ensure the continuous improvement of child protection joint working under Children First. Key areas of work to jointly safeguard children progressed in 2020 included continued support to our joint working structures, a revised practice instruction to support timely notification of suspected crimes to AGS, and ongoing work to complete a review of the Section 12 Garda-Tusla Joint Protocol and a procedure for reporting concerns of child sexual exploitation (CSE). AGS also established a dedicated Garda unit to investigate CSE of children in care.

National Research Office (NRO)

2020 proved to be a year where research and evidence came to the fore as part of the ongoing battle to respond to COVID-19, and to do so with best available evidence. The National Research Office supported Tusla’s Crisis Management Team in devising a range of research questions which informed the Growing Up in Ireland (GUD) bespoke COVID-19 pilot and cohort surveys. Our internal Research Ethics Review Group also reviewed and approved a number of COVID-19 research studies, supported by bespoke COVID-19 guidance on ethics for prospective researchers. In terms of key achievements in promoting research and evidence-informed practice:

- Significant progress was made on the establishment of the Agency’s first independent Research Ethics Committee (REC) and in September the Board appointed as the first independent chairperson, Dr Patricia Kennedy. The REC will commence during 2021.
- A National Research Database was developed in conjunction with colleagues in ICT which will provide Tusla staff and research applicants with a visible source of information on ongoing research approved by the Agency.
- We continued our support to a national network of 22 Research and Information Mentors drawn from our own staff groups who work with their colleagues locally, regionally, and nationally to embed best practice research and information strategies for staff. Furthermore, an internal review of Research and Information Mentor strategy was scoped, and a draft report prepared for consideration by the project sponsor in December 2020.
- The study of Tusla – Child and Family Agency’s actions and decision-making process following An Garda Síochána’s application of Section 12 of the Child Care Act 1991, authored by NUIG UNESCO Child & Family Research Centre was published in 2020.
- Through the research portfolio established under the Child Protection and Welfare Strategy 2017–2022, a second staff survey was as completed and reported, and significant progress was made on the tendering and governance of a child research study.
- Over 100 Tusla staff attended online webinars on how to engage in qualitative research skills in May 2020, as well as other training events delivered by the National Research and Information Specialist and Barnardos Library and Information Service. Our electronic library collection was extended by four journals, and full access to CoramBAAF (Adoption and Fostering Academy) was provided to all staff across the Agency.
- Further policy development took place with the development of guidance on determining whether research ethical review is required for projects involving Tusla stakeholders and data, and we began the development an Open Research Policy for the Agency.
- Academic partnerships across all Irish universities and third-level institutions to enhance learning, evidence-based practice and building learning and research culture continued. In 2020, the NRO was invited to give presentations on the NRO and research ethics processes in TCD, NUI, UCD, WIT and TUD Blanchardstown.

Communications/PGs & Reps

Communications placed an emphasis on increasing awareness of Tusla and its range of services in local communities across the country, through planning and promoting local events and initiatives, and by aligning local spokespersons with local media outlets.

Communicating the continuity of service across the three critical services of Child Protection, Children in Care and Domestic, Sexual Gender-Based Violence (DSGBV), was prioritised by the CMT and SLT.

The major activities and achievements of the Communications team in 2020 included:
- Providing strategic support to the CEO, CMT and SLT, especially for COVID-19 communications.
- Managing the Agency’s press office.
- Managing the communications response to the publication of more than 50 HQA inspection reports.
- Working with directorates and project teams to advise on and prepare communications plans for more than 20 national and local communications and public awareness campaigns and activities, including national campaigns for Parenting and Family Support, National Fostering Week, Care Day and local DSGBV initiatives.

Annual Report 2020
• Responding to COVID-19 a new section for staff was created on the Tusla website to ensure access for all staff to COVID-19 related updates. Staff newscasts and family support bulletins were produced. ‘Working Together’ features, profiling the work being done across different areas of service in the Agency through people were also produced.

A number of key developments also took place in digital communications:

• The transition from the current Tusla intranet (Tusla Hub) to its new platform on Tusla SharePoint commenced in Autumn 2020. All new content is now hosted within the Tusla infrastructure, allowing for a better user experience.

• During the period January to March 2020, work continued on the introduction and implementation of a new electronic and paperless system, ePQ, to manage the circulation of and response to PQs. PQs are asked by members of Dáil Éireann and provide the Minister with opportunities to report regularly and publicly on matters relating to Tusla, for which he is responsible.

• ePQ is an application provided by the Office of the Government Chief Information Officer under the Build to Share programme, and part of the innovation and digitisation programme being delivered under the Tusla ICT Strategy.

• A successful pilot for ePQ was conducted, and training was delivered to over 100 users. Project implementation was interrupted by COVID-19, but significant groundwork has been carried out which will assist with completing implementation in 2021.

The following charts provide information relating to the nature of responses to Parliamentary Questions (PQs) and representations from elected representatives in 2020:

**Parliamentary Questions**

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>HR</td>
<td>6%</td>
</tr>
<tr>
<td>Child Protection and Welfare</td>
<td>17%</td>
</tr>
<tr>
<td>Children in Care</td>
<td>19%</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>17%</td>
</tr>
<tr>
<td>Early Years</td>
<td>9%</td>
</tr>
</tbody>
</table>

**Representations**

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>HR</td>
<td>5%</td>
</tr>
<tr>
<td>Child Protection and Welfare</td>
<td>13%</td>
</tr>
<tr>
<td>Children in Care</td>
<td>15%</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>15%</td>
</tr>
<tr>
<td>Early Years</td>
<td>12%</td>
</tr>
</tbody>
</table>

The following charts also provide information relating to the nature of responses to representations from elected representatives in 2020:

**Representations**

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>HR</td>
<td>6%</td>
</tr>
<tr>
<td>Child Protection and Welfare</td>
<td>17%</td>
</tr>
<tr>
<td>Children in Care</td>
<td>19%</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>13%</td>
</tr>
<tr>
<td>Early Years</td>
<td>10%</td>
</tr>
</tbody>
</table>

**Parliamentary Questions**

<table>
<thead>
<tr>
<th>Month</th>
<th>PQs</th>
<th>Reps</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>January to March 2020</td>
<td>38</td>
<td>66</td>
<td>104</td>
</tr>
<tr>
<td>April to June 2020</td>
<td>54</td>
<td>56</td>
<td>110</td>
</tr>
<tr>
<td>July to September 2020</td>
<td>77</td>
<td>75</td>
<td>152</td>
</tr>
<tr>
<td>October to December 2020</td>
<td>119</td>
<td>68</td>
<td>187</td>
</tr>
<tr>
<td>2020 Total</td>
<td>288</td>
<td>265</td>
<td>553</td>
</tr>
</tbody>
</table>

*Representations are those received directly through the dedicated email address for members of the Oireachtas. Tusla staff and managers also respond locally to representations made directly to them.

**Corporate Services**

Corporate Services experienced similar challenges to those experienced across the Agency, as social restrictions were enforced and members of the team worked from home. Other challenges included the coordination of the large-scale programmes of work, again with social restrictions in place, and the Health and Safety programme of work was significantly impacted both by the restrictions applied and the key role of the team in the Crisis Management Team.

Despite these challenges, Corporate Services capitalised on remote-working platforms to overcome the challenges faced as a result of the pandemic. Corporate Services provided support to the wider Agency with respect to each of the functional units within its portfolio, including the Data Protection Unit, Workforce Learning and Development and Health & Safety.
Data Protection and FOI

A programmatic approach to building data protection and FOI compliance for the Agency has been developed under the governance of an Executive GDPR Group, chaired by the CEO, and in 2020 the second phase of this programme was concluded with the following key progress and outputs:

- A current state assessment was undertaken to identify compliance gaps and high-risk areas of data processing activities.
- A record of Tusla’s data processing activities was undertaken (ROPA) to inform prioritised work for subsequent phases of the programme.
- A formal process for engaging with the Data Protection Commissioner and Office of the Information Commissioner was established to assist with Tusla’s regulatory engagement and to provide a coordinated response to inquiries and complaints.
- A fit-for-purpose model for data protection and freedom of information was designed to support operational areas and other functional units with legislative compliance and the recruitment of locally deployed privacy officers was commenced.
- In response to data protection queries and requests for support and advice, a dedicated DPU helpdesk has been established.
- The DPU provided significant operational support, including the coordination of all subject access requests received by the Agency and the management of all corporate FOI requests.
- In ensuring our compliance with our data protection obligations, the Agency focused on finalising our data-sharing agreement with An Garda Síochána, and we concluded Data Protection Privacy Impact Assessments in key areas of our practice, e.g. the child abuse substantiation procedure, complaints management, and the processing of records associated with the mother and baby home database.
- A number of posts which are key in supporting the Agency with improvements in GDPR and FOI compliance were recruited in 2020, including technical specialists, a Privacy Network Manager and compliance leads.

- The Corporate Services Directorate and the DPO developed and designed phase 3 of Tusla's GDPR and FOI to further enhance Tusla’s legislative compliance, identifying the following key priorities:
  - Continued GDPR and FOI support to the Agency whilst it establishes consistent practices and standardised business processes.
  - Implementing a fit-for-purpose operating model to support compliance with GDPR and FOI legislation.
  - Risk management approach in respect of sharing personal data with third parties.
  - Building data protection into the design of Tusla services by default (Data Protection by Default).
  - Continued close regulatory engagement with the Data Protection Commissioner (DPC) and Office of the Information Commissioner (OIC) and Training & Awareness and Change Management.

In 2020, a total of 986 FOI requests were received, detailed as follows:

<table>
<thead>
<tr>
<th>Type of FOI Request (Total = 986)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Requests</td>
<td>882</td>
</tr>
<tr>
<td>Non-Personal Requests</td>
<td>103</td>
</tr>
<tr>
<td>Mixed Requests</td>
<td>1</td>
</tr>
</tbody>
</table>

In addition, the following data was collated by the DPU:

- Personal data breaches notified to the DPC (full year): 362
- Data subject requests received (full year): 331
- DPC complaints handled (full year): 45
- Helpdesk contacts handled (May–December): 530
Health and Safety

In 2020 the Health and Safety (H&S) function engaged with the Health and Safety Authority (HSA) as follows:

- 38 incidents (of 982 recorded on NIMS) were reported to the HSA in 2020 (in comparison with 35 incidents reported to the HSA in 2019). These incidents pertained in the main to violence, harassment and aggression in the workplace and slips, trips and falls.
- The H&S function engaged with and assisted line managers in two key areas of focus for the HSA as follows:
  - COVID-19 workplace compliance across key Tusla premises.
  - Inspection follow-up at Children’s Residential Services (CRS) following HSA inspections at CRS premises.

The Agency in its entirety was impacted by the pandemic and the H&S function provided a key role by supporting business continuity across three core Tusla functions: Child Protection and Welfare Services, Children’s Residential Services and Domestic, Sexual and Gender-Based Violence Services. All relevant H&S policy and guidance documents for the Agency in response to COVID-19 were developed in line with updates from NPHET and the government.

The H&S function also contributed significantly to minimising the impact of the pandemic on other services and functions across the Agency. The following sets out some of the H&S function activities in this respect:

- Development of multiple risk assessments, training programmes and guidance documents, e.g. PPE usage, premises configuration, home visits and transport of minors.
- Development of a national Safety Management System (SMS) structure, content, and implementation plan for review by the CEO, SLT and Audit and Risk Committee of the Board.
- Mandatory H&S awareness training programmes for all Tusla employees and managers, resulting in improved reporting of incidents to inform prevention of incidents.
- Training for safety committees, safety representatives, persons in charge and fire wardens was developed and rolled out.
- Development of H&S Incident National Status Report to inform priority actions and interventions in incident prevention and to underpin employee awareness.
- Development and implementation of a number of site-specific safety statements and risk assessments on a risk-priority basis.
- Standing up of two regional Health and Safety Committees and interim subsuming of national H&S Committee within the governance of the Crisis Management Team (CMT).
- Terms of reference for the Agency’s technical working group in respect of violence, harassment and aggression (VHA) in the workplace were drafted and membership of the group was agreed. Addressing the impact of VHA is a key priority in the Agency’s Corporate Plan for 2021–2023 and the group will build on the work previously undertaken in this area.

The following table details the total number of occupational H&S incidents reported via NIMS for the Agency (2020) under each cause category:

<table>
<thead>
<tr>
<th>Cause</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violence/Harassment/Aggression</td>
<td>883</td>
</tr>
<tr>
<td>Slips, Trips and Falls</td>
<td>37</td>
</tr>
<tr>
<td>Crash/Collision</td>
<td>12</td>
</tr>
<tr>
<td>Structure/Buildings/Fixtures</td>
<td>10</td>
</tr>
<tr>
<td>Mechanical Components</td>
<td>9</td>
</tr>
<tr>
<td>Non-Mechanical</td>
<td>7</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
</tr>
<tr>
<td>Ergonomics</td>
<td>3</td>
</tr>
<tr>
<td>Fire</td>
<td>3</td>
</tr>
<tr>
<td>Vehicle</td>
<td>3</td>
</tr>
<tr>
<td>HSA Dangerous Occurrence</td>
<td>2</td>
</tr>
<tr>
<td>Systems/Installations</td>
<td>2</td>
</tr>
<tr>
<td>Adult Abuse</td>
<td>1</td>
</tr>
<tr>
<td>Environment Factors</td>
<td>1</td>
</tr>
<tr>
<td>Environmental</td>
<td>1</td>
</tr>
<tr>
<td>Exposure to Physical Hazards</td>
<td>1</td>
</tr>
<tr>
<td>Organism Unknown</td>
<td>1</td>
</tr>
<tr>
<td>Other Chemical Products</td>
<td>1</td>
</tr>
<tr>
<td>Sanitation</td>
<td>1</td>
</tr>
<tr>
<td>Structure/Building (Water/Flood)</td>
<td>1</td>
</tr>
<tr>
<td>Temp (Excluding Fire)</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>984</td>
</tr>
</tbody>
</table>

Workforce Learning and Development (WLD)

The delivery of learning and development was significantly impacted by the pandemic during 2020, particularly in respect of its face-to-face training schedule. However, capitalising on our evolving capability in digital learning, work was undertaken to convert a significant number of courses to online learning modules and virtual classroom training. Apart from the practical and technological challenges inherent in remote work and learning, personnel initially struggled with reduced opportunities for social and experiential learning. Where certification for mandatory training was required that necessitated a face-to-face module, e.g. therapeutic crisis intervention (TCI) or manual handling, services were supported to seek derogations to ensure certification remained valid during the pandemic.

The following were WLD’s key achievements in 2020:

- Developed mandatory training for all staff in the area of data sharing in order to address the recommendations of the Data Protection Commissioner – 2,245 staff trained by Q4.
- Publication of schedule of events for National Approach to Practice, including CASP, Complaints Management, Signs of Safety, Risk Management, Health & Safety, Children First and Court Room Skills. Priority training moved to an e-platform due to impact of COVID-19.
- NCCLIS training developed to align with the Standard Business Processes. Online support provided and alternative method of training delivery commenced due to COVID-19.
Corporate governance comprises the systems and procedures by which organisations are directed, controlled and managed. Tusla is committed to achieving the highest possible standards of corporate governance. The Agency, in pursuit of its governance objectives, has adopted the Code of Practice for the Governance of State Bodies (2016) and put procedures in place to seek to ensure compliance with the Code.

This code sets out the standards of good practice in relation to Board leadership, effectiveness and accountability, and takes account of governance developments, public sector reform and stakeholder consultations. The Board is accountable for the proper management of the Agency and is strongly guided by the principles set out in the Code in meeting its responsibility to ensure that all activities meet the highest standard of corporate governance. The structure of this section broadly follows the key principles identified in the Code of Practice for the Governance of State Bodies 2016.

Leadership and Effectiveness

The Role of the Board

The Board provides leadership and direction through its governance framework. The key relationships supporting the governance framework include the Board committee structure, CEO, Executive Team, and the Minister and Department of Children, Equality, Disability, Integration and Youth. The functions of the Board are set out in the Agency’s governing legislation, the Child and Family Agency Act 2013.

The Board is collectively responsible for establishing the Agency’s overall strategic direction within the limits of its statutory authority. The Board agrees the Agency’s strategic aims with the Minister and ensures optimal use of resources to meet its objectives.

In 2020 the Board developed its Corporate Plan for the three-year period 2021–2023. This plan was informed by the Minister’s performance framework. Through the performance framework the Minister sets a number of guiding principles for the Agency which give effect to the priorities and objectives the Minister wishes to see reflected in our Corporate Plan. Tusla considered the performance framework, along with its own key priorities and stakeholder feedback, in the development of its Corporate Plan. The Plan identifies three high-level strategic areas – Practice, Culture and Structure – under which the Agency’s goals and objectives have been established. These strategic areas are interconnected and are focused on addressing our challenges and ensuring a process of continuous improvement.

The Board is responsible for ensuring the integrity of the Agency’s accounting and financial reporting system and for ensuring that effective systems of internal control are instituted and implemented.

The Board reviews Tusla’s controls and procedures to provide itself with reasonable assurance that such controls and procedures are adequate to secure compliance with its statutory obligations.
Board Composition and Structure

The Child and Family Agency Act 2013 makes provision for the appointment of a Chairperson, Deputy Chairperson and seven Ordinary Board Members. There were no changes to the Board membership in 2020.

Board members are appointed by the Minister for Children, Equality, Disability, Integration and Youth Affairs with the consent of the Minister of Public Expenditure and Reform. The term of office for Board members ranges from three to five years.

Board members have the appropriate range of skills which allows them to discharge the functions required of them. In the furtherance of their duties, Board members may take independent professional advice where they judge it necessary to discharge their responsibilities as Board members.

Gender Balance in the Board Membership

As at 31 December 2020, the Board had 4 (44%) female and 5 (56%) male members, with no positions vacant. The Board therefore meets the government target of a minimum of 40% representation of each gender in the membership of State Boards.

Board Meetings

The Board is required to hold a minimum of 10 meetings per year, in accordance with the Child and Family Agency Act 2013; 13 meetings took place in 2020. A detailed report on the composition of the Board, its membership, committees, schedule and attendance at Board and committee meetings in 2020 is contained within the Governance Statement and Board Members’ Report within the Annual Financial Statements (www.tusla.ie/annualreport20).

Due to COVID-19 and in line with the public health advice, all Board and Committee meetings were held remotely from March 2020.

CEO and Executive Team

The Board delegates the day-to-day management, control and direction of the Agency to the CEO except for the specific functions it reserves to itself. Oversight of decisions, which are delegated by the Board, is retained through a robust reporting framework involving the Board committee structure, CEO and Executive Team. The membership of the Senior Leadership Team is listed in Appendix 2 of this report.

Board Effectiveness

The Board undertook an annual evaluation of its own performance in compliance with the Code of Practice for the Governance of State Bodies 2016. The purpose of the evaluation is to review the Board’s own operation and identify ways to improve effectiveness.

In 2020 the Board undertook a self-assessment evaluation consisting of an online questionnaire and one-to-one meetings with the Chair. Following a preliminary review of the outcome of the evaluation the Board agreed to further consider areas for improvement to help strengthen the performance of the Board at its 2021 strategy session day.

In order to develop and maintain its effectiveness, Board members are provided with opportunities to enhance their understanding of the work of the Agency by meeting with Tusla service providers, site visits and invitations to Tusla conferences and events. In 2020, due to COVID-19, the Board was unable to undertake any site visits.

An induction programme is in place to familiarise new Board members with the work of the Agency. Key elements are meetings with the Chair, CEO, Executive and briefings by managers on specific topics as required. Board members, as part of continuing development programme, are encouraged to attend relevant courses and Tusla conferences and events.

In 2020 Board Members accessed training and development in the following areas:

- Understanding the roles and responsibilities of the Board, its Chair and Directors
- Roles and responsibilities of Board members
- Chairing Boards and committees
- Governance risks and assurance
- Assurance supporting good governance
- The State Body Code – four years on
- Audit and Risk Committee Chairperson’s roundtable
- C&AG audit insights
- Tusla – Child and Youth Participation.

The Chairperson of the Board engages with the Minister and DCEDIY on Board succession to ensure an appropriate mix of skills, diversity and experience on the Board.

Codes of Conduct, Ethics in Public Office and Additional Disclosures of Interests by Board Members and Protected Disclosures

The Ethics in Public Office Acts 1995–2001 set out statutory obligations which apply to Board members and employees separately from the provisions of this code.

The Board complies with the Ethics in Public Office Act 1995–2001 and has adopted, in accordance with the Child and Family Agency Act 2013, its own Code of Conduct. Tusla’s Standards of Integrity and Code of Conduct is approved by the Board and is available on the Tusla website.

In addition to the Ethics in Public Offices Acts 1995–2001, Board members make an annual disclosure of any potential or actual conflict of interests. Board members are responsible for notifying the Board Secretary on an ongoing basis should they become aware of any change in their circumstances regarding conflicts of interest.

Tusla has established and maintains procedures for the making of protected disclosures and procedures for dealing with such disclosures.

In accordance with Section 22 of the Protected Disclosures Act 2014, Tusla will publish an annual report on the number of protected disclosures received in the previous year and resulting actions.

Accountability

Compliance with the Child and Family Agency Act 2013 and Corporate Governance Codes

The Agency has adopted the Code of Practice for the Governance of State Bodies 2016 and has put in place procedures to seek to ensure compliance with the Code.

The Code of Practice for the Governance of State Bodies 2016 sets out the principles of corporate governance which State Boards are required to observe. The Agency monitors its compliance with its legal and governance obligations as set out in the Child and Family Agency Act 2013 and the Code of Practice for the Governance of State Bodies 2016 with the assistance of compliance checklists and bi-annual meetings with the Department of Children, Equality, Disability, Integration and Youth Governance Unit. The Agency is compliant with all aspects of the Child and Family Agency Act 2013 and complies with the principles of corporate governance, which the Board is required to observe under the Code.

Tusla’s Code of Governance

The Child and Family Agency is required under Section 50 of the Child and Family Agency Act 2013 to prepare and submit a Code of Governance to the Minister for Children, Equality, Disability, Integration and Youth for approval. The Child and Family Agency Act 2013 and the Code of Practice for the Governance of State Bodies 2016 form the basis of Tusla’s Code of Governance. The work and responsibilities of the Board, Chairperson and CEO are set out in Tusla’s Code of Governance, which also contains matters specifically reserved by the Board for decision.

The Board reviews the terms of reference of each of the Board sub-committees on an annual basis, approves the Agency’s Standards of Integrity and Code of Conduct and reviews its vision, mission and guiding principles having regard to its statutory functions when developing the Agency’s Corporate Plan.

The Board reviews adherence to its Code of Governance through ensuring clear lines of responsibility and compliance with Board standing orders and reporting requirements.

Tusla’s Code of Governance is currently under review.

Oversight Agreement

Under Section 8.4 of the Code of Practice for the Governance of State Bodies 2016 the Department of Children, Equality, Disability, Integration and Youth is required to ensure that it has a written Oversight Agreement in place with Tusla.

The Oversight Agreement is required to reflect:

- the legal framework of Tusla,
- the environment in which it operates,
- the purpose and responsibilities of Tusla,
- Tusla’s level of compliance with the Code,
- details of the Performance Delivery Agreement, and
- arrangements for oversight, monitoring and reporting on conformity with the oversight agreement.

The current oversight agreement between Tusla and DCEDIY is effective until 31 December 2021 and will be reviewed at least every three years.

Annual Report 2020
Financial and Business Reporting
In accordance with the Child and Family Agency Act 2013, the Board is required each year to prepare and adopt an Annual Report in relation to the performance of the Agency’s functions and approve the Annual Financial Statements (AFS). The Board considers the Annual Financial Statements to be a true and fair view of the Agency’s financial performance and its financial position at the end of 2020. The Board members’ responsibilities regarding the financial statements are set out in the AFS 2020.

The Annual Financial Statements and Annual Report for 2020 have been drafted in compliance with the Code of Practice for the Governance of State Bodies 2016. The 2020 Annual Report is the seventh Annual Report published by the Agency and the final report published under the Corporate Plan 2018–2020.

Board Evaluation of Performance against 2020 Business Plan
The 2020 Business Plan was prepared in accordance with the requirements of Section 46 of the Child and Family Agency Act 2013, and in response to the Performance Statement 2020, issued by the Minister for Children, Equality, Disability, Integration and Youth to the Chair of the Board.

Business Plan 2020 sets out an account of what was to be achieved in the year to meet the overall strategic objectives of the 2018–2020 Corporate Plan. An update on the implementation of Business Plan 2020 was provided to the Board on a quarterly basis which is detailed under the Business Plan section of this report.

245 actions were tracked through 2020 Business Plan Tracking (151 actions from Business Plan 2020 and a total of 94 from Business Plans 2018 and 2019). Of these 245 actions, 115 were closed through completion and 130 closed through withdrawal.

Actions withdrawn have been done so on the basis that the Q4 2020 reports ended the three-year period of Corporate Plan 2018–2020. Three factors have determined the withdrawal of actions:

1. The action will be progressed and monitored through a local service plan.
2. The action has been included for progression through Business Plan actions outlined in Business Plan 2021.
3. The action could not be progressed due to outlined dependencies.

Board Evaluation of Performance against 2018–2020 Corporate Plan
2020 marked the end of our corporate planning cycle 2018–2020. A review was carried out against the actions which were set out in our yearly Business Plan under the seven strategic objectives detailed in the Business Plan.

Under these objectives 69 Corporate Plan actions were identified, all of which underpinned the 575 actions set out in Business Plans 2018 through to 2020. There was a significant focus on developing the corporate infrastructure of the Agency to achieve self-sufficiency and significant progress was made by Tusla in this respect.

There is clear evidence that the Agency now has a stronger corporate infrastructure and is providing services to children/young people and families in a timelier fashion with a greater focus on higher priority cases.

As part of the Corporate Plan 2020–2023 development process, the status of each of these actions was reviewed. In the 2015–2017 corporate planning cycle, only 25% of the Business Plan actions were completed at the end of the three-year cycle. In the 2018–2020 corporate planning cycle, 70% of actions were completed (404) with 30% of actions (171) being withdrawn (as detailed under Business Plan evaluation).

The review concluded that the Agency committed to a significant level of activity in the period 2018–2020 which lacked a consolidated and integrated approach to achieving the objectives as set out. Whilst the Agency accomplished a significant level of achievements in this period, measuring the impact of these achievements proved a challenge to this review. Corporate Plan 2020–2023 provides more focused areas of improvement under the priorities of practice, culture, and structure, and sets out clear targets to be achieved within the three-year period.

Statement on Internal Controls
In 2020 the Board resolved to undertake a comprehensive review of the traditional manner and scope of the Statement of Internal Control (SIC). Significant work was undertaken in 2020 continuing into 2021 in relation to the internal controls and risk management processes in place throughout the Agency. The Board’s assessment of the system of internal controls formed the basis of the SIC for 2020. The Board acknowledges its responsibility for ensuring that an effective system of internal control is maintained and operated.

As required by the Code of Practice for the Governance of State Bodies 2016, the Chair of the Board makes a statement on behalf of the Board to demonstrate the arrangements for implementing a system of governance and financial controls.

Risk Management
Risk management continues to be a key area of focus for the Board and Board sub-committees. The Board will keep under review the work of the Service and Quality Committee and the Audit and Risk Committee in 2021 in relation to risk management and their respective responsibilities.

In 2020 the Board undertook significant work in developing its risk appetite and adopted an Interim Risk Appetite Statement for 2021 pending further review in Q4 as part of its strategy day. A summary of the Corporate Risks and Controls is provided in Appendix 8 of this report.

Focuses for 2021
In 2021, the Board focus will be on the support and implementation of the goals and objectives as set out under the three key strategic areas of culture, practice and structure in the 2021–2023 Corporate Plan.

Quality and Risk Systems
Ensuring good governance is critical to the effective operation of Tusla in the delivery of high-quality services to families and children. Therefore, the Agency is committed to a robust and systematic approach to quality assurance, information management and risk management that supports robust oversight and internal governance measures across the organisation. This is achieved through the work of the QA Directorate, which is responsible for promoting continuous improvement and effective risk management in services for children and families by:
Risk and associated procedures with the intention and reviewing its Protected Disclosures Policy to prevent and detect fraud and other significant wrongdoings. The Disclosure Policy is part of the Tusla approach to good governance as it seeks to deter, successfully handled under the Protection Disclosures and Oversight Team.

In 2020, disclosures managed by the Protected Disclosures and Oversight Team were handled under the Protection Disclosure Policy. All employees are encouraged to raise genuine concerns about possible wrongdoing at the earliest opportunity, and in an appropriate way. Tusla has a dedicated committee (National Operations Risk Management and Service Improvement Committee) to support the management of risks. Its aim is to support the management of risk from local to national operational level. This committee is chaired by the Director of Services and Integration and is supported by the Regional Quality Risk and Service Improvement Forum, with a remit to collate relevant information on risks and incidents that occur throughout the regions, for consideration at a national level.

CMT: The Crisis Management Team (CMT) was established to address the Agency’s response to COVID-19. The CMT maintained its own risk register that reported and recorded risks of the pandemic’s impact at a national level for discussion and noting at relevant SLT meetings and for reporting to the Department when requested.

Corporate Risk Register: The development of an online system for the Corporate Risk Register has been established, with the national Corporate Risk Register being recorded online for reporting to relevant senior management and Board committees. This will be fully established during 2021.

This report includes the current national risks that impact on the strategic objectives of the organisation, with details of the controls, actions and mitigations to address the risks (Appendix 3). The reporting of risks to senior management, Board and Board sub-committees will continue in line with the agreed work programme provided by the Board Secretary.

Enterprise Risk Appetite Statement: The Board approved the Interim Risk Appetite Statement at its March meeting for use as an interim statement. This statement sets out the thresholds of both risk and opportunity of the Agency at an enterprise level. The Interim Risk Appetite Statement will be reviewed in Q4 of 2021 by the Board.

Risk Management Improvements: There is ongoing work to address the recommendations outlined in an internal audit of the risk management process within the Agency. With adoption of practices needed in the new working environment, it remains a clear focus that the recommendations of the internal audit are addressed in a timely manner as possible.

The completion of the development of the online risk register during 2021 will allow for access to records by individuals to risk registers in a timely and efficient manner and will address one of the recommendations of the above report.

To continue with training, an online learning module has commenced development. This will provide staff with access to key terminology and the process on how to manage organisational risk.

Incident Management

Tusla Incident Management Policy: Tusla’s Incident Management Policy (2016) sets out the requirements for the reporting and management of incidents for staff. The primary purpose of effective incident management is to identify learning to make services safer for service users and staff.

The incident management policy is under revision and has been the subject of consultation with key stakeholders. On completion in 2021 it will be rolled out and will reflect changes to organisational structures within Tusla and incorporate changes in incident management practice.

The National Review Panel (NRP) and HIQA: Tusla notifies serious incidents involving children known to child protection and welfare services, and any deaths of children in care to the National Review Panel and to HIQA in line with the Guidance for the Child and Family Agency on the Operation of the National Review Panel (2014). Serious incidents must be notified and reviewed in a timely manner and all recommendations and actions are implemented to ensure that outcomes effectively inform practice at all levels as per Standard 2.11, HIQA National Standards for the Protection and Welfare of Children (2012).

State Claims Agency: The National Treasury Management Agency (Amendment) Act 2000 assigns claims and risk management functions for Delegated State Authorities (DSAs) to the State Claims Agency (SCA).

Tusla, as a delegated state authority, is required by legislation to report incidents to the SCA. Incidents are reported via the National Incident Management System (NIMS). The NIMS is an end-to-end risk management and claims management system operated by the SCA and used by DSAs to fulfil the statutory requirement to report incidents to the SCA. NIMS is also Tusla’s designated centralised incident management system for the Agency.
Incident Reporting Activity on NIMS

Year-on-Year Progress

The Agency continues to demonstrate year-on-year increases in incident reporting on NIMS. The number of incidents reported annually has risen significantly in the period 2015 to 2020. In 2015, 715 incidents in total were recorded. The year 2020 saw the highest figure recorded, at 1,830. There was a slight decrease in reporting in 2019.

A ‘rapid review’ template for incident review has been trialed as part of the overall revision of incident management within the organisation. The rapid review format, if approved, will allow people who were involved to identify learning that can be put in place quickly. Trends and key information captured on NIMS is shared with stakeholders through forums such as the Quality, Risk and Service Improvement (QRSI) and publications such as the Director of Quality Assurance quarterly report.

Practice Assurance and Performance Systems (PAPS)

In 2020, the Practice Assurance and Service Monitoring (PASM) team within PAPS conducted a programme of 134 practice audits of Tusla’s child protection and welfare, alternative care, and children’s residential services. A number of national audits were completed. These included:

- A review of the operation of the CPWS in the context of referrals received regarding children resident in International Protection Accommodation Service (IPAS) centres.
- Children listed on the Child Protection Notification System (CPNS).
- An audit of children open to Tusla Education Support Services (TESS).
- National review of notifications made to An Garda Siochána.

In June 2020, the PASM Team revised its 2020 Audit Plan to account for the public health restrictions implemented in response to the ongoing COVID-19 pandemic.

In 2020 a new PAPS Editorial Oversight Group (EOG) was established to develop, implement and oversee a standardised quality assurance process for reports and findings issued by the PASM Team. The EOG met on five occasions, where it fulfilled an important function in conducting peer review of anonymised samples of PASM reports, with a view to providing feedback and suggestions for quality improvements for dissemination through the PAPS line management structure.

The Performance Reporting Team within PAPS continued to publish a full suite of monthly and quarterly service performance and activity reports, along with the Annual Review on the Adequacy of Child Care and Family Support Services for 2019. The team also progressed the development of balanced scorecards for Tusla areas and national services.

Delta Claims Previously Reported as Incidents (ACPPI)

The SCA measures incident reporting by organisations using a key performance indicator called ‘delta Claims Previously Reported as Incidents’ (ACPPI). The ACPPI grading scale is divided into six levels with level A being the optimum level. Despite the decrease in reporting figures in 2019, Tusla met the target set by the SCA for the year and reached level C.

Dissemination of Learning

The Risk and Incident team continue to develop learning material and methods of dissemination based on feedback received from staff. Training and briefing sessions are provided to staff via face-to-face sessions and now more recently via remote learning. Recommendations from National Review Panel reports are managed via the National Recommendations Tracker (NRT). The status of recommendations can be tracked and updated centrally.
Finally, the PAPS admin team oversaw a number of important quality improvement initiatives to support the work of the PASM Team. These included a review of the audit reports tracker, the development of a standardized suite of templates for audit and review reports, the development of a new Practice Audit Handbook and Guidance document, and the introduction of a new audit recommendations tracker.

Further consultation took place with several stakeholders, and a proposal was developed in line with the advisory group format taken by TAG, to promote a level of consistency between how the advisory groups operate. With the disruption of COVID-19 this was not developed further and will be a focus for the forthcoming year.

Given the impact of social distancing restrictions because of COVID-19, it is recommended that future national advisory groups be established primarily as online forums. Another consideration will be that, with an extensive network of other forums. Another consideration will be that, with an extensive network of other forums. Another consideration will be that, with an extensive network of other forums.

Given the impact of social distancing restrictions because of COVID-19, it is recommended that future national advisory groups be established primarily as online forums. Another consideration will be that, with an extensive network of other forums. Another consideration will be that, with an extensive network of other forums.

As supported by national associations, Tusla social work departments and private agencies), these groups should be invited to be affiliated with, and be represented by, these advisory groups at national level.

Update on the Strategic Action Plan in Response to the HIQA Investigation Report into the Management of Allegations of Child Sexual Abuse

Following the publication of HIQA’s Report of the investigation into the management of allegations of child sexual abuse against adults of concern by the Child and Family Agency (Tusla) in June 2018, Tusla developed a strategic action plan to address the areas for improvement and the risks identified. The strategic action plan comprises actions grouped under nine improvement themes designed to make measurable improvements in addressing the gaps and risks identified in the HIQA report.

In January 2020, the independent Expert Assurance Group, established to oversee the implementation of the HIQA recommendations, published its final report in which it commented on progress under each theme of the strategic action plan.

Progress or completion of each of theme and action continued to be formally monitored under an internal governance plan throughout 2020.

Significant progress was recorded on a number of initiatives, including the Barnahus/One House project, which is concerned with providing a safe space for the child following suspected sexual abuse, so that the child can access therapeutic services, social workers, health professionals and Gardaí working together under one roof, in an effort to minimise trauma and develop better pathways for the child. Further progress was also recorded on the continued and ongoing alignment of IT systems with revised standard business processes under the Child Protection and Welfare Strategy, while Tusla’s organisational reform programme progressed with priority placed on the three areas of quality, staff and public confidence.

Service User Feedback

Service user feedback can be used for a variety of reasons which include but are not limited to informing:

1. their own care trajectory  
2. governance and oversight  
3. organisational planning, policy, and service development  
4. peer education and prevention initiatives  
5. quality assurance and service improvement  
6. co-production or co-creation of services.

This can be undertaken through a range of methodologies, e.g. surveys, forums, advisory groups’ committee membership, one-to-one interview, involvement in inspection or audit of services.

Proactive service user engagement can also be used to inform and educate service users regarding Tusla’s or our partners’ services.

Advisory Groups

The Service Experience, Innovation and Design (SEID) team are tasked with the co-facilitation of the Tusla Advisory Group (TAG) and establishing national advisory groups.

TAG is a co-production between Tusla and care leavers and is facilitated by two care leavers and the SEID team. In 2020 the TAG completed a pilot survey on the experiences of TAG members and their transition from care to aftercare. This survey was presented to the Tusla Board Service and Quality Committee (SQC) in November 2020. TAG sought approval to undertake a national survey of young adults in receipt of aftercare. This project is for completion in Q4 2021 and is included in the Tusla Business Plan 2021.

Following consultation, parents of children in care were identified as a service user group that would benefit from representation at national level.

Surveys

In line with the Tusla Business Plan, the SEID had responsibility for initiating several surveys. Roll-out of these surveys is dependent on accessing the identified service user group and requires extensive collaboration across the Agency.

Due to the changes in the work environment through 2020, work was carried out on a number of service-specific surveys:

- SEID have worked with the Barnahus project to develop and conduct a survey of participants at project meetings.
- The National Interagency Prevention Programme (NIAPP) have engaged with SEID about service user feedback for their service and a mock questionnaire was developed to demonstrate the functionality of the survey tool. NIAPP have expressed a desire to move forward in conjunction with SEID on this project in 2021.
- SEID, in collaboration with the Practice Audit and Assurance Systems, Quality Assurance and Monitoring Services, have commenced the development of four questionnaires, two for service users, one for EPIC and one for social work staff for roll-out in 2021.

Service Users’ Experience

Tusla proactively seeks service user engagement to gather feedback/involvement from service users in relation to their views on or experience of our services.
Appendix 1 - Glossary of Terms

<table>
<thead>
<tr>
<th>Abbrev.</th>
<th>Term</th>
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<th>Term</th>
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<tbody>
<tr>
<td>ABC</td>
<td>Ano-Based Childhood</td>
<td>DGBV</td>
<td>Domestic, Sexual and Gender-Based Violence</td>
<td>OIC</td>
<td>Office of the Information Commissioner</td>
<td>TESS</td>
<td>Tusla Education Support Service</td>
</tr>
<tr>
<td>ACFMS</td>
<td>Alternative Care Inspection and Monitoring Service</td>
<td>EAP</td>
<td>Employee Assistance Programme</td>
<td>ONS</td>
<td>Out of Hours Service</td>
<td>TDH</td>
<td>Technological University of Dublin</td>
</tr>
<tr>
<td>ACTS</td>
<td>Assessment Consultation and Therapy Service</td>
<td>ERIC</td>
<td>Empowering People in Care</td>
<td>PAG</td>
<td>Practice Assurance and Performance Systems</td>
<td>UCO</td>
<td>University College Dublin</td>
</tr>
<tr>
<td>ADRA</td>
<td>Alternative Education Registration and Assessment</td>
<td>EPH</td>
<td>Empowering Practitioners and Practice Initiative</td>
<td>PAM</td>
<td>Practice Assurance and Service Monitoring</td>
<td>UNESC</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
</tr>
<tr>
<td>AFS</td>
<td>Annual Financial Statements</td>
<td>EOG</td>
<td>Editorial Oversight Group</td>
<td>PDP</td>
<td>Practice Development and Improvement Project</td>
<td>VHA</td>
<td>Violence, Harassment and Aggression</td>
</tr>
<tr>
<td>AGS</td>
<td>An Garda Siochána</td>
<td>ETB</td>
<td>Education and Training Board</td>
<td>PHM</td>
<td>Programme Management Office</td>
<td>WLD</td>
<td>Workforce Learning and Development</td>
</tr>
<tr>
<td>ARC</td>
<td>Audit and Risk Committee</td>
<td>FOI</td>
<td>Freedom of Information</td>
<td>PFFS</td>
<td>Policies, Procedures, Protocols and Guidelines</td>
<td>WTE</td>
<td>Whole-Time Equivalent</td>
</tr>
<tr>
<td>CASP</td>
<td>Child Abuse Substitution Procedure</td>
<td>FRC</td>
<td>Family Resource Centre</td>
<td>FFPS</td>
<td>Prevention, Partnership and Family Support</td>
<td>WIT</td>
<td>Waterford Institute of Technology</td>
</tr>
<tr>
<td>CASG</td>
<td>Computer and Auditor General</td>
<td>GDPR</td>
<td>General Data Protection Regulation</td>
<td>PG</td>
<td>Parliamentary Question</td>
<td>WTE</td>
<td>Whole-Time Equivalent</td>
</tr>
<tr>
<td>CRAS</td>
<td>Children First Information and Advice Service</td>
<td>GUI</td>
<td>Growing Up In Ireland</td>
<td>QA</td>
<td>Quality Assurance</td>
<td>WTE</td>
<td>Whole-Time Equivalent</td>
</tr>
<tr>
<td>CFSN</td>
<td>Child and Family Support Network</td>
<td>HRS</td>
<td>Health Safety</td>
<td>GOF</td>
<td>Quality Regulatory Framework</td>
<td>WSC</td>
<td>Whole-Time Staff</td>
</tr>
<tr>
<td>CMT</td>
<td>Child Protection Committee</td>
<td>HR</td>
<td>Human Resources</td>
<td>GRS</td>
<td>Quality, Risk and Service Improvement</td>
<td>WSI</td>
<td>Workforce Staff Involvement</td>
</tr>
<tr>
<td>CPNS</td>
<td>Child Protection Notification System</td>
<td>HSC</td>
<td>Health Service Executive</td>
<td>HSG</td>
<td>Research Ethics Committee</td>
<td>WSP</td>
<td>Workforce Staff Performance</td>
</tr>
<tr>
<td>CPC</td>
<td>Child Protection Committee</td>
<td>IHAS</td>
<td>International Protection Accommodation Service</td>
<td>IRE</td>
<td>Research Ethics Committee</td>
<td>WTP</td>
<td>Whole-Time Prescribed</td>
</tr>
<tr>
<td>CPSW</td>
<td>Child Protection and Welfare Strategy</td>
<td>IRAS</td>
<td>International Protection Accommodation Service</td>
<td>RE</td>
<td>Representation (Ministerial)</td>
<td></td>
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<tr>
<td>CSN</td>
<td>Children’s Residental Services</td>
<td>ISS</td>
<td>International Social Services</td>
<td>ROPA</td>
<td>Record of Procession Activities</td>
<td></td>
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<tr>
<td>CSR</td>
<td>Children’s Services Regulation</td>
<td>NAARP</td>
<td>National Adoption Implementation Programme</td>
<td>SCA</td>
<td>Service Claims Agency</td>
<td></td>
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</tr>
<tr>
<td>CSSCU</td>
<td>Child Safeguarding Statement Compliance Unit</td>
<td>NCCIS</td>
<td>National Childcare Information System</td>
<td>SEID</td>
<td>Service Experience, Innovation and Design</td>
<td></td>
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</tr>
<tr>
<td>CYC</td>
<td>Children and Young People</td>
<td>NDCC</td>
<td>National Data and Information Committee</td>
<td>SCS</td>
<td>Statement of Internal Control</td>
<td></td>
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</tr>
<tr>
<td>CYSCP</td>
<td>Children and Young People’s Services Committees</td>
<td>NAARP</td>
<td>National Adoption Prevention, Programme</td>
<td>SLT</td>
<td>Senior Leadership Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DCDDY</td>
<td>Department of Children, Disability, Disability, Integration and Youth</td>
<td>NIM</td>
<td>National Incident Management System</td>
<td>SHS</td>
<td>Safety Management System</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DHHEDS</td>
<td>Department of Further and Higher Education, Research, Innovation and Talent</td>
<td>NPHET</td>
<td>National Public Health Emergency Team</td>
<td>SJPS</td>
<td>Signs of Safety</td>
<td></td>
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<tr>
<td>DPHI</td>
<td>Data Protection (Unit)</td>
<td>NRO</td>
<td>National Research Office</td>
<td>SGC</td>
<td>Service and Quality Committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DPC</td>
<td>Data Protection Commissioner</td>
<td>NRT</td>
<td>National Recommendations</td>
<td>TAG</td>
<td>Tota Advisory Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DRA</td>
<td>Data Protection Impact Assessment</td>
<td>NTRIS</td>
<td>National Traveller and Roma Inclusion Strategy</td>
<td>TCI</td>
<td>Therapeutic Crisis Intervention</td>
<td></td>
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<tr>
<td>DSA</td>
<td>Delegated State Authority</td>
<td>NUI</td>
<td>National University of Ireland Galway</td>
<td>TED</td>
<td>Trinity College Dublin</td>
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Appendix 2 - Interim Senior Leadership, 2020

<table>
<thead>
<tr>
<th>Member of Executive</th>
<th>Role</th>
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</thead>
<tbody>
<tr>
<td>Bernard Gloster</td>
<td>CEO</td>
</tr>
<tr>
<td>Jim Gibson</td>
<td>COO (to May 2020)</td>
</tr>
<tr>
<td>Kate Duggan</td>
<td>National Director of Services and Integration (from August 2020)</td>
</tr>
<tr>
<td>Pat Smyth</td>
<td>Director of Finance</td>
</tr>
<tr>
<td>Kim Hayes</td>
<td>Interim Director of HR</td>
</tr>
<tr>
<td>Brian Lee</td>
<td>Director of Quality Assurance</td>
</tr>
<tr>
<td>Cormac Quinlan</td>
<td>Director of Transformation and Policy</td>
</tr>
<tr>
<td>Laura Sleevn</td>
<td>Director of Corporate Services</td>
</tr>
<tr>
<td>Pamela Benson</td>
<td>Director of Legal Services</td>
</tr>
<tr>
<td>Thomas Finn</td>
<td>Director of Legal Services (Cover from July 2020)</td>
</tr>
<tr>
<td>Fergus O’Cuanachain</td>
<td>Head of Communications</td>
</tr>
<tr>
<td>Alan Breen</td>
<td>Service Director, DME</td>
</tr>
<tr>
<td>Linda Creamer</td>
<td>Service Director, DME (to December 2020)</td>
</tr>
<tr>
<td>Patricia Finlay</td>
<td>Service Director, DME</td>
</tr>
<tr>
<td>Dermot Halpin</td>
<td>Service Director, DME (to December 2020)</td>
</tr>
<tr>
<td>Aisling Gillen</td>
<td>Service Director, West</td>
</tr>
<tr>
<td>Donal McCormack</td>
<td>Service Director, Residential Services</td>
</tr>
<tr>
<td>Noel Kelly</td>
<td>National Service Director, TESS</td>
</tr>
<tr>
<td>Fiona McDonnell</td>
<td>National Service Director, Children’s Services Regulation</td>
</tr>
</tbody>
</table>
Appendix 3 - Summary of Corporate Risks and Controls, 2020

Tusla’s Board is responsible for the overview of risk management within the Agency, the focus of which is to identify, manage and mitigate potential material risks to the achievement of the Agency’s strategic and business objectives. This also involves the approval of the Risk Management Policy, Risk Appetite Statement and Corporate Risk Register. There is a comprehensive consultation process for the identification and management of these risks across the Agency at appropriate levels. The principal risks and uncertainties identified by the Agency in the short to medium term are set out below, together with the principal mitigation measures. This is not an exhaustive statement of all relevant risks and uncertainties as there may be issues not currently known to the Board or events which the Board considers to be of low impact or likelihood that could emerge and give rise to material consequences. The mitigation measures detailed below are designed to provide a reasonable and not an absolute level of assurance against the impact of the events in question.

<table>
<thead>
<tr>
<th>Strategic Objective</th>
<th>Risk Category</th>
<th>Key Risk</th>
<th>Controls and Planned Actions</th>
</tr>
</thead>
</table>
| Corporate Services  | Financial     | There is a risk of loss of public funds and ineffective use of Tusla funding due to insufficient financial governance or oversight arrangement and systems for all services, to included funded services. | **Controls:**  
  • There is in place a Commissioning Unit to oversee various external agencies, and relevant strategy developed.  
  • Governance systems have been developed and established for Section 56 and 59 organisations.  
  • Compliance statements have been sought from funded organisations.  
  • Tusla-specific financial regulations continue to be developed.  
  • Training in procurement has been delivered to relevant staff members involved in the process.  
  • Memorandum of understandings in place continue to be relied upon for certain services.  
  • A compliance unit has been established with the role of overseeing relevant oversight arrangements.  
  • Controls were amended for finance processes during COVID-19 and approvals accepted by email rather than physical signatures.  
  
  **Planned Actions:**  
  • Continual refinement of financial regulation and processes for all services being overseen as changes are introduced.  
  • Continued development of fit-for-purpose ICT systems to support governance and control of financial activity. |
| Integrated Supports and Services | Financial | Risk that level of funding for the Agency may impact on the effective delivery of proposed services which will result in deliverables outlined in the Corporate and Business Plans not being met. | **Controls:**  
  • Cost control action plan has been put in place for allocation services within spend limits.  
  • Prioritisation of services across the Agency will be required for agreement across Directorate.  
  • Development of ongoing costings for presentation to the Board in preparation for estimates to Department.  
  
  **Planned Actions:**  
  • The Business Planning process for the forthcoming year to take into account the proposed funding prior to being finalised. |
<table>
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<tr>
<th>Strategic Objective</th>
<th>Risk Category</th>
<th>Key Risk</th>
<th>Controls and Planned Actions</th>
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| **Policy and Legislation** | Compliance | Due to inadequate technical and organisational measures and the low level of GDPR maturity (1.5), any or all of the eight principles of GDPR may be breached, resulting in an impact on service users to discharge their privacy rights. Due to current resource, organisational, practice and procedures adopted across the FOI function, a lack of compliance of the provision of the FOI Act will result in a failure of statutory obligations and impact on service users and the public to access Agency records. | **Controls:**  
  • There is a dedicated Data Protection Unit in place within the Agency to develop, facilitate and support best practice in Data Protection and FOI compliance. Additional technical resources have been put in place to support the Agency in adhering to the principles of GDPR and FOI legislation, including Privacy Officer Network Manager, 12 x Privacy Officers (+ 7 in recruitment), GM for DP Operations, Data Protection Compliance Manager, Compliance Lead DP Programme Manager, and FOI National Manager.  
  • A GDPR eLearning programme has been developed and rolled out to all staff. In addition, in line with commitments to the DPC, online classroom training on safe data sharing and redaction is being rolled out to all staff on a prioritised basis. It is intended that staff identified as processing the most sensitive data will be provided training during 2021. Training in relevant FOI reporting requirements is being developed/ provided.  
  • A range of resources has been developed, continues to be refined and is available to all staff on the Tusla Hub, including toolkits and procedural documents for the implementation of compliance operations, embedding DPIA process into One Trust; in addition, guidance has been developed with respect to conducting DPIAs, redaction guidelines and a practice note for frontline staff with respect to data sharing. High Priority DPIAs have been conducted for the Agency, e.g. AGS, CASP, NIAPP, etc.  
  • There is a Tusla Privacy Notice developed and available on the website, which sets out details under the principles of data protection.  
  • Action plan to address Data Protection Commission inquiries in place (completion of Action 188). A separate action plan has been developed to address the findings of the OIC review under S44, and progress is reported to the Board on a regular basis. | **Planned Actions:**  
  • A full programme of work has now been established for phase 3 of the GDPR Programme, comprising five work streams under the governance of an Executive GDPR Committee. The five work streams comprise: data protection operating model; third-party privacy risk management; data protection by design and default; regulatory engagement; change management, training and awareness.  
  • Elements of fairness, transparency, purpose limitation, data minimisation, lawfulness are aspects of DP are covered in training, which is being rolled out to all staff. Furthermore, a DP help desk has been established to facilitate queries from staff. As part of the training programme, a FAQ document is to be established to further inform DP practice across the eight principles of GDPR.  
  • Review of Tusla’s Data Protection risk register is being undertaken as part of the commencement of phase 3 of the GDPR Programme to be agreed by the GDPR Executive Group as the governing authority. |
<table>
<thead>
<tr>
<th>Strategy Objective</th>
<th>Risk Category</th>
<th>Key Risk</th>
<th>Controls and Planned Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corporate Services</td>
<td>Physical/ Psychological</td>
<td>There is a risk to the safety, health and welfare of staff, service users, members of the public and others impacted by the Agency’s activities due to non-compliance with existing health and safety legal requirements and the lack of a comprehensive safety management system.</td>
<td><strong>Controls:</strong>&lt;br&gt;- There is a requirement for all sites to have an up-to-date site-specific Safety Statement and associated risk assessments.&lt;br&gt;- A comprehensive Safety Statement folder containing 36 risk assessments has been produced and is currently being rolled out to all Tusla premises. A schedule for the installation of Safety Statements to 28 priority Tusla offices has been developed, and installation of Safety Statements to these premises is under way as of Q3 2020. This has been impacted by COVID-19 restrictions for Q1 2021.&lt;br&gt;- Tusla H&amp;S advisors form part of the Regional Management Teams and actively participate in these teams to promote employee health and safety by providing technical and expert advice to Service Directors to respond to emerging risks and are a conduit for H&amp;S-related advice and guidance.&lt;br&gt;- The H&amp;S Unit continues to conduct ongoing site inspections and audit visits to support staff in identifying and remediating risks. Regional H&amp;S advisors are available to support staff at a ratio of 1:1,000 staff. All site visits and inspections for Q1 are COVID-19 related.&lt;br&gt;- The H&amp;S function supports the local area/region to implement any recommendations arising from H&amp;S Authority unsolicited visits. Any actions that cannot be implemented are appropriately escalated to the relevant owner in the SLT by the Director of Corporate Services.&lt;br&gt;- The H&amp;S objectives in the Corporate Plan 2021–2023, where resourced and implemented, are intended to address all risks on the H&amp;S function risk register.&lt;br&gt;- The mandatory online manager and employee training module has been developed by the Tusla H&amp;S Department and rolled out nationally via HSELand.&lt;br&gt;- A national First Aid Responder database has been created by the H&amp;S team to assist the management of timely certification/recertification of Tusla First Aid Responders.&lt;br&gt;- A retention survey has been carried out in five of the 17 areas for teams working at the ‘front door’. The retention report has been finalised and issued to the CPWS steering group.&lt;br&gt;- The multidisciplinary team is currently working in co-operation with Tusla’s Therapeutic Service.&lt;br&gt;- A Pilot Bursary/Sponsorship Programme commenced in 2019 with NUI Maynooth to increase the direct supply of graduates to the surrounding regions.&lt;br&gt;- Tusla is represented on the Cross-Sectoral Steering Group to develop a strategic framework for health and social care workforce planning for Ireland. The National Strategic Framework for Workforce Planning for Health and Social Care (ongoing) Group did not meet in 2020 due to COVID-19.&lt;br&gt;- Tusla will continue to work collaboratively with the Social Work Education Group (SWEG), established in 2019 and led by the DCEDIY. The work of the interdepartmental group is aimed at determining and influencing the future supply of social workers from the higher education institutes.</td>
</tr>
<tr>
<td>Strategic Objective</td>
<td>Risk Category</td>
<td>Key Risk</td>
<td>Controls and Planned Actions</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------------</td>
<td>----------</td>
<td>-----------------------------</td>
</tr>
</tbody>
</table>
| **Integrated Supports and Services** | Projects/ Objectives | The unknown consequences of COVID-19, in relation to business continuity, may impact resources for both service continuity and organisational reform. | **Controls:**  
- Meetings with CEO and Department in relation to COVID-19 related matters and impact.  
- In relation to business continuity, the CMT was established to develop and communicate a full suite of staff guidance and controls.  
- Frequent and as-required SLT meetings relating to COVID-19 continuity measures agreed.  
- Control estimates process in relation to COVID-19 now in place and budget decision received of increased funding to Agency.  
- Timing impact on reform programme currently being monitored by the Board.  
**Planned Actions:**  
- To complete a revision of the organisational plan to address potential restriction in funding. |
| Relationship, Collaboration and Communication | Reputation and Profile | There is a risk of reduced public confidence in the Agency due to adverse findings from statutory investigations, inspections and serious incident review within Tusla services and associated negative media attention. | **Controls:**  
- Communication strategy in place with all internal and external stakeholders.  
- Continuous monitoring of threats to public confidence, matched with individual crisis communications.  
- Crisis Communications Strategy for revision when new Corporate Plan is published.  
- Conduct crisis simulations with SLT.  
- Programme of improvement in place to increase compliance with regulatory requirements – as evidenced in trends of recent HIQA reports.  
- Programme of improvement in place to increase GDPR compliance with training programme ongoing to target 3,000 staff in 2021.  
- Programme of CEO public engagement at the earliest opportunity in public information on known challenges, corrective actions, and progress.  
**Planned Actions:**  
- Ongoing campaigns to keep staff informed, particularly during a crisis. |

<table>
<thead>
<tr>
<th>Strategic Objective</th>
<th>Risk Category</th>
<th>Key Risk</th>
<th>Controls and Planned Actions</th>
</tr>
</thead>
</table>
| **Operational** | Operational | There is a risk that a breach of policy, a failure of a control, the absence of a control, a technical error, or force majeure may cause a threat to exploit a vulnerability in an ICT asset, causing an adverse impact on the confidentiality, integrity or availability of information, which may in turn adversely impact the delivery of a Tusla service or corporate function. | **Controls:**  
- Tusla ICT Directorate (ICT) performs regular information security assessments and reviews on the current infrastructure/system.  
- ICT employees have online access to information security policies, standards and procedures. ICT managers direct employees to the policy documents, regularly remind them of the policies and the importance of policy compliance, and alert staff to policy updates. ICT staff induction and ongoing professional development include information security training and the requirement to read the policies and confirm they have been read.  
- ICT has established an information security programme of work aligned with ISO 27001 Information Security Standard.  
- ICT has technical and organisational risk controls in place to mitigate risks to confidentiality, integrity and availability. These controls apply to all aspects of ICT assets – the data environment, infrastructural assets and end-user devices.  
- ICT carries out vulnerability scanning, penetration testing and information security audits on ICT assets and data environments.  
- All systems are developed to an OWASP security standard.  
**Planned Actions:**  
- ICT is progressing the information security programme to align with the ISO 27001 Information Security Standard. The new Information Security Policy Framework will be introduced in 2021 with an implementation plan including training and awareness.  
- All critical ICT assets will be assessed for their compliance with the new framework of policies, standards and procedures, which includes baseline assessment standards, in 2021.  
- Quality Improvement Action Plans for information security will prioritise actions based on information sensitivity classification and the criticality of an ICT asset. |
### Integrated Supports and Services

**Strategic Objective:** Operational

**Key Risk:**
- There is a risk that Tusla may fail to protect the confidentiality, integrity, and availability of information due to the absence of sufficient risk controls caused by Tusla not having control of its ICT infrastructure and ICT assets, not having sufficient coverage of enterprise-standard ICT solutions across Tusla services, and not having a mature ICT capability.

**Controls:**
- Tusla ICT Directorate (ICT) was established in 2017 to create an independent ICT infrastructure for Tusla.
- ICT began to implement an ICT Strategy and Data Management Strategy under the Corporate Plan.
- ICT has started a programme of work to segregate the Tusla data environment from the HSE data environment.
- ICT has identified the ICT requirements across all Tusla services and has started to expand the coverage of digital services to all Tusla services.
- Tusla has increased resources in ICT incrementally year on year.

**Planned Actions:**
- Continue to implement the ICT Strategy and Data Management Strategy (as updated for the period 2021–2023) and implement the ICT performance objectives of Tusla Corporate Plan 2021–2023 under strategic goal 4: ‘Ensure our local teams and services are facilitated and supported by National systems and resources that promote integration and accountability’.
- Deliver ICT projects which establish an independent infrastructure and systems.
- Deliver ICT projects to extend the provision of ICT systems across Tusla services.
- Deliver ICT projects to digitise paper-based information processes.

### Operational

**Strategic Objective:** Operational

**Key Risk:**
- There is the potential that the requirement of key or large numbers of staff to self-isolate due to the coronavirus will reduce or remove adequate staffing levels that will impact service delivery.

**Controls:**
- The National Operations Team and the SLT are communicating key requirements of staff and providing the latest advice on government requirements. Communications are posted and disseminated throughout the Agency to follow best practice guidelines on social distancing, proper hygiene, and cough etiquette.
- A voluntary redeployment process has been agreed. Mandatory redeployment process agreed with unions for implementation if required.
- Procurement of PPE supplies is ongoing through OGP framework and local procurement channels for distribution to front-line Agency staff.

**Planned Actions:**
- Continuous communication as the situation develops to be maintained through National Operations Team and SLT, with regularly scheduled actions to be undertaken.
- Constant monitoring of the impact on staffing, service delivery and public restrictions to address and communicate to staff on a regular basis via service governance structures.

---

<table>
<thead>
<tr>
<th>Strategic Objective</th>
<th>Risk Category</th>
<th>Key Risk</th>
<th>Controls and Planned Actions</th>
</tr>
</thead>
</table>
| Integrated Supports and Services | Operational | There is the potential that the requirement of key or large numbers of staff to self-isolate due to the coronavirus will reduce or remove adequate staffing levels that will impact service delivery. | Controls:  
- The National Operations Team and the SLT are communicating key requirements of staff and providing the latest advice on government requirements. Communications are posted and disseminated throughout the Agency to follow best practice guidelines on social distancing, proper hygiene, and cough etiquette.  
- A voluntary redeployment process has been agreed. Mandatory redeployment process agreed with unions for implementation if required.  
- Procurement of PPE supplies is ongoing through OGP framework and local procurement channels for distribution to front-line Agency staff.  
Planned Actions:  
- Continuous communication as the situation develops to be maintained through National Operations Team and SLT, with regularly scheduled actions to be undertaken.  
- Constant monitoring of the impact on staffing, service delivery and public restrictions to address and communicate to staff on a regular basis via service governance structures. |
### Integrated Supports and Services

**Operational**

There is a risk to the safety, wellbeing, and welfare of children due to insufficient capacity/resources to meet existing levels of service demand for CPW.

#### Controls and Planned Actions

**Controls:**
- Children with immediate risk of harm are prioritised.
- Management and governance structures to allow for regular performance monitoring at all levels are in place.
- Additional budget allocation for staffing from DCDEHY; additional funding has been allocated to areas of priority as identified in the business plan.
- PPPGs are in place to support and guide practice.
- Engagement with universities in ROI and NI re new graduates is under way. Engagement with Universities in ROI and NI have completed for the academic year 2019/2020 and are planned for 2020/21. Priority vacancies will be filled from this campaign.
- Service Improvement Plans are in place.
- Implementation of the audit programme and reviews on practice assurance and performance systems are ongoing.

**Planned Actions**
- The ongoing workforce planning process is being embedded to address resourcing needs within our funding allocation throughout the Agency in 2021. The Agency developed a Pay Number Strategy that provides WTE targets within our funded pay budget. This, in turn, is optimising our deployment WTE throughout the Agency. 2021 will also focus on reviewing front-line staff on temporary contracts.
- Under the Supply portfolio, HR continues to have ongoing third-level provider engagement/Social Work Education Group to formally advocate increasing the supply of social workers to maintain and increase graduate levels. Initiatives include a bursary scheme and increased placement opportunities. An Unallocated Cases Project team has been established. Terms of reference are being developed. Performance is being managed through one-to-one between Service Directors and the Director of Services and Integration.
- Additional requests for resources to be requested through the estimates process for 2021.

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### Foster Care

**Operational**

There is a risk to the safety, welfare and wellbeing of children in foster care due to inadequate capacity/resources/systems to ensure compliance with national standards for safeguarding.

#### Controls and Planned Actions

**Controls:**
- A range of performance measures and management structures are in place to facilitate oversight and control, including allocation of social workers to child and foster carers, up-to-date care plans, and Children in Care review process.
- Actions are in place to ensure children without an allocated social worker access a social work service, including statutory visits and child in care review and care plan. PPPGs in place to support and guide practice.
- Foster care placements are subject to a number of safeguards, including Social Work and other Tusla professionals’ visits and contact with carers. Garda vetting for foster carers and adult family members. Area plans for CIC reviews, FC reviews, Support & Supervision. Additional supports can be provided locally, and relative care safeguarding visits are conducted prior to relative carer approval.
- The pre-approval model for non-statutory foster care providers is in place and provided by Tusla Children’s Regulation Service. The National Operational Framework for the aforementioned is under review and will be finalised in 2021. It will increase governance and oversight. Market engagement process is taking place with private providers to ensure adequate contracts are in place.

**Planned Actions:**
- Implementation of Alternative Care Strategy.
- Enhancement of the operational guidance for the management of serious concerns and allegations is under way.
- Pre-approval model to be developed for private FC providers.
- Tusla is extending its out-of-hours social work support to include 24-hour telephone support for foster carers.
### Risk Category

**Key Risk**

There is a potential for the non-detection of a high-risk service and a need for an enhanced regulatory management information system to analyse information for timely identification of such services, to address those operating outside required regulatory parameters.

### Controls and Planned Actions

**Controls:**

- There is continual training and awareness of the requirement to report or refer any child protection concerns that may arise through the work of the inspectorate or administrative staff within Children’s Services Regulation.
- A manual internal system audit is in place that is informed by multiple relevant information received on services and previously reported results of services that can identify the levels of regulatory compliance within services.
- There is an oversight structure in place of the assessment and inspection programmes to review findings that may highlight services that could be operating outside of regulatory parameters.
- There is an agreed escalation of high-risk services to the National Registration & Enforcement panel.
- There is a Policy, Practice Threshold and Oversight Committee in place to discuss and disseminate learnings on agreed standardised practice within the inspectorate.
- There is a stakeholder consultation forum in order to discuss and engage with the sector on standardised practice and regulatory requirements.
- There is a regulatory support forum to communicate regulatory requirements to the sector.
- Each year, there are various ‘focused/thematic’ inspections carried out across the sector to review and identify any regulatory compliance issues, e.g. Q2 2020 COVID-19 related inspections commenced.
- Research is undertaken annually on inspection findings and disseminated to the sector.
- There are established teams in the regulatory office to work within specific task functions to improve alignment across the system, standardisation practices and promote specialised learning and development.
- Attendance at committees of Early Year Regulatory Services within Europe to communicate and learn best practice reporting and enforcement procedures.

**Planned Actions:**

- Liaison with the Director of ICT to establish a Tusla case management system.

### Strategic Objective

**Operational Functions**

- Planned Actions:
  - Liaison with the Director of ICT to establish a Tusla case management system.
  - Attendance at committees of Early Year Regulatory Services within Europe to communicate and learn best practice reporting and enforcement procedures.
  - Research is undertaken annually on inspection findings and disseminated to the sector.
  - There are established teams in the regulatory office to work within specific task functions to improve alignment across the system, standardisation practices and promote specialised learning and development.
  - Attendance at committees of Early Year Regulatory Services within Europe to analyse information for timely identification of such services, to address those operating outside required regulatory parameters.

### Controls and Planned Actions

**Controls:**

- There is a national Substantiation Governance Group with representatives from all Tusla directorates supports, monitors and oversees the CASP implementation plan and reports to the SLT.
- There are in place CASP regional leads to facilitate the implementation of the policy.
- A community of practice has been developed in each region and will operate under agreed terms of reference to support practice.
- Regional Retrospective teams have been established across the four regions where all retrospective cases are worked consistently.
- A comprehensive list of key stakeholders has been compiled at regional and national level to capture all interested parties for the briefings.

**Planned Actions:**

- CASP training is to be redeveloped to be accessible online in order to address the requirement for upskilling of relevant staff members on the new policy and requirements.
- A communication plan is to be developed and ready for roll-out once CASP comes into force. In the interim, appropriate responses to CASP queries are addressed on an individual basis.
- The stakeholder engagement plan is to be redeveloped to ensure appropriate consultation post-COVID-19.
- The current project plan will be revised and updated to reflect the new timelines for implementation.
- A number of strategic regional and national engagements with stakeholders, planned to inform about the implementation of the CASP, will be rescheduled.
- Communication engagements are scheduled to take place supported by the CASP national lead, relevant Service Director and Chief Operations Officer, with An Garda Síochána also present. The briefings are planned to include presentations from key Tusla staff, followed by a Q&A session.
## Summary of Annual Financial Statements

For the Year Ending 31st December 2020

The full Annual Financial Statements for 2020 are available online at www.tusla.ie/annualreport20

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### Statement of Revenue Income and Expenditure for the Year Ended 31st December 2020

<table>
<thead>
<tr>
<th>NOTE</th>
<th>2020 €’000</th>
<th>2019 €’000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department of Children, Equality, Disability, Integration and Youth (Vote 40, Subhead A3)</td>
<td>824,146</td>
<td>794,879</td>
</tr>
<tr>
<td>Department of Children, Equality, Disability, Integration and Youth (Vote 40, Other Subheads)</td>
<td>4</td>
<td>19,117</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>4</td>
<td>1,898</td>
</tr>
<tr>
<td><strong>Total Revenue Income</strong></td>
<td>852,343</td>
<td>815,894</td>
</tr>
</tbody>
</table>

| **Expenditure - Pay and Pensions** | | |
| Wages and Salaries | 264,083 | 233,412 |
| Employer PRSI | 25,509 | 22,164 |
| Pensions | 9,610 | 9,815 |
| Agency Pay | 13,359 | 32,283 |
| **Total Pay and Pensions** | 312,561 | 297,674 |

| **Expenditure - Non-Pay** | | |
| Foster Care and After Care Allowances | 118,676 | 119,649 |
| Independent Placement Provision | 142,284 | 130,099 |
| Community, Voluntary and Charitable Organisations | 181,648 | 173,520 |
| Legal Expenses and Guardian Ad Litem Costs | 30,269 | 34,423 |
| General Child Care Services | 19,419 | 17,771 |
| Office and Administration | 36,613 | 44,411 |
| **Total Non-Pay** | 528,909 | 519,873 |

| **Total Expenditure** | 841,470 | 817,547 |

| **Net Operating Surplus/(Deficit) for the Year** | 10,873 | (1,653) |

All gains and losses with the exception of depreciation and amortisation have been dealt with through the Statement of Revenue Income and Expenditure and Statement of Capital Income and Expenditure.


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Pat Rabbitte  
Chairperson  
30th June 2021

Bernard Gloster  
Chief Executive Officer  
30th June 2021

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Statement of Capital Income and Expenditure for the Year Ended 31st December 2020

<table>
<thead>
<tr>
<th>NOTE</th>
<th>2020 €’000</th>
<th>2019 €’000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital Revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department of Children, Equality, Disability, Integration and Youth (Vote 40, Subhead A3)</td>
<td>16,894</td>
<td>13,594</td>
</tr>
<tr>
<td></td>
<td>16,894</td>
<td>13,594</td>
</tr>
<tr>
<td>Expenditure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital Expenditure on Child and Family Agency Capital Projects</td>
<td>15(b)</td>
<td>16,378</td>
</tr>
<tr>
<td></td>
<td>16,378</td>
<td>14,434</td>
</tr>
<tr>
<td>Net Capital (Deficit)/Surplus for the Year</td>
<td>516</td>
<td>(840)</td>
</tr>
</tbody>
</table>

All gains and losses with the exception of depreciation and amortisation have been dealt with through the Statement of Revenue Income and Expenditure and Statement of Capital Income and Expenditure.


Pat Rabbitte
Chairperson
30th June 2021

Bernard Gloster
Chief Executive Officer
30th June 2021

Statement of Financial Position as at 31st December 2020

<table>
<thead>
<tr>
<th>NOTE</th>
<th>2020 €’000</th>
<th>2019 €’000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property, Plant and Equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property</td>
<td>8</td>
<td>80,513</td>
</tr>
<tr>
<td>Plant and Equipment</td>
<td>9</td>
<td>1,536</td>
</tr>
<tr>
<td>Total Non-current Assets</td>
<td></td>
<td>82,049</td>
</tr>
<tr>
<td>Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inventories</td>
<td>10</td>
<td>52</td>
</tr>
<tr>
<td>Trade and Other Receivables</td>
<td>11</td>
<td>8,792</td>
</tr>
<tr>
<td>Cash and Cash Equivalents</td>
<td>12</td>
<td>16,340</td>
</tr>
<tr>
<td>Total Current Assets</td>
<td></td>
<td>25,184</td>
</tr>
<tr>
<td>Current Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trade and Other Payables</td>
<td>13</td>
<td>(56,323)</td>
</tr>
<tr>
<td>Total Current Liabilities</td>
<td></td>
<td>(56,323)</td>
</tr>
<tr>
<td>Net Current Assets / (Liabilities)</td>
<td></td>
<td>(11,139)</td>
</tr>
<tr>
<td>Creditors (amounts falling due after more than one year)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restricted Contributions</td>
<td>14</td>
<td>(537)</td>
</tr>
<tr>
<td>Total Net Assets</td>
<td></td>
<td>50,373</td>
</tr>
<tr>
<td>Capitalisation Account</td>
<td></td>
<td>82,055</td>
</tr>
<tr>
<td>Capital Retained Reserves</td>
<td></td>
<td>578</td>
</tr>
<tr>
<td>Revenue Retained Reserves</td>
<td></td>
<td>(22,260)</td>
</tr>
<tr>
<td>Capital and Reserves</td>
<td></td>
<td>50,373</td>
</tr>
</tbody>
</table>


Pat Rabbitte
Chairperson
30th June 2021

Bernard Gloster
Chief Executive Officer
30th June 2021