



An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

Annual Report 2015





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Tusla – Child and Family Agency

E-mail: info@tusla.ie

Web: www.tusla.ie

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2015 Key Achievements

This section outlines key achievements in 2015 grouped under the five corporate outputs and further grouped by service or function type.

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

Child Protection and Welfare	<ul style="list-style-type: none"> 21% reduction of cases awaiting allocation to a social worker from 2014 to 2015. 65% reduction of high priority cases awaiting allocation to a social worker from 2014 to 2015. Online Child Protection Notification System (CPNS) developed and rolled out. Established a 24 hours Emergency Out of Hours Service (EOHS).
Foster Care Services	<ul style="list-style-type: none"> Published and disseminated the Alternative Care Handbook. Produced a national assessment framework for fostering.
Residential Services	<ul style="list-style-type: none"> Established a national governance structure for Children's Residential Services. Developed a National Information System for Children's Residential Services.
Aftercare Services	<ul style="list-style-type: none"> Commenced implementation of a standardised aftercare allowance. Developed additional drop in services for children receiving aftercare.
Adoption	<ul style="list-style-type: none"> National governance structure established for Adoption Services. 43% reduction in the waiting list for information and tracing service.

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

Policy and Strategy	<ul style="list-style-type: none"> A national policy catalogue produced and a National Policy Oversight Group established. An Evidence Informed Practice Project developed with the Centre for Effective Services. Research strategy developed and implementation commenced.
Quality Assurance	<ul style="list-style-type: none"> Three national quality reviews conducted of child protection and welfare services. National performance dashboard system developed and produced each month. Quarterly integrated performance report developed and produced each quarter. New corporate risk register developed.

Early Years Inspectorate	<ul style="list-style-type: none"> • 74% increase in the inspection rate and implemented new inspection methodologies. • National governance structure established for the Early Years Inspectorate.
Inspection of Non-Statutory CRCs	<ul style="list-style-type: none"> • National governance structure established for the Inspectorate. • 25% increase in the inspection rate and implemented new inspection methodologies.

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

Family Support	<ul style="list-style-type: none"> • Meitheal model implementation commenced and participation strategy launched. • Parenting supports strategy developed and published. • National Counselling Programme established.
Domestic, Sexual and Gender Based Violence	<ul style="list-style-type: none"> • National governance structure for Domestic, Sexual and Gender Based Violence Services established. • Additional outreach services provided for victims of sexual violence.
Commissioning	<ul style="list-style-type: none"> • Commissioning plan developed and data collecting and reporting system established.

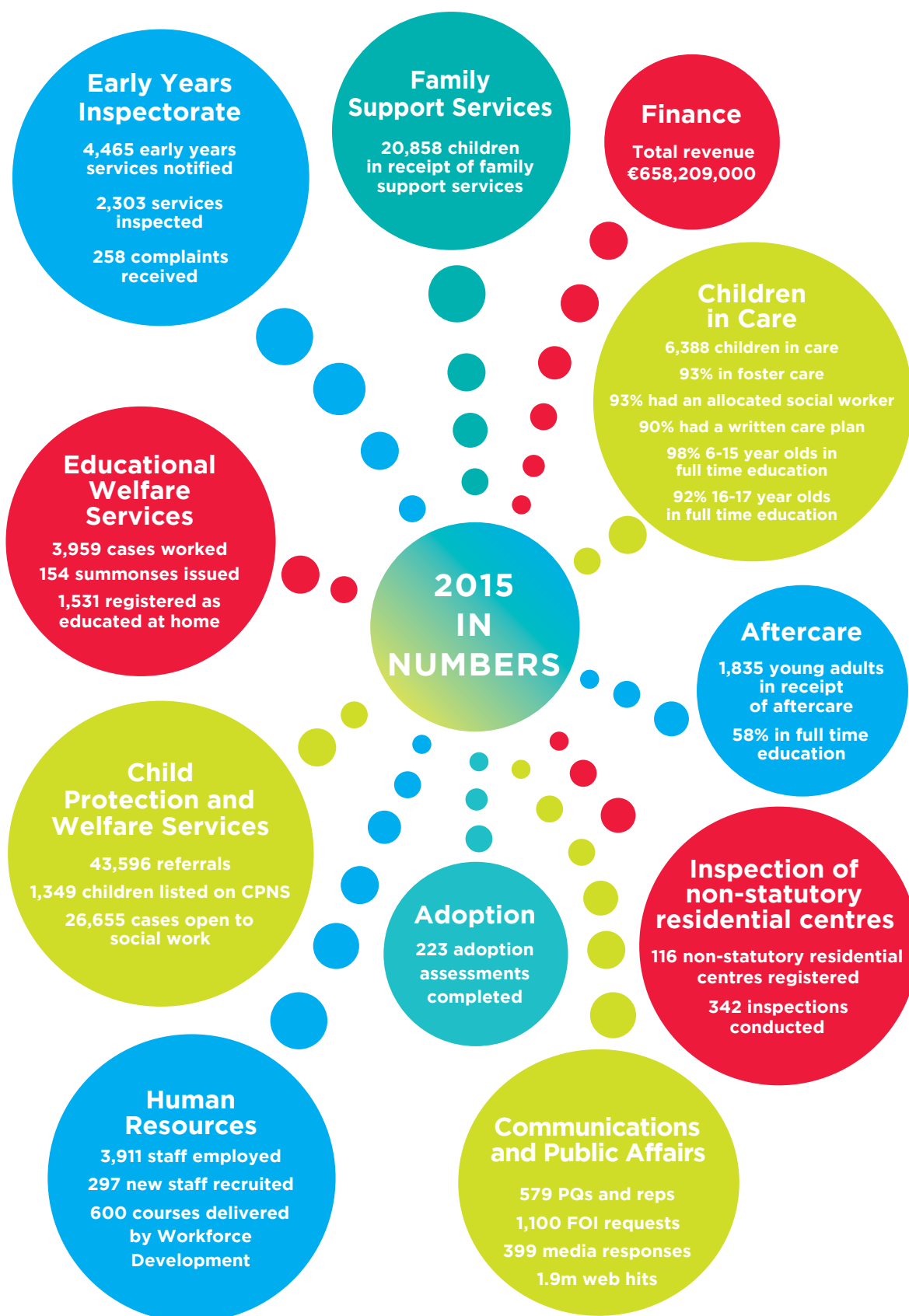
Output D: Attendance, participation and retention in full-time education is embedded in service delivery for all children.

Educational Welfare Services	<ul style="list-style-type: none"> • School Completion Programme governance strengthened by formal funding contracts. • Established an integrated governance structure for the Educational Welfare Service. • Reviewed the needs of specific groups of vulnerable children and specific measures developed.
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Output E: A fit for purpose organisation to deliver on the Agency's strategic intent.

Human Resources	<ul style="list-style-type: none"> • Established an in-house recruitment service called 'Tusla Recruit'. • Delivered 600 courses to 9,000 attendees. • Completed Continuing Professional Development (CPD) strategy. • Established health and wellbeing service for staff.
Financial Management	<ul style="list-style-type: none"> • Developed initial resource allocation model. • Strengthened governance arrangements with external funded agencies.
Estates	<ul style="list-style-type: none"> • Estates strategy developed and implementation commenced. • 70% of vehicle fleet replaced.
Communications	<ul style="list-style-type: none"> • Communications strategy developed. • Launched Prevention, Partnership and Family Support (PPFS) strategy.

2015 in Numbers



Chairperson's Foreword



It gives me great pleasure to present the second Annual Report of the Child and Family Agency. Tusla's mission is, with the child at the centre, to design and deliver supportive, coordinated and evidence-informed services that strive to ensure positive outcomes for children.

In 2015, Tusla commenced the delivery of its three year Corporate Plan. This plan is underpinned by policy guidance and a performance framework provided by the Minister covering the period 2015-2017 and based on an identification of need to improve outcomes for children. The plan articulates five short term outputs which identify the key focus areas for the Agency in its first three years. This strategic direction

informed the Agency's 2015 business plan. The 2015 annual report provides an overview of progress and achievements in the year under review.

The Board has enjoyed an excellent working relationship with the Minister for Children and Youth Affairs, the Chief Executive and members of the Senior Management Team. I have also had the opportunity to meet with many members of staff at various meetings and events throughout the country and to hear first-hand the excellent work that is being undertaken by the Agency's highly committed staff. I have been struck by staff enthusiasm for the Agency where, staff without exception describe a better, if still challenging, working environment.

A key focus for the Agency has been the development of an early intervention model and supported by Atlantic Philanthropies the Agency undertook a significant programme of work in this area.

Progress has proven to be challenging against a background of financial restrictions but reforms have been introduced, services have improved and Tusla is proving responsive to the needs of children by building on the strengths of families and communities.

Much has been achieved to date and highlights include:

- Service Delivery Framework Model implemented.
- Improved service delivery e.g. 21% reduction in cases awaiting allocation in 2015.
- Strengthened accountability with clear line management responsibility.
- Internal quality assurance and integrated performance reports to inform service improvement initiatives.
- Open and transparent communications about responsibilities and activities.
- Allocation of a budget based on needs analysis.
- Evidence Based Approach – National Policy Catalogue; Empowering Practitioners and Practice Initiatives (EPPI) and the early intervention programme PPFS (Prevention, Partnership and Family Support).

Finally, I would like to thank all Tusla staff and its strategic partners for their commitment to delivering high quality services to children and families.



Chairperson

1.0 Introduction

1.1 Overview

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

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

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

Vision, Mission, Values, Behaviours

Tusla has developed an overarching vision as follows:

“All children are safe and achieving their full potential”

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

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

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

Courage and Trust

- Reliable, committed and accountable;
- Professional, ethical and responsible;
- Willing to stand up for our values.

Respect and Compassion

- Putting the individual at the heart of our services;
- Protecting the most vulnerable;
- Respectful and considerate towards all.

Empathy and Inclusion

- Fair, responsive and transparent;
- Promoting collaboration and connected thinking;
- Taking a long-term, whole-system view.

1.2 Corporate Plan 2015-2017 and 2015 Business Plan

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

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

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

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

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

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

Each year a Business Plan is prepared in accordance with the requirements of section 46 of the Child and Family Agency Act 2013. The 2015 Business Plan is the first business plan of a three year cycle based on the Agency's Corporate Plan 2015-17. The 2015 Business Plan is available at www.tusla.ie

1.3 2015 Annual Report

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

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

The 2015 annual report is the second annual report published by the Agency and the first published under the Corporate Plan 2015-17.

The main features of the 2015 annual report are:

- Corporate Plan 2015-17 Progress Year One;
- An overview of Tusla Board, Executive and Corporate Governance;
- Human Resources overview;
- Financial Information summary;
- Quality Assurance and Risk overview;
- Performance and Activity Information for 2015;
- Focus for 2016 – key priorities in the 2016 business plan.

2.0 Corporate Plan 2015-17 Progress - Year One

This chapter outlines the 2015 Business Plan achievements organised according to the five short term outputs of the Corporate Plan 2015-17. Table 2.1 outlines the services or functions covered by each of the five short term outputs and the associated page number.

Short Term Output	Services/Functions Covered
Output A: Tusla's child protection processes and systems are responding to children at risk in a timely manner.	<ul style="list-style-type: none"> • Child Protection and Welfare (page 14) • Foster Care Services (page 15) • General Residential Services (page 16) • Special Care Residential Services (page 17) • Aftercare Services (page 18) • Adoption Services (page 18)
Output B: All processes and systems underpinning children and family policy and services are evidence informed.	<ul style="list-style-type: none"> • Policy and Strategy (page 19) • Quality Assurance (page 20) • Early Years Services Regulation (page 21) • Regulation of Non-Statutory Children's Residential Centres (page 22)
Output C: A targeted range of family and parenting supports.	<ul style="list-style-type: none"> • Prevention, Partnership and Family Support (page 23) • Family Resource Centre Programme (page 24) • Children and Young People Service Committees (page 25) • Assessment, Consultation and Therapy Service (page 26) • National Domestic, Sexual and Gender Based Violence Services (page 26)
Output D: Attendance, participation and retention in fulltime education is embedded in service delivery for all children.	<ul style="list-style-type: none"> • Educational Welfare Services (page 27) • Education in places other than recognised schools (page 28)
Output E: A fit for purpose organisation to deliver on our strategic intent.	<ul style="list-style-type: none"> • Human Resources (page 29) • Finance (page 30) • Estates (page 30) • Information and Communications Technology (page 31) • Legal Services (page 31) • Communications (page 32) • Parliamentary Affairs (page 32)

Table 2.1: Services or functions covered by each of the five short term outputs

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

- Statement of purpose and service activity for 2015 (where applicable);
- 2015 priorities and associated Corporate Plan short term outputs (a full list of Corporate Plan 2015–17 short term outputs is provided in Appendix I);
- 2015 achievements.

SHORT TERM OUTPUT A – EFFECTIVE CHILD PROTECTION SYSTEMS

TUSLA'S CHILD PROTECTION PROCESSES AND SYSTEMS ARE RESPONDING TO CHILDREN AT RISK IN A TIMELY MANNER

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Child Protection and Welfare</p> <p>The purpose of the Child Protection and Welfare service is to meet the Agency's statutory responsibilities in accordance with Child Care Act 1991 and Children Act 2001. The Agency is required to identify and promote the welfare of children at risk or in need of protection and to provide family support services.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> In 2015, 43,596 referrals were made to Child Protection and Welfare Services. 42% of these relate to abuse/neglect and 58% relate to child welfare issues. At end of 2015, there were 26,655 open cases to social work of which 75% were allocated to a social worker – up from 69% in 2014. 	<p>2015 Business Plan Priorities</p> <p>Continue the implementation of the National Childcare Information System (NCCIS).</p> <p>Develop the online Child Protection Notification System (CPNS) and extend access to An Garda Síochána, Out of Hours, GP Service and Hospital Emergency Departments (ED).</p> <p>Develop supporting systems regarding Children First.</p> <p>Corporate Plan Short Term Outputs: A1, A2, A3 and A4.</p>	<ul style="list-style-type: none"> Cases awaiting allocation to a social worker reduced from 8,542 in December 2014 to 6,718 in December 2015 – 21% reduction year on year. High priority cases awaiting allocation reduced from 2,836 in December 2014 to 999 in December 2015 – 65% reduction year on year. Online CPNS fully developed and access extended to An Garda Síochána, Out of Hours services, GP Service and hospital EDs. New project management approach to the development and implementation of NCCIS finalised. NCCIS piloted in the Mid-West, including service upgrades of NCCIS in this area. National Emergency Out of Hours Service (EOHS) established, including foster care placement service and on-call social work service. Automated phone system commissioned to connect on-call staff with the call centre.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Foster Care Services</p> <p>Tusla has statutory responsibility to provide for the protection and care of children whose parents have not given or are unlikely to be able to give adequate protection and care.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> • Of the 6,388 children in care of the State in 2015 – the majority (93%, 5,932) were in foster care. Almost a third of these children (31%, 1832) were in relative foster care. • 93% of children in foster care had an allocated social worker at the end of 2015. • There were 4,445 foster carers approved on the panel of foster carers at year end. 	<p>2015 Business Plan Priorities</p> <p>Dissemination and implementation of new policies and procedures.</p> <p>Development of policies relating to the provision of foster care namely the Placement of Children from other EU countries in the Republic of Ireland.</p> <p>Development of an Alternative Care Strategy.</p> <p>Corporate Plan Short Term Outputs: B3, B6, C4 and D5.</p>	<ul style="list-style-type: none"> • Implemented TACTIC (Teenagers and Children Talking in Care) material for children in care. • Published and disseminated the Alternative Care Handbook. • Developed protocols between the Department of Justice and Equality and Department of Children and Youth Affairs with regard to the placement of children in care. • Issued the National Assessment Framework for Fostering with Implementation plan. • Established children's forums in seven new areas in partnership with EPIC. • Commenced a national consultation with foster carers and social workers in partnership with IFCA to inform the development of the Alternative Care Strategy. • Commenced the development of an Alternative Care Strategy.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>General Residential Services</p> <p>Children are placed in residential care in order to provide a safe, nurturing environment for them when they cannot live at home or in an alternative family environment such as foster care. The requirements for placing a child in a children's residential centre and for the running of these centres are laid out in the Child Care (Placement of Children in Residential Care) Regulations 1995.</p> <p>Residential care aims to provide a physically, emotionally and psychologically safe space, in a planned way, in which children and young people can heal, develop and move forward in their lives. Residential care can be provided by a statutory, voluntary or private provider.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> • The number of children in general residential services at the end of 2015 was 327. • 98% of children in general residential services had an allocated social worker. • 93% of children in general residential services had a care plan. 	<p>2015 Business Plan Priorities</p> <p>Establish National Children's Residential Services (CRS) to put in place the operational and governance structures needed to deliver a national Children's Residential Service.</p> <p>Develop a National Information System to support the safe and effective operation of a national CRS.</p> <p>Corporate Plan Short Term Outputs:</p> <p>B3, B6, C4 and D5.</p>	<ul style="list-style-type: none"> • Established National Children's Residential Services. The new service incorporates Special Care and includes centres from all regions. • Developed National Information System for CRS. • Established databases that provide real time oversight of demand, activity, performance and risk within the service.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Special Care Residential Services</p> <p>Special Care is short term, stabilising and safe care in a secured therapeutic environment. The aim of the Special Care intervention is to provide an individualised programme of support and skilled therapeutic intervention which will enable the child/young person to stabilise and then move to a less secure placement based on the assessed needs of that child/young person.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> • There were 16 children in special care services at the end of 2015. • 100 % of children in special care had a care plan and 100% of children in special care had an allocated social worker. 	<p>2015 Business Plan Priorities</p> <p>Incorporate Special Care into the new National Children's Residential Services structure.</p> <p>Commence preparations for new regulations for Special Care Units as designated centres.</p> <p>Commence works to construct a single occupancy unit in Ballydowd;</p> <p>Commission fire safety upgrade works to take place in Ballydowd, Lucan in 2016.</p> <p>Commence construction works on the new 12 bed Special Care unit in Crannog Nua, Portrane.</p> <p>Corporate Plan Short Term Outputs: B3, B6 and D5.</p>	<ul style="list-style-type: none"> • Special Care is fully incorporated into the new National Children's Residential Service and is benefiting from and contributing to an improved continuum of Children's Residential Services. • A comprehensive gap analysis was commissioned to assess the preparedness for the new regulations for the registration of Special Care centres. • Works commenced on the single occupancy unit in Ballydowd. • Works were commissioned to upgrade Ballydowd fire safety systems and associated certification. • Construction work commenced on the new Special Care unit in Crannog Nua, Portrane.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
Aftercare Services <p>Under section 45 of the Child Care Act 1991, Tusla provides leaving and aftercare services for young people that are responsive and relevant to each young person's circumstances. All young people who have had a care history with the Agency are entitled to an aftercare service. Services are provided on the basis of assessment of need, age and the length of time the young person was in care.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> • 1,835 young adults were in receipt of aftercare at the end of 2015. • 58% of young adults in receipt of aftercare aged 18–22 years are in full time education. 	<p>2015 Business Plan Priorities</p> <p>Implement the National Implementation Plan for Aftercare 2013.</p> <p>Corporate Plan Short Term Outputs: B3 and B6.</p>	<ul style="list-style-type: none"> • Commenced introduction of a standardised aftercare allowance for all young people receiving Aftercare services. • Established a joint agreement with Student Universal Support Ireland (SUSI) to prioritise grant support for all young people receiving aftercare services. • Continued development of drop-in services for children receiving aftercare. • Commenced the establishment of Aftercare Steering Committees on a national basis.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
Adoption Services <p>Tusla plays an important role in assessing possible adoptive parents and also provides services to people who were adopted or fostered and may wish to trace their birth family.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> • 223 adoption assessments completed in 2015. • 795 applications to the tracing service in 2015. 	<p>2015 Business Plan Priorities</p> <p>Established national governance structure for adoption services. Arrangements and guidance for permanency planning in anticipation of new adoption legislation.</p> <p>Improve consistency of practice and decision making.</p> <p>Information and tracing capacity will be strengthened in anticipation of an increase in demand.</p> <p>Corporate Plan Short Term Outputs: B3.</p>	<ul style="list-style-type: none"> • National governance structure established with the exception of the West pending the appointment of a Principal Social Worker in 2016. • Commenced development of a children in care to adoption handbook. • Establishment of working groups to improve the quality of service provision to those wishing to adopt. • Service improvement plan introduced to address the waiting list resulting in a 43% reduction of the number on the waiting list for information and tracing in 2015.

SHORT TERM OUTPUT B – EVIDENCE BASED SERVICES

ALL PROCESSES AND SYSTEMS UNDERPINNING CHILDREN AND FAMILY POLICY AND SERVICES ARE EVIDENCE INFORMED

Function	2015 Priorities	2015 Achievements
<p>The Policy and Strategy Directorate</p> <p>The Policy and Strategy Directorate provides a specialist advisory function to the Chief Executive and Senior Management Team to inform long term strategic planning and the development of key policy actions to achieve the organisation's strategic objectives.</p>	<p>2015 Business Plan Priorities</p> <p>Establish and maintain a standardised National Policy Catalogue.</p> <p>Conduct an impact analysis in relation to proposed Constitutional amendment and new legislation including Children First, Aftercare, Adoption and Family Relationships.</p> <p>Implement a research strategy and strengthen research capacity.</p> <p>Corporate Plan Short Term Outputs: A4, B1, B3, B7, B9, B10, E16 and E20.</p>	<ul style="list-style-type: none"> • Policy catalogue is now in place and a National Policy Oversight Group has been established. • An Evidence Informed Practice Project has been developed with the Centre for Effective Services. • Submissions were made to the DCYA regarding the impact of legislative changes including Children First, Aftercare and Adoption. • Research strategy developed and implementation commenced.

Function	2015 Priorities	2015 Achievements
<p>Quality Assurance Directorate</p> <p>The Quality Assurance Directorate is responsible for driving and supporting continuous improvement and the delivery of consistent high quality services to all service users, regardless of location. The Directorate also develops mechanisms to embed self-evaluation to ensure Tusla is a self-aware organisation that knows and understands where its strengths, where improvements are required and addresses risk in a proportionate manner.</p>	<p>2015 Business Plan Priorities</p> <p>Develop and commence roll out of an electronic incident management system.</p> <p>Develop complaints, feedback and protective policies and procedures with supporting education programmes.</p> <p>Carry out a national analysis of key learning from incidents and complaints to support continuous improvement.</p> <p>Develop, and commence roll out of Quality Assurance Framework and supporting material, develop audit methodology and conduct national audit on business process or practice.</p> <p>Conduct pilot of Institute of Health Care Improvement (IHI) Education Programme.</p> <p>New integrated reporting system which distinguishes between management and performance information.</p> <p>Establish an integrated risk management system for the Agency.</p> <p>Corporate Plan Short Term Outputs: A5, A6, A7, B4, B5, B9 and E6.</p>	<ul style="list-style-type: none"> Tusla complaints policy <i>Tell Us</i> developed. National Incident Management System (NIMS) configured to support the management of complaints. Draft Protected Disclosure Policy and Good Faith Reporting Policies and Procedures developed. Rationalisation and development of new metrics completed. Outcomes based metrics project commissioned. National performance dashboard developed and published each month. Quarterly integrated performance and activity report developed and published throughout 2015. Quality Assessment and Improvement Framework drafted and quality audit methodology developed. Learning reports regarding HIQA inspections and complaints developed. Three national quality reviews conducted. Learning reports regarding HIQA inspections and complaints developed. Pilot of IHI education programme completed. The implementation of an electronic incident management system has commenced. Corporate risk register developed. Development of organisational risk management policy commenced. Development of incident management policy commenced. Developed the Agency's 2015 Business Plan. Developed a new system for tracking business plan actions.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Early Years Services Regulation</p> <p>Tusla is responsible for inspecting and registering early years services, including; pre-schools, play groups, nurseries, crèches, day-care and similar services which cater for children aged 0 to six years, under the Child Care (Pre-School Services) Regulations 2006. The Inspectorate is located in the Quality Assurance Directorate.</p> <p>Key Service Activity</p> <ul style="list-style-type: none"> • 4,465 early years services were notified to the Agency at the end of 2015, of which 137 were new. • 2,303 inspections were conducted in 2015. • 258 complaints were received in 2015. 	<p>2015 Business Plan Priorities</p> <p>Establish the Early Years Inspectorate as a nationally led and nationally delivered service delivery unit with a central governance structure.</p> <p>Develop an ICT system to support intelligence driven inspection within the Early Years Inspectorate.</p> <p>Increase capacity of the Inspectorate through the recruitment of Early Years Inspectors.</p> <p>Corporate Plan Short Term Outputs: D4.</p>	<ul style="list-style-type: none"> • Inspection rates increased by 74% year on year. • Established the Early Years Inspectorate as a nationally led and nationally delivered service delivery unit with a central governance structure. • A Quality Improvement Office has been established and a number of projects have commenced which include consultation on and revision of the standard operating procedures, policies and guidelines. • Commenced a project to define the thresholds of evidence required for inspecting against the Early Years National Standards. • Implemented programme of continued professional development for existing inspectors and a comprehensive induction programme for new inspectors. • A national ICT system for new registration has been scoped out in association with Pobal. • Four new inspection and registration managers recruited to supported early years inspectors. • New Early Years Inspectors recruited and deployed to areas of greatest need. • New models of inspection introduced. The Inspectorate introduced a focused inspection framework which was informed by previous research undertaken by Tusla.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Regulation of Non-Statutory Residential Services.</p> <p>The purpose of the Non-Statutory Residential Regulatory function is to register and inspect Non-Statutory Children's Residential Centres under Part VIII of the Child Care Act 1991. This function is located in the Quality Assurance Directorate.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> 116 non-statutory children's residential centres were registered with the Agency in 2015, of which 91 were private and 25 were voluntary. 335 inspections and monitoring visits were conducted across this sector. 	<p>2015 Business Plan Priorities:</p> <p>Reform of the inspection and monitoring programme for private and voluntary children's residential centres.</p> <p>Corporate Plan Short Term Outputs:</p> <p>B4.</p>	<ul style="list-style-type: none"> Increased inspection rate by 25%. Established the Inspectorate as a nationally led and nationally delivered service delivery unit with a central governance structure. Commenced publication of inspection reports on the Tusla website. Developed and implemented new inspection methodologies. Developed and implemented systems to support intelligence driven regulatory activity.

SHORT TERM OUTPUT C – FAMILY AND PARENTING SUPPORT

A TARGETED RANGE OF FAMILY AND PARENTING SUPPORTS

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Prevention, Partnership and Family Support (PPFS)</p> <p>Tusla is committed to providing high quality services to children and families at the earliest opportunity across all levels of need. PPFS involves providing help to children and families at an early stage to prevent situations getting worse. This involves working in partnership with families, other agencies and professionals to respond quickly to the needs of children.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> • 23,038 children and 17,131 families were referred in 2015. • 20,858 children and 13,305 families in receipt of family support services at end 2015. 	<p>2015 Business Plan Priorities</p> <p>Implement the Meitheal model to enable integrated service delivery through prevention, partnership and family support.</p> <p>Develop the appropriate mechanisms to engage with children and key partners effectively.</p> <p>Implement a Participation Strategy;</p> <p>Implement Parenting Support Strategy.</p> <p>Corporate Plan Short Term Outputs: C1 and C8.</p>	<ul style="list-style-type: none"> • Meitheal model implemented with managers and project teams in place to enable integrated service delivery through prevention, partnership and family support. • Staff assigned to support implementation of the Child and Family Support Networks and Meitheal in areas. • New performance indicators and definitions for Meitheal have been developed. • National training programme progressed with 130 trainers trained. • Established a national working group on participation. • PPFS Managers in place in all areas. • Initiated development of a quality assurance framework for the participation project. • Parenting support strategy developed and published. • Held national parenting conference. • Parenting 24/7 website resource established. • Commenced implementation of a participation strategy.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Family Resource Centre Programme</p> <p><i>National Family Resource Centre Programme</i></p> <p>To support all Family Resource Centres (FRC) to achieve optimum outcomes for young people and families they serve.</p> <p>National Counselling Grants Scheme</p> <p>To ensure that all recipients of Tusla funding under the Counselling Grants Scheme deliver high quality counselling services.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> Delivered 313 evidence based parenting programmes delivered with 1,703 parents and 907 children participating. 343 organisations were funded to provide counselling services nationwide, 20 of the larger organisations funded provided over 45,000 counselling sessions to more than 8,000 people, of these 24% were children. 91 referrals were received by FRCs from Meitheals. 228 Meitheal meetings were attended by FRCs. 	<p>2015 Business Plan Priorities</p> <p>Quarterly audits to monitor FRCs' contribution to Meitheal and Service Delivery Framework.</p> <p>Corporate Plan Short Term Outputs: C7.</p>	<ul style="list-style-type: none"> Increased engagement with Meitheal National Practice Model and Children and Young People's Services Committees (CYPSC). In 2015, 22 FRCs participated on their local CYPSC. National Counselling Programme established. Two new FRCs were piloted. Information regarding FRC engagement with Meitheal is produced on a quarterly basis via the SPEAK FRC National Programme Database.

Service Area	2015 Priorities	2015 Achievements
<p>Children and Young People Service Committees (CYPSC)</p> <p>The purpose of the CYPSC structure is to improve outcomes for children and young people through local and national interagency working by bringing together the main statutory, community and voluntary providers. They provide a forum for joint planning and coordination of activity to ensure that children, young people and their families receive improved and accessible services. CYPSCs plans include consideration of local needs across the five outcome areas set out in 'Better Outcomes Brighter Futures' policy framework.</p>	<p>2015 Business Plan Priorities</p> <p>Establish a CYPSC in each area.</p> <p>Ensure a CYPSC coordinator is in place for each area.</p> <p>Corporate Plan Short Term Outputs: C1.</p>	<ul style="list-style-type: none"> • Additional CYPSCs and coordinator posts in place.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
Assessment, Consultation and Therapy Service (ACTS) ACTS is a national specialised clinical service which has been developed in order to provide multi-disciplinary consultation, assessment and focused interventions to young people who have high risk behaviours associated with complex clinical needs. Key Service Activity: <ul style="list-style-type: none"> • 227 referrals for young people were made to ACTS in 2015. • A total of 449 young people received services from ACTS in 2015. 	2015 Business Plan Priorities Develop and implement plan for expansion of ACTS service incorporating additional posts to establish a service for young people who exhibit sexually harmful behaviour. Corporate Plan Short Term Outputs: C3.	<ul style="list-style-type: none"> • A Tusla/HSE Child and Adolescent Mental Health Services (CAHMS) National Operations Group was established. • Therapeutic plans in place for all young people in Special Care. • 99% of young people referred to ACTS engaged with the service. • All young people in the children's detention schools received a mental health screening assessment. • Multi-disciplinary individual therapeutic plans were devised for all young people in Special Care. • Clinical governance was strengthened in the ACTS team in 2015. • Four posts were progressed for a new national clinical service for children who engage in sexually harmful behaviour.

Service Area	2015 Priorities	2015 Achievements
National Domestic, Sexual and Gender Based Violence Services (DSGBV) The National DSGBV Services provides a single line of accountability for DSGBV services in line with Tusla commitments under the second national strategy for the sector. It also provides oversight and support for the delivery of services that respond to the needs of those that experience domestic and sexual violence.	2015 Business Plan Priorities Establishment of nationally managed DSGBV Programme. Development of framework for commissioning from 2016 for both DSGBV services, aligned to Tusla's Commissioning Strategy. Corporate Plan Short Term Outputs: C6.	<ul style="list-style-type: none"> • National governance structure established, with a consolidated national budget and single grants register. • Additional staff recruited for national team to support service delivery and development. • Expanded outreach services commissioned for victims of sexual violence in northern part of the country.

SHORT TERM OUTPUT D - PROMOTING FULL TIME EDUCATION

ATTENDANCE, PARTICIPATION AND RETENTION IN FULLTIME EDUCATION IS EMBEDDED IN SERVICE DELIVERY FOR ALL CHILDREN.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Educational Welfare Service</p> <p>The Education Welfare Service (EWS) is a national service that holds the statutory responsibility for ensuring that all children attend school or otherwise receive an education. It comprises the statutory Educational Welfare Service and is supported by non-statutory services, Home-School-Community-Liaison (HSCCL) and the School Completion Programme (SCP).</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> The statutory service engaged with 3,959 children from September 2014 – December 2015; 516 School Attendance Notices (SANs) were issued to parents in respect of 342 children; 154 summonses issued to parents in respect of 102 children. 	<p>2015 Business Plan Priorities</p> <p>Develop a workload plan for the provision of statutory services within Educational Welfare Officer roles.</p> <p>Commence alignment of Educational Welfare Services with the Service Delivery Framework.</p> <p>Corporate Plan Short Term Outputs: D1, D2 and D3.</p>	<ul style="list-style-type: none"> Additional EWS staff recruited. Commenced development of caseload management system. Completed review of “brief interventions”. School Completion Programme governance put in place. Integrated governance structure for EWS established. Commenced alignment of EWS within the Service Delivery Framework including case management tools, EWS practice model and Meitheal. Reviewed the needs of specific groups of vulnerable children and specific measures developed.

Service Area and 2015 Activity	2015 Priorities	2015 Achievements
<p>Education in places other than recognised schools.</p> <p>Under section 14 of the Education (Welfare) Act 2000, the Educational Welfare Service is charged with ensuring that all children educated at home or in places other than recognised schools, receive a certain minimum education.</p> <p>Key Service Activity:</p> <ul style="list-style-type: none"> • 1,531 children were registered as receiving home education. • 366 assessments of the education being received by children educated at home were carried out in 2015 under section 14 of the Education (Welfare) Act 2000. 	<p>2015 Business Plan Priorities</p> <p>Conduct consultation regarding section 14 assessment process and identify recommendations.</p> <p>Establish monthly activity recording systems for KPIs.</p> <p>Review management of assessment and registration service.</p> <p>Corporate Plan Short Term Outputs: D1 and D3.</p>	<ul style="list-style-type: none"> • Consultation on section 14 assessment guidelines completed. • Successfully managed a 7% increase in assessments. • Monthly activity data recording set up and implemented. • Consultation established in order to place this service within Tusla Quality Assurance Directorate.

SHORT TERM OUTPUT E - AN ORGANISATION FIT FOR PURPOSE

A FIT FOR PURPOSE ORGANISATION TO DELIVER ON THE AGENCY'S INTENT.

Function	2015 Priorities	2015 Achievements
<p>Human Resources</p> <p>The purpose of the HR directorate is to ensure a strategic approach to the management of human resources aligned to the organisation's intended future direction.</p> <p>The key services that the HR directorate provides are:</p> <ul style="list-style-type: none"> • Workforce Learning and Development. • Employee Wellbeing and Welfare. • Recruitment and Talent Management. • Employee Relations and Industrial Relations. 	<p>2015 Business Plan Priorities</p> <p>Continue to strengthen the HR team to meet the demands of the service.</p> <p>Develop employee wellbeing and welfare service and promote service to staff.</p> <p>Continue to build on the processes and procedures in place with HSE shared services.</p> <p>Commence clerical administration review.</p> <p>Enhance employment relations under the National Joint Council.</p> <p>Corporate Plan Short Term Outputs: E1, E8, E9, E10, E11, E21, E22, E23, E26, E27 and E28</p>	<ul style="list-style-type: none"> • Completed the review of the current organisational model and structure of Tusla. • Commenced development of the HR strategy. • Completed a review of recruitment and retention to assist in the development of the HR Strategy. • Training needs analysis concluded with mid-level managers to identify priority learning and development needs and new standardised training courses developed in response. • Completed Strategy for Continuing Professional Development (CPD). • Leadership Development Programmes commissioned and delivered to a target group of multidisciplinary managers. • Leadership training programme for first time managers. • Established Workforce Learning and Development under national governance structure. • Recruited 10 new training and development posts and delivered 600 courses to 9,000 attendees. • National Social Work Survey completed by the Centre for Effective Services on interventions employed or required by social workers. • Online survey completed to identify learning and development needs of staff regarding DSGBV. • Established Health and Wellbeing service. • Completed wellbeing survey. • Critical Incident Stress Management (CISM) Work positive survey completed. • Employee Assistance Service promoted to staff. • Participated in research with Trinity College in relation to resilience of social workers. • Established an in-house recruitment service called Tusla Recruit. • Strengthened management information and reporting systems for HR.

Function	2015 Priorities	2015 Achievements
Finance The purpose of the Finance Directorate is to support and assist the Agency in operating in the most efficient and effective manner possible and within the allocated funding and is responsible for the following: <ul style="list-style-type: none"> Managing accounting, treasury and financial reporting operations. Developing and managing internal controls to mitigate risk, as well as reporting on Tusla's financial position. Developing best practice approaches and systems to inform resource allocation and value for money. 	2015 Business Plan Priorities Develop resource allocation plan. Enhance financial and governance processes. Develop value for money strategic plan. Corporate Plan Short Term Outputs: E4, E5 and E7.	<ul style="list-style-type: none"> Improved processes and systems to address value for money issues. Commenced revision of financial controls and new processes. Governance arrangements with external funded agencies under development. Produced Tusla's first Annual Financial Statement for 2014. Established a separate budget and reporting for Residential Services. Continued consolidation and enhancement of financial, payroll and financial report systems.

Function	2015 Priorities	2015 Achievements
Estates The Estates Team is responsible for the development and implementation of a strategy to ensure that the Agency has the necessary capacity to deliver services in optimum surroundings and in locations that are accessible to service users and staff.	2015 Business Plan Priorities Complete audit and validation of estates inventory. Corporate Plan Short Term Outputs: E3 and E15.	<ul style="list-style-type: none"> Estates Strategy developed and implementation commenced. Property audit and validation of estates inventory completed. Commenced two major capital projects in Special Care. Facility upgrades completed to address critical health and safety requirements. 70% of the current vehicle fleet replaced in 2015.

Function	2015 Priorities	2015 Achievements
Information and Communications Technology (ICT) The purpose of the ICT Team is to develop and implement an ICT strategy for Tusla and provide day-to-day support to maintain and improve ICT services.	Corporate Plan Short Term Outputs: E2.	<ul style="list-style-type: none"> Established ICT infrastructure for national office and other service delivery offices. Developed Child Protection Notification System (CPNS) database. Rationalised three organisational ICT networks into two. Provided ICT project support to key strategic projects and ensured value for money and compliance with good practice. Received DPER approval for ICT operations and projects. Implemented a number of ICT enhancements and upgrades to improve operational efficiency. Commenced the procurement of a strategic partner to support the development of the ICT strategy.

Function	2015 Priorities	2015 Achievements
Legal Services The purpose of the in-house Legal Services Unit is to provide specialist legal services in the area of child care law and corporate advices. The unit also coordinates the work of 31 member firms, Agency staff and the DCYA in order to ensure a consistent and legally compliant approach to cases and the implementation of laws, policies and practices.	Corporate Plan Short Term Outputs: A7 and E12.	<ul style="list-style-type: none"> Capacity of in-house Legal Service strengthened by recruiting two solicitors to increase the amount of work dealt with in-house, decreasing reliance upon external service providers and reducing legal fees. Dealt with all disclosure requests, section 20 reports, section 3 matters in-house and set up a legal helpdesk to receive all general legal queries from staff within Tusla eliminating member firm fees in respect of same. Dealt with all High and Supreme Court matters not directly arising from child care proceedings.

Function	2015 Priorities	2015 Achievements
Communications <p>The purpose of the Communications Unit is to oversee the implementation of the Agency's communications strategy. This involves managing media engagement and ensuring a consistent approach to internal and external communications and branding.</p>	2015 Business Plan Priorities <p>Develop a communications strategy. Embed a culture of effective communications. Develop and issue a branding protocol.</p> <p>Corporate Plan Short Term Outputs: E13, E14, E16, E17, E18 and E19.</p>	<ul style="list-style-type: none"> Communications strategy developed. Responded to 399 media queries. Branding protocols developed. Branded literature developed across a range services. National launch of the PPFS project. Learning seminar in relation to the National Review Panel reports. Crisis communications support and training to senior managers.

Function	2015 Priorities	2015 Achievements
Parliamentary Affairs <p>The primary role of Tusla's Parliamentary Affairs Division (Tusla PAD) is to manage the interface between Tusla, the Department of Children and Youth Affairs and the Oireachtas by organising, developing and monitoring the efficient conduct of Tusla Parliamentary Affairs. This work includes responding to parliamentary questions, representations, oral day questions, topical issue debates, joint committee and leaders' questions, maintaining records and preparing performance reports.</p>	2015 Business Plan Priorities <p>Ensure timely and effective Parliamentary Affairs service.</p> <p>Corporate Plan Short Term Outputs: E13.</p>	<ul style="list-style-type: none"> Responded to 342 parliamentary questions, of which 284 were Ministerial parliamentary questions. Total number of representations responded to in 2015 was 237.

3.0 Tusla Board, Executive and Corporate Governance

This section provides details of Tusla's Board and Senior Management Team in 2015.

3.1 Tusla Board

The Board is the governing body of the Agency and was first established on 1 January 2014. Its membership includes a Chairperson, a Deputy Chairperson and seven ordinary members who have been appointed by the Minister. The Board members come from a range of health and social care professions and from industry and are recognised as having specific experience and expertise in matters connected with the Agency's functions.

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

During 2015, the Board met on 11 occasions during the year and attendance is outlined as follows:

Board Member	Meetings Attended
Norah Gibbons, <i>Chairperson</i>	11
Gary Joyce, <i>Deputy Chairperson</i>	10
PJ Fitzpatrick	9
Noel Kelly	10
Sylda Langford	10
Ita Mangan ¹	5
Gary O'Donnchadha	8
Rory O'Ferrall	9
Noelle Spring	10

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

The Quality Assurance and Risk Committee:

Supports the Board's oversight of the quality and safety of services provided to children and families by the Agency. The committee met five times in 2015 and was as follows:

Quality Assurance and Risk Committee Membership	Meetings Attended
Sylda Langford, <i>Chair</i>	5
Gary O'Donnchadha	4
Noelle Spring	4
Bernadette Costello (Independent Member)	4
<i>In attendance:</i>	
Norah Gibbons	1

¹ Resigned 29 May 2015.

The Audit Committee:

Supports the Board by monitoring the Agency's compliance with its statutory functions and the effectiveness of the corporate governance, financial management, procurement and internal audit arrangements. The committee met six times in 2015 and was as follows:

Audit Committee Membership	Meetings Attended
Rory O'Ferrall, Chair	6
PJ Fitzpatrick	6
Sylda Langford	6
Richard George (Independent Member)	5
<i>In attendance:</i>	
Norah Gibbons	3

The Organisation Development, Succession and Remuneration Committee: Supports the Board by monitoring the organisational needs and managerial development of the Agency. The committee met five times in 2015 and was as follows:

Organisation Development, Remuneration and Succession Committee Membership	Meetings Attended
Gary Joyce, Chair	5
Norah Gibbons	5
Noel Kelly	5
<i>In attendance:</i>	
Sylda Langford	1
Gary O'Donnchadha	1
Rory O'Ferrall	1
Noelle Spring	1

The Governance Committee:

Supports the Board's responsibilities regarding governance. This committee did not meet in 2015 due to the resignation of the Chair of the Governance Committee from the Board. During this period the Board assumed the responsibilities of the Governance Committee.

3.2 Tusla Executive

The Chief Executive, together with the Senior Management Team, manages the implementation of strategy in line with the Agency's statutory responsibilities and Corporate Plan. During 2015 the Senior Management Team comprised the following individuals:

Gordon Jeyes, Chief Executive
Fred McBride, Chief Operations Officer
Colette Walsh, Director of Human Resources
Brian Lee, Director of Quality Assurance
Pat Smyth, Director of Finance
Gerard McKieran, Director of Change and Special Projects
Eibhlin Byrne, Director of Educational Welfare Services (Interim)
Cormac Quinlan, Director of Policy and Strategy (Interim)²

In 2015 a number of subgroups of the Senior Management Team were set up. These included:

- Employment Monitoring Group;
- Quality, Risk and Service Improvement Action Group;
- National Policy Oversight Group.

3.3 Corporate Governance

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

The 2009 Code of Practice for the Governance of State Bodies is issued by the Department of Public Expenditure and Reform and sets out standards of good practice in relation to Board leadership and effectiveness, remuneration, accountability and relations with stakeholders. A revised version of the Code of Practice for the Governance of State Bodies is due to be published in 2016 by the Department of Public Expenditure and Reform.

Code of Governance

The Agency is required under section 5 of the Act to prepare and submit a code of governance to the Minister for Children and Youth Affairs for approval. In 2015, the Board approved Tusla's first *Code of Governance*. The purpose of the Code is to provide a framework of good practice corporate governance and oversight. Tusla's *Code of Governance* comprises a number of guiding principles, standards, policies and other procedures which comply with the Agency's statutory obligations, relevant guidelines and is in line with minimum standards of best practice. The Minister approved Tusla's *Code of Governance* subject to some minor additions. It is recognised that corporate governance will continue to evolve and therefore Tusla's *Code of Governance* will be reviewed and updated periodically.

² Paul Harrison retired from this post in May 2015.

Standards of Integrity and Codes of Conduct

In 2015, the Board approved its *Standards of Integrity and Codes of Conduct* in accordance with section 36 of the Act and the Ethics in Public Office Acts 1995 – 2001. The *Standards of Integrity and Codes of Conduct* sets out a clear framework within which employees must work. The Agency expects those employed directly or indirectly or providing services or advice to, or on behalf of, Tusla to meet the standards set out for employees.

Board Effectiveness Review

In 2015, the Board commissioned an independent assessment of the effectiveness and performance of the Board in the context of best practice in corporate governance and in line with the 2009 Code of Practice for the Governance of State Bodies. The assessment involved:

- A review of documentation, Board and Committee papers;
- Online survey and one to one consultations with the Board and Senior Management Team;
- Assessment against best practice and the Code of Practice for the Governance of State Bodies 2009.

The overall conclusion was that individual Board members are satisfied that the Board works well and operates effectively. The Board was satisfied with the current mix of skills and experience on the Board and identified the skills and experience required when recruiting new members to the Board. The review also found that the Tusla Board provided good oversight to date by focusing on the priority issues to enable the organisation to transition from a start-up, survival to a position of greater sustainability. It is the intention of the Board to review in detail the recommendations of the evaluation process.

Measuring Compliance

Compliance checklists are used to assist in monitoring Tusla's compliance with the legal and governance obligations as set out in the Act and the Code of Practice for the 2009 Governance of State Bodies.

The checklists are designed to assist in the process of establishing, controlling, reviewing and assessing the Agency's compliance. The compliance checklists, upon completion, are submitted to the Governance Committee of the Board and then submitted to DCYA.

In 2015, this process identified sufficient and appropriate evidence to demonstrate that Tusla is in compliance with its legal and statutory obligations and with the 2009 Code of Practice for the Governance of State Bodies.

4.0 Human Resources

The following section provides an overview of Tusla's workforce during 2015.

4.1 Workforce Breakdown

At year end there were 3,460 whole time equivalent employees (WTE) working in Tusla. The total headcount at the end of 2015 was 3,911. Table 4.1 provides an overview of the workforce in terms of staffing category and WTE.

Starters by Grade	Total 2015
Social Work	1,401.8
Social Care	1,125.4
Admin and Management	548.95
Family Support	171.7
Other Staff Grades	144.1
Educational and Welfare	68.01
Overall Total	3,460

Table 4.1: Employment by WTE and grade group

4.2 Absenteeism

In 2015, the level of absenteeism showed a decrease from 2014 which can be attributed in part to the introduction of enhanced monitoring and a new sick leave scheme. Absenteeism refers to unscheduled employee absences other than annual leave, public holidays, maternity leave and jury duty and table 4.2 outlines levels of absenteeism in the Agency by service group.

Absenteeism by Grouping	December 2014	December 2015
Residential Services	8.70%	8.22%
Corporate	2.19%	1.08%
Dublin Mid Leinster	4.07%	5.34%
Dublin North East	4.84%	3.55%
South	6.05%	4.64%
West	3.57%	5.33%
Total Absenteeism Rate	5.55%	5.23%

Table 4.2: Absenteeism by Grouping, December 2014/December 2015

4.3 Employment Monitoring Group

In 2015, the Employment Monitoring Group (EMG) operated within the Agency's employment control framework and approval processes. The EMG has the following responsibilities for employment monitoring in Tusla:

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

Table 4.3 outlines the requests monitored and tracked by the EMG in 2015:

Actions	2015
Replacement Posts, including transfers, promotional, resignation, retirements	417
Maternity Leave Requests	135
Temporary Appointments	77
Amendments to Hours	17
New Posts	127
Total Positions considered in 2015 by the Employment Monitoring Group	773

Table 4.3: EMG Activity in 2015

4.4 Recruitment

In 2015, Tusla recruited 297 new posts across a number of different disciplines, the vast majority of which were social work. The recruitment process was supported by the ongoing partnership with the HSE National Recruitment Services (NRS) and all recruitment activity was reported to the Commission for Public Service Appointments.

A review of recruitment took place in 2015 and as a result the Agency established its own recruitment service called Tusla Recruit. Tusla will continue to strengthen the recruitment team throughout 2016 and its relationship with recruitment partners in the HSE National Recruitment Service and the Public Appointments Service.

Table 4.4 provides a summary of recruitment in 2015.

Starters by Grade	Total 2015
Social Work	180
Social Care	35
Admin and Management	61
Other Staff Grades	15
Educational Welfare	6
Overall Total	297

Table 4.4: Summary of Recruitment in 2015

4.5 Employee Relations

Throughout 2015 there continued to be positive engagement with staff representative bodies. The National Joint Council was established in 2014 and continues to meet every two months as a forum for discussion on relevant staff and management issues.

As part of the framework agreement, a clerical administration review commenced in 2015 and remains ongoing. The first phase was completed in 2015.

The memorandum of understanding (MOU) agreed between Tusla and the HSE on the establishment of the Agency continued to operate throughout 2015, thus assisting in ongoing employee relations matters at a regional level.

4.6 Workforce Learning and Development

Workforce Learning and Development (WLD) had responsibility for all learning and development activities within Tusla throughout 2015. A full programme of learning and development activities, identified through training needs analysis of staff and organisational priorities was provided throughout 2015.

In addition, WLD are leading on a range of initiatives such as bespoke leadership and management development programmes and the development of a framework for engagement with third level colleges.

4.7 Employee Health and Wellbeing

Employee Wellbeing and Welfare provides the necessary systems and processes to enable staff to reach and maintain their full potential to deliver a quality service. Tusla continued to work with the HSE under the agreed memorandum of understanding throughout 2015. Tusla took part in a Critical Incident Stress Management (CISM) Work Positive Review in the later stages of 2015 and it is envisaged that this review and recommendations, if agreed, will be implemented in 2016.

5.0 Quality Assurance and Risk

This section outlines the key quality and risk developments in 2015.

5.1 Self Evaluation and Quality Assurance

Tusla's Quality Assurance and Monitoring Team is responsible for the monitoring and review of statutory residential, special care, child protection and foster care services. A number of reviews and monitoring activities took place during 2015. A risk and intelligence led approach is used to target areas/services where service improvement and monitoring activity is most needed.

Statutory Residential Centres

At the end of 2015, there were 37 statutory residential centres (excluding Special Care centres) operating. In accordance with the National Standards for Children's Residential Centres, the Quality Assurance and Monitoring Team conducted a total of 117 monitoring visits in 2015.

Statutory Centres	2015
Number registered at end of 2015	DML = 9 DNE = 11 South = 12 West = 5 Total = 37
Total number of monitoring visits during 2015	DML = 10 DNE = 7 South = 54 West = 46 Total = 117

Table 5.1: Statutory residential centres monitored

Special Care Centres

The Quality Assurance and Monitoring Team for Special Care centres undertakes regular monitoring visits to each of the three Special Care centres around the country. A total of 43 monitoring visits took place during the year.

Special Care	2015
Total number of monitoring visits during 2015	Ballydowd = 14 Coovagh = 10 Gleann Alainn = 19 Total = 43

Table 5.2: Special care centres - monitoring visits by centre

Foster Care

The Quality Assurance and Monitoring Team for foster care undertake monitoring visits to assess compliance with the National Standards for Foster Care. A total of 57 monitoring visits were carried out across Tusla regions in 2015.

National Quality Reviews

Three national reviews were carried out in 2015 by the Quality Assurance Directorate;

1. National Review of the Standard Business Processes for Child Protection and Welfare Services;
2. National Review of Cases Awaiting Allocation to a Social Worker;
3. National Review of the Child Protection Notification System (CPNS) and cases open to Social Work Teams.

The National Review of the Standard Business Processes (SBP) examined how the SBPs were being applied by social work teams across the country. The SBPs are the standardised procedures and forms which social workers must adhere to when accepting a referral and undertaking the tasks of screening and initial assessment of a child abuse or welfare concern reported to them.

The National Review of Cases Awaiting Allocation was conducted to undertake a comprehensive risk analysis of unallocated cases and associated management and practice systems.

The purpose of the national review of the CPNS was to determine if children listed on the CPNS were appropriately listed and were being managed appropriately. Other factors in the review included considering if there is a correlation between the number of cases awaiting allocation in an area and low numbers listed as 'active' on the CPNS. The report of this review will be published in 2016 and will be used to inform service improvements.

An additional national quality review was commenced at the end of 2015 regarding retrospective cases of abuse. The purpose of this exercise is to establish clear metrics regarding the number of cases of retrospective abuse and review the systems to manage these cases.

5.2 Quality Assurance and Risk Structures

To support the implementation of quality, risk and service improvement systems throughout the Agency, a number of supporting systems and structures have been established. The structures set up in 2015 include a subgroup of the Senior Management Team called the Quality, Risk and Service Action Group. The purpose of this group is to scrutinise performance and quality information collected by the Agency to identify risks and opportunities for improvement that require action by the Agency. The other key national group is the Quality, Risk and Service Improvement Working Group. The purpose of this group is to connect all quality leads that represent the service delivery units in the Agency to collectively drive the quality and risk agenda throughout the Agency. To support these structures, regional and service level groups have been set up.

5.3 Quality Assurance and Risk Systems

In 2015, the following systems were established to strengthen governance and the quality of services delivered by the Agency:

- Corporate and Directorate Risk Registers;
- Quarterly Integrated Performance Report;
- Monthly national performance dashboard;
- Quality Assessment and Improvement Framework;
- Complaints Analysis reports;
- Implementation commenced of the National Incident Management System (NIMS);
- Business Plan Performance Tracker;
- Quality Assurance Audit Framework;
- Reform of internal monitoring and quality assurance of Tusla delivered services.

5.4 External Oversight

In 2015, Tusla was subject to significant oversight and external scrutiny by regulators and other supervisory agencies. These include:

- Adoption Authority;
- Comptroller and Auditor General;
- Court System;
- Data Protection Commissioner;
- Department of Children and Youth Affairs;
- Health and Safety Authority;
- Health Information and Quality Authority (HIQA);
- National Review Panel;
- Office of the Information Commissioner;
- Oireachtas;
- Ombudsman;
- Ombudsman for Children;
- Revenue;
- Special Rapporteur for Children on Child Protection;
- State Claims Agency.

Many of these external agencies conduct reviews and inspections of Tusla services or seek assurances that services are being delivered in accordance with statutory obligations and in line with best practice. For example, HIQA conducted 34 inspections of Tusla services in 2015.

Senior managers are assigned to take responsibility for ensuring that recommendations and actions arising from reviews and inspections conducted by internal teams and external regulators are implemented. A tracking system has been established to monitor progress on recommendations and actions.

5.5 Complaints and Feedback

The following section outlines work undertaken with regard to the development of feedback and complaints processes in Tusla in 2015 and also provides an analysis of a sample of complaints received.

The development of a comprehensive feedback and complaints process is well underway within Tusla. The following suite of feedback and complaints policies, procedures and guidance were developed in 2015:

- Complaints and feedback policy entitled 'Tell Us';
- Staff guide to the complaints policy and process;
- Guide for members of the public;
- Young person's guide;
- Guidance for staff around handling unreasonable complainant behaviour.

A comprehensive programme of work to support the implementation of the feedback and complaints system is ongoing and includes the following elements:

- Rollout of the National Incident Management System (NIMS) complaints module;
- Guidance and standard operating procedure for Complaints Officers;
- Guidance and standard operating procedure for Review Officers;
- Training for Complaints Officers and Review Officers;
- Staff briefing sessions;
- Development of complaints and feedback quarterly reports.

In 2015, Tusla worked with the State Claims Agency (SCA) to develop a Tusla specific complaints module for the National Incident Management System (NIMS). Tusla staff received training in the last quarter of 2015 and plans are in place to train additional staff in 2016. This will enable complaints to be logged and analysed on a national basis in 2016.

Within the existing framework for complaint reporting on the NIMS system, only complaints that are received at national level are available for analysis. In 2015, 195 complaints were received at national level. In 2016, following the full national roll-out of NIMS, it will be possible to analyse complaints information from all parts of the Agency.

Complaints received vary in complexity and the majority of complaints are multi-dimensional containing more than one issue of concern to the complainant. Table 5.3 outlines themes arising from the review of complaints in 2015 by percentage.

Main Themes	No. of Complaints n= 195
Tusla assessments and reports: in particular alleged failures to take into account the concerns of family members or to consider all the evidence available	25.1%
Staff attitude	14.4%
Lack of response to contact (communication)	13.9%
Child protection concerns or contained child protection concerns	11.3%
Placement issues	9.7%
Access arrangements	8.2%
Lack of support to foster carers	5.1%
Quality and accuracy of our record keeping	4.1%
Aftercare	4.1%
Court related matters	4.0%
Lack of FOI service at national office	2.6%
Lack of Child Sexual Abuse assessment teams	2.0%
Lack of therapeutic services e.g. psychology	2.0%

Table 5.3: 2015 complaint themes by percentage

5.6 Performance and Activity Reporting

In 2015, the Agency developed a new performance and activity reporting system. This included an integrated quarterly performance and activity report that outlines information in relation to all Tusla services in terms of financial, HR and operational information. The other initiative was the development of a national performance dashboard that is produced on a monthly basis. Both these reports are presented to the Board of the Agency and published on www.tusla.ie.

6.0 Financial Summary

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

In accordance with Section 51 of the Child and Family Act 2013, the Agency has prepared Annual Financial Statements for 2015 and these have been audited by the Comptroller and Auditor General. The Financial Statements contain the following reports:

- Board Members' Report for 2015
- Statement of Board responsibilities in respect of the Annual Financial Statements
- Statement of Internal Financial Control
- Report of the Comptroller and Auditor General
- Financial Statements for 2015
- Accounting policies
- Note and appendices to the Financial Statements.

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

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

This Statement on Internal Financial Control sets out how these duties have been carried out and includes an assessment of the corporate governance and risk management systems in place within the Child and Family Agency that have ensured these responsibilities have been met.

The Annual Financial Statement (AFS) and financial position is summarised in tables 6.1 and 6.2 respectively. A detailed summary of the AFS is provided in Appendix II. The full AFS is published as a separate document.

	2015	2014
	€'000	Restated €'000
Revenue	658,209	617,049
Expenditure - Pay and Pensions	233,970	219,377
Expenditure - Non-Pay	416,096	403,609
Net Operating Surplus / (Deficit) for the Year	8,143	(5,937)

Table 6.1: Statement of revenue income and expenditure for the year ended 31st December 2015

	2015	2014
	€'000	Restated €'000
Total Non-current Assets	80,737	78,069
Total Current Assets	13,365	15,305
Total Current Liabilities	(51,956)	(61,169)
Deferred Income	(351)	(225)
Capital and Reserves	41,795	31,980

Table 6.2: Statement of financial position as at 31st December 2015

7.0 Focus for 2016

Each year a Business Plan is prepared in accordance with the requirements of section 46 of the Child and Family Agency Act 2013. The 2015 Business Plan is the first business plan of a three year cycle based on the Agency's Corporate Plan 2015-17.

The 2016 Business Plan follows on from this and sets out an ambitious work plan which seeks to provide evidence-based, responsive services which always have the child at the centre. It identifies a number of priority areas and actions organised under the five short term outputs in the Corporate Plan and are summarised below:

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

Child Protection and Welfare	<ul style="list-style-type: none"> • Ensure an approach to responding to referrals which consistently provides an efficient, effective and proportionate response. • Targeted national reduction of cases awaiting allocation by 60%.
Foster Care Services	<ul style="list-style-type: none"> • Increase the number of approved statutory foster carers. • Improve the percentage of general foster carers with an allocated link worker and other support arrangements. • Ensure 100% of children in care have an allocated social worker.
Residential Services	<ul style="list-style-type: none"> • Reduce dependency on residential care by developing intensive community based supports. • Ensure compliance with the new regulations for Special Care and meet registration requirements. • Conduct a review of the suitability of current residential services for older children with challenging behaviour and improve service capacity to meet their needs.
Adoption	<ul style="list-style-type: none"> • Publish <i>Children in Care to Adoption Handbook</i>. • Establish a secure, accessible and centralised interim archive for adoption records. • Reduce the waiting list for information and tracing services.

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

Policy and Strategy	<ul style="list-style-type: none"> Establish governance framework to ensure consistent development of policies, procedures, protocols and guidance documents. Implement Children First in line with legislative commencement dates. Develop an Alternative Care Strategy Implement new Aftercare legislation in line with legislative commencement dates.
Quality Assurance	<ul style="list-style-type: none"> Implement the Quality Assurance Framework and complete self-assessment cycle in all Tusla services. Conduct a review of child protection and welfare and children in care services to assess impact and the outcomes delivered for children. Implement 'Tell Us' – Tusla's complaints and feedback system. Embed risk and incident management practices and systems. Enhance integrated performance reporting and oversight systems.

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

Family Support	<ul style="list-style-type: none"> Continue implementing Meitheal within the Agency and with partner organisations. Develop a National Strategy on Participation for Children and Young People. Integrate Family Resource Centres and counselling programmes into Tusla's Service Delivery Framework. Ensure the readiness of Family Resource Centres to assist with the refugee resettlement programme.
ACTS	<ul style="list-style-type: none"> Enhance the capacity of the ACTS Team to meet the needs of children in care who present with challenging behaviour. Provide services for children who exhibit sexually harmful behaviour.
Domestic, Sexual and Gender Based Violence	<ul style="list-style-type: none"> Establish a full National DSGBV Service Team. Implement a standard monitoring and reporting framework for DSGBV. Contribute to the implementation of the Istanbul Convention.
Commissioning of services	<ul style="list-style-type: none"> Implement the commissioning approach with all externally funded organisations. Enhance governance arrangements with externally funded organisations.
Early Years Services Regulation	<ul style="list-style-type: none"> Implement new inspection processes and systems based on the new regulations. Establish a Central Registration Office.

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

Educational Welfare Services	<ul style="list-style-type: none"> • Implement an integrated approach to service management. • Establish a Caseload Management System. • Engage with the Department of Education and Skills' DEIS review regarding the future roles of SCP and HSCL. • Develop and implement a plan based on the recommendations of the ESRI review of the SCP. • Continue to align EWS with Tusla's Service Delivery Framework. • Establish systems to monitor the educational participation of all children in care. • Produce a policy to support vulnerable children's participation in education.
Non-recognised Schools and Home Education	<ul style="list-style-type: none"> • Transfer Section 14 to Quality Assurance Directorate and reform the associated processes and systems.

Output E: A fit for purpose organisation to deliver on the Agency's strategic intent.

Human Resources	<ul style="list-style-type: none"> • Recruit additional staff to address service risks and organisational capacity gaps. • Enhance supervision and performance management for all staff. • Reduce timelines for the recruitment of staff to vacancies from six months to four months. • Develop a strategic workforce plan. • Implement the Continuous Professional Development Plan.
Financial Management	<ul style="list-style-type: none"> • Implement effective financial management to ensure the Agency remains within its allocation for 2016. • Develop a Resource Allocation Model.
ICT	<ul style="list-style-type: none"> • Develop an ICT strategy for Tusla and improve ICT infrastructure. • Ensure equitable access to HSE ICT infrastructure to facilitate networking, hosting and support for Tusla applications.
Estates	<ul style="list-style-type: none"> • Deliver the capital plan to address key priorities for 2016. • Implement the Estates Strategy.
Organisational Design and Governance	<ul style="list-style-type: none"> • Implement the new organisation design under the Project Management Office. • Conduct an evaluation of staffing requirements in respect of the new organisation design at all levels. • Arrange for reorganisation of staffing in line with the evaluation, organisation design and infrastructural requirements. • Establish a localised infrastructure to support service delivery e.g. HR, finance, business support.

Health and Safety	<ul style="list-style-type: none"> • Conduct an Agency-wide gap analysis regarding compliance with health and safety legislation. • Develop a programme of work to address risks identified by the gap analysis.
Legal	<ul style="list-style-type: none"> • Resource in-house legal services in order to reduce legal spend. • Establish an in-house system to review and analyse performance information regarding legal services. • Establish an in-house system for the oversight of member firms.
Communications	<ul style="list-style-type: none"> • Improve internal communications. • Improve public awareness of Tusla's functions and purpose.

Reform Programme

In 2016, Tusla will embark on a comprehensive reform programme to address key structural and system challenges and to build on achievements to date. This programme will focus on the following areas:

- Development of a fit for purpose organisational model and structure;
- Establishment of a programme management office to support the reform programme and enhance project management capability in the Agency;
- Strengthening governance, including arrangements with section 56 and 59 organisations, risk management systems and self evaluation systems;
- Development and implementation of an information communication technology strategy;
- Development and implementation of Child Protection and Welfare Strategy;
- Development of a resource allocation model.

Appendix I: Corporate Plan 2015-17 Short Term

Outlined below is a complete list of short term outputs identified in the 2015-17 Corporate Plan.

Strategic Objectives and Short Term Output A

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

Strategic Objectives and Short Term Output B

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

Strategic Objectives and Short Term C

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

Strategic Objectives and Short Term D

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

Strategic Objectives and Short Term Output E

- E1 Develop organisation structures and processes to support the achievement of Tusla's corporate objectives (*Strategic Objective 2*).
- E2 Develop an ICT Strategy, including the utilisation of a Managed Service (*Strategic Objective 2*).
- E3 Develop and implement a National Estates Strategy (*Strategic Objective 2*).
- E4 Develop an evidence-based resource allocation model (*Strategic Objective 4*).
- E5 Develop a value-for-money strategy (*Strategic Objective 4*).
- E6 Develop a systematic approach to managing risk within a defined risk appetite (*Strategic Objective 8*).
- E7 Enhance financial and governance processes (*Strategic Objective 2*).
- E8 Develop and implement a performance management system to align individual and Agency objectives to inform training and development requirements (*Strategic Objective 5*).
- E9 Support, encourage and facilitate staff through structured professional and career development (*Strategic Objective 5*).
- E10 Develop and embed a code of behaviours at all levels and within all of our policies, plans and procedures (*Strategic Objective 3*).
- E11 Reform recruitment and retention policies to ensure that they are responsive to organisational needs (*Strategic Objective 5*).
- E12 Establish an office of legal services to provide/procure good quality legal advice and support, which is cost-effective, consistent and accessible (*Strategic Objective 2*).
- E13 Develop an internal and external communications strategy (*Strategic Objective 6*).
- E14 Embed a culture of effective communications throughout the organisation, supported by appropriate multi-media and other tools (*Strategic Objective 6*).
- E15 Establish a protocol for the branding of estates and all Tusla-associated activities (*Strategic Objective 6*).
- E16 Conduct regular stakeholder engagement surveys. (*Strategic Objective 6*)
- E17 Plan and support a number of key events throughout the year (*Strategic objective 6*).
- E18 Publish and promote key documents relating to Tusla-led activities (*Strategic Objective 6*).
- E19 Lead a proactive media campaign to assist information dissemination and crisis management (*Strategic Objective 6*).
- E20 Develop the capacity to assess needs, plan services strategically, monitor and evaluate outputs and incomes (*Strategic Objective 2*).
- E21 Design and deliver associated training as part of the overall recruitment and retention strategy (*Strategic Objective 3*).
- E22 Design, develop and launch an annual staff survey in order to strengthen staff engagement and consultative networks (*Strategic Objective 3*).
- E23 Develop professional development plan for social workers in order to foster greater self-regulation, accountability and professional leadership (*Strategic Objective 5*).

Appendix II – Summary of Annual Financial Statements

Statement of Revenue Income and Expenditure For the Year Ended 31st December 2015

	NOTE	2015 €'000	2014 Restated €'000
Revenue			
Department of Children and Youth Affairs (Vote 40, Subhead A3)		655,261	615,840
Other Revenue	4	2,948	1,209
		658,209	617,049
Expenditure - Pay and Pensions			
Wages and Salaries	5	194,446	186,656
Employer PRSI	5	17,246	16,286
Pensions	5	5,269	2,830
Agency Pay	5	17,009	13,605
		233,970	219,377
Expenditure - Non-Pay			
Foster Care and After Care Allowances	7	119,693	117,652
Independent Placement Provision	7	89,094	80,360
Grants to Outside Agencies	7	141,590	137,942
Legal Expenses and Guardian Ad Litem Costs	7	30,728	36,193
General Child Care Services	7	10,417	9,558
Office and Administration	7	24,574	21,904
		416,096	403,609
Net Operating Surplus/(Deficit) for the Year before exceptional items		8,143	(5,937)
Net Current Assets on Transferred Operations		-	(32,953)
Net Operating Surplu/ (Deficit) for the Year		8,143	(38,890)

These financial statements for the year ended 31st December 2015 are the first financial statements that have adopted FRS 102 with the exceptions noted in the Accounting Policies section. The date of transition is 1st January 2014.

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.

Statement of Capital Income and Expenditure For the Year Ended 31st December 2015

	NOTE	2015 €'000	2014 €'000
Capital Revenue			
Department of Children and Youth Affairs (Vote 40, Subhead A3)		6,863	4,846
Application of Proceeds of Disposals		-	-
Government Departments and Other Sources		-	-
		6,863	4,846
Expenditure			
Capital Expenditure on Child and Family Agency Capital Projects	15(c)	7,859	5,277
		7,859	5,277
Net Capital Surplus/(Deficit) for the Year before exceptional items		(996)	(431)
Net Capital Reserve on Transferred Operations		-	63
Net Capital Surplus/(Deficit) for the Year		(996)	(368)

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.

Statement of Financial Position As at 31st December 2015

	NOTE	2015 €'000	2014 Restated €'000
Non-current Assets			
Property, Plant and Equipment			
Property	8	79,404	77,360
Plant and Equipment	9	1,333	709
Total Non-current Assets		80,737	78,069
Current Assets			
Inventories	10	19	8
Trade and Other Receivables	11	8,800	11,262
Cash at Bank or Cash Equivalents	12	4,546	4,035
Total Current Assets		13,365	15,305
Current Liabilities			
Trade and Other Payables	13	(51,956)	(61,169)
Total Current Liabilities		(51,956)	(61,169)
Net Current Assets/(Liabilities)		(38,591)	(45,864)
Creditors (amounts falling due after more than one year)			
Deferred Income	14	(351)	(225)
Total Assets		41,795	31,980
Capitalisation Account		80,737	78,069
Capital Retained Reserves		(1,364)	(368)
Revenue Retained Reserves		(37,578)	(45,721)
Capital and Reserves		41,795	31,980

These financial statements for the year ended 31st December 2015 are the first financial statements that have adopted FRS 102 with the exceptions noted in the Accounting Policies section. The date of transition is 1st January 2014.

Statement of Changes in Reserves For the Year Ended 31st December 2015

	Capitalisation Account	Capital Reserves	Revenue Reserves	Total
	€'000	€'000	€'000	€'000
Balance at 1st January 2014 (re-stated)	-	63	(39,784)	(39,721)
Net surplus/(deficit) for the year	-	(431)	(5,937)	(6,368)
Assets transferred on creation of the Agency	76,316	-	-	76,316
Additions to non-current assets in the year	3,645	-	-	3,645
Less: Net Book Value of non-current assets disposed in the year	(132)	-	-	(132)
Less: Depreciation charge in the year	(1,760)	-	-	(1,760)
Balance at 31st December 2014	78,069	(368)	(45,721)	31,980
Balance at 1st January 2015	78,069	(368)	(45,721)	31,980
Net surplus/(deficit) for the year	-	(996)	8,143	7,147
Additions to non-current assets in the year	5,906	-	-	5,906
Less: Net Book Value of non-current assets disposed in the year	(317)	-	-	(317)
Less: Depreciation charge in the year	(2,921)	-	-	(2,921)
Balance at 31st December 2015	80,737	(1,364)	(37,578)	41,795

These financial statements for the year ended 31st December 2015 are the first financial statements that have adopted FRS 102 with the exceptions noted in the Accounting Policies section. The date of transition is 1st January 2014.

Statement of Cash Flows

For the Year Ended 31st December 2015

	2015	2014
	€'000	€'000
Cash Flows from Operating Activities		
Surplus/(Deficit) for the year (Revenue & Capital Account)	7,147	(6,368)
<u>Adjustments For:</u>		
Depreciation of property, plant and equipment	5,906	3,645
Interest Paid/(Received)	-	-
Taxation	-	-
Transfer of Operations on Establishment (HSE Balance Sheet Transfer)	-	(32,890)
(Increase)/Decrease in Inventories	(11)	(8)
(Increase)/Decrease in Trade and other receivables	2,462	(11,262)
Increase/(Decrease) in Trade and other payables	(9,213)	54,338
Cash Flow from Operating Activities	6,291	7,455
Interest (Paid)/Received	-	-
Taxation	-	-
Net Cash Flow from Operating Activities	6,291	7,455
Cash Flows from Investing Activities		
Profit on disposal of property, plant and equipment	-	-
Purchase of property, plant and equipment	(5,906)	(3,645)
Purchase of intangible assets	-	-
Increase/(Decrease) in Deferred Income	126	225
Interest received	-	-
Net Cash Flow from Investing Activities	(5,780)	(3,420)
Net Cash Flow from Financing Activities	-	-
Net Increase in Cash and Cash Equivalents in the period	511	4,035
Cash and Cash Equivalents at the beginning of the period	4,035	-
Cash and cash equivalents at the end of the period	4,546	4,035

