Tithe an Oireachtais

An Comhchoiste um Leanaí agus Gnóthaí

Tuarascáil maidir le seirbhísí cúram altrama a sholáthar in Éirinn

Houses of the Oireachtas

Joint Committee on Children and Youth Affairs

Report on the provision of foster care services in Ireland
Tithe an Oirechtais

An Comhchoiste um Leanaí agus Gnóthaí

Tuarascáil mairid le seirbhísí cúram airn alrama a sholáthar in Éirinn

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Joint Committee on Children and Youth Affairs

Report on the provision of foster care services in Ireland
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Chairman’s Foreword

Foster Care is a critically important part of the child protection and welfare service. Unfortunately it is not always possible for a child to remain in their own family, for a variety of reasons. The Child and Family Agency provide alternative care services for these children, the main form of which is foster care. As part of its work programme the Joint Committee on Children and Youth Affairs decided to hold a series of meetings with a number of stakeholders to gain a greater insight into foster care in Ireland and to ascertain where improvements could be made.

It is important that all children placed in state care, including foster care, receive the support and services necessary to meet their needs and that these supports are delivered to the highest level. Significant numbers of young people who enter the care system may have past experience of parental figures that were unable to care for them or were neglectful, abusive, or not able to manage the severe behavioural issues that some children display. These previous experiences present the foster carer with complex challenges in attempting to meet the young person’s needs. Foster carers ideally provide a safe home and support to young people, which includes the provision of the basic necessities which young people need, including food and shelter. Foster carers are not merely service providers they also
offer a willingness to understand the needs of vulnerable children, to help them feel safe and secure and to provide them with a stable family environment. Foster carers provide a place in their own home for these vulnerable children. Foster carers come from all walks of life and ethnicities and provide a diverse and rounded environment for the children in their care. As Chairman of the Joint Committee on Children and Youth Affairs, and on behalf of the Committee, I commend the work of foster carers who provide this vital service to children in this State.

I would like to thank the groups who appeared before the Committee during the consideration of the issues surrounding foster care. In particular, we welcomed the input of organisations that represent the rights and welfare of children on a daily basis and have incorporated matters raised in this report.

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Alan Farrell T.D.

Chairman October

November 2017
1. Recommendations

1. The Committee recommends that comprehensive data be collated nationally so as to give a precise breakdown of the type of care settings in which children are being placed and the circumstances surrounding their placement in care. The Committee questions whether the lack of comprehensive data is adequate in accurately accounting for voted expenditure.

2. The Committee recommends that a Value for Money (VFM) review be carried out on the use of private foster care companies and consideration be given to diverting funds away from the use of these companies and redirected into the recruitment of foster carers and sufficient social workers so that the same range of supports can be provided directly by Tusla.

3. The Committee recommends that the Adoption (Amendment) Act 2017 Commencement Orders are made at the earliest possible date.

4. The Committee recommends that the remit of powers afforded to HIQA be extended to include powers of enforcement. This would mean that HIQA could implement the recommendations made in its reports.

5. The Committee recommends that transparent and robust governance and oversight procedures between Tusla and the private foster companies be put in place without delay. It further recommends that Service Level Agreements (SLAs) are put in place with these companies immediately.

6. The Committee recommends that an EOHS be provided in all areas of the country. It further recommends that the gaps in the service are closed immediately so that EOHS are available 24 hours a day, 365 days a year.

7. The Committee recommends that Tusla continues to be creative in their approach to recruitment and retention of staff. The Committee also recommends that a collaborative approach between the HSE and Tusla be examined to see what is working in the area of
recruitment and retention of staff with a view to knowledge sharing and improvement of processes.

8. The Committee recommends that link social workers be assigned to all foster carers to provide support. The Committee recommends that a dedicated social worker be provided to all children in foster care.

9. The Committee supports the recommendations made in the Audit Report on Section 12 of the Childcare Act 1991 and advocates that these recommendations are implemented within an agreed timeframe.

10. The Committee recommends that co-location of Gardaí and Tusla officials in specialist child protection units be implemented at the earliest possible date to strengthen the area of inter-agency collaboration and data sharing and to mitigate against risks posed by gaps in the Emergency Out of Hours Service.

11. The Committee recommends that a plan be put in place to ensure that vulnerable children are not returned after repeated instances of removal under Section 12 of the Childcare Act 1991 to the same circumstances that required them to be taken into care in the first place.

12. The Committee recommends that the implementation of the Signs of Safety approach is monitored and reviewed on an on-going basis to ensure that it is fit for purpose.
2. Glossary of Abbreviations

Child and Adolescent Mental Health Services (CAMHS)

Chief Executive Officer (CEO)

Emergency Out of Hours Service (EOHS)

Empowering People in Care (EPIC)

Health Information and Quality Authority (HIQA)

Health Service Executive (HSE)

Irish Foster Care Association Ireland (IFCA)

Joint Committee on Children and Youth Affairs (JCCYA)

National Childcare Information System (NCCIS)

Non Government Organisations (NGOs)

Service Level Agreements (SLAs)

Value for Money (VFM)
3. Introduction

The Joint Committee on Children and Youth Affairs (JCCYA) undertook as part of its work programme to examine the provision of foster care services in Ireland in 2017. The Committee’s engagement with the various representatives of the foster care profession; Empowering People in Care, Irish Foster Carers Association, the Minister for Children and Youth Affairs; Katherine Zappone TD and her officials from the Department of Children and Youth Affairs, Health Information and Quality Authority, Special Rapporteur for Child Protection Dr Geoffrey Shannon and Tusla provided a forum for discussion where Committee Members explored foster care services provided by the State and examined any overarching concerns and issues related to the children in foster care in Ireland.

Based upon the Joint Committee on Children and Youth Affairs’ engagement with the various stakeholders, the Committee has arrived at a number of recommendations which are set out in the report. Receiving input and buy-in from all stakeholders is key to the successful provision of foster care services and a collaborative approach across all agencies involved is needed in order to achieve quality care for children in their formative years and beyond.¹

As mentioned above, in consideration of the area of foster care the Committee met with the following groups:

- Health Information and Quality Authority (HIQA)
- Irish Foster Care Association Ireland (IFCA)
- Empowering People in Care (EPIC)
- TUSLA
- Special Rapporteur for Child Protection; Dr Geoffrey Shannon
- Minister for Children and Youth Affairs; Katherine Zappone T.D.
- Representatives from the Department of Children and Youth Affairs²

¹ Full transcripts of the above meetings are available at: http://oireachtasdebates.oireachtas.ie/debatesauthoring/debateswebpack.nsf/committeedatelist?readform&year=2017&code=CY.
² Listed in order of appearance before the Joint Committee on Children and Youth Affairs.
4. Background

i. Foster Care in Ireland

Foster care is the care of children outside their own home by people other than their parents (biological or adoptive) or legal guardians. In Ireland, foster care services are provided by Tusla and six private foster care providers.

Foster care is a way of providing a stable family environment for children who cannot live with their own parents (either biological or adoptive) or legal guardians for a variety of reasons. Foster care is often used to provide temporary care while parents get help addressing problems, or to help children or young people through a difficult period in their lives. The provision of foster care can be a temporary measure and children may return to their home once the problems that caused them to be placed into foster care have been resolved. Depending on the circumstances others may stay in long-term foster care, some may be adopted, and others will move on to live independently.

Foster care is the main form of alternative care for children in need of care and protection, and is the preferred option for children who cannot live with their parents. Children can be placed in foster care by two methods; voluntarily, where a parent or family member seeks the assistance of Tusla or by a court order, whereby a judge has deemed it to be in the best interest of the child to be placed in the care of Tusla.³

At the end of March 2017, there were 6,300 children in the care of the State. 92% of these children were cared for in foster placements, either by relative foster parents or by approved foster families. The majority of children are in the care of general foster carers, compared to foster care with relatives.

Foster care can be provided by Tusla or by non-statutory, voluntary or private fostering agencies, however these must be approved by Tusla. As of June 2017 there were 1,466 social workers employed by Tusla (not including agency staff) and Tusla utilised the services of six private foster care companies.⁴

³ Available at: https://www.dcy.gov.ie/viewdoc.asp?fn=/documents/Children_In_Care/FosterCare.htm.
⁴ The six private foster care companies used by Tusla are: Care Visions Ireland, Daffodil Care, Five Rivers Ireland, Fostering First Ireland, Oak Lodge Foster Care Services, Orchard Children Services.
At the end of December 2016, Tusla reported that there were 4,537 foster carers approved and on the Panel of Approved Foster Carers in Ireland.\(^5\)

In order to become a Foster carer there are certain requirements which need to be met. Prospective foster carers must be able to demonstrate that they can meet the following criteria:

- Can provide a stable, nurturing and loving environment for children;
- Relate well to and have respect for children;
- Do not have a Garda record for violence, offences against children or other serious offences;
- Can demonstrate flexibility, openness and patience;
- Are willing to attend training courses to support ongoing learning and skills base.\(^6\)

\(^5\) Available at: [https://www.dcyagov.ie/viewdoc.asp?fn=/documents/Children_In_Care/FosterCare.htm](https://www.dcyagov.ie/viewdoc.asp?fn=/documents/Children_In_Care/FosterCare.htm).

\(^6\) Available at: [http://www.tusla.ie/services/alternative-care/foster-care/becoming-a-foster-carer/can-i-foster](http://www.tusla.ie/services/alternative-care/foster-care/becoming-a-foster-carer/can-i-foster).
5. Types of Fostering

i. Day Foster Care

Day foster care is an alternative form of care, which provides a support system in the community, with foster carers providing care on a daily basis in their own home. This form of care is a preventative measure and can be used to give the family time and space to tackle issues effectively and may safeguard against the child being placed in full-time care. Day foster care can provide additional support and respite to families and can reduce the trauma children may experience in being separated from their family as they return home in the evening, thus causing minimal disruption. It can be an effective measure in situations where the child may have behavioural difficulties or for lone parents who are in need of support. The JCCYA requested figures for the number of children who were provided with day foster care services but were informed by Tusla that this data is not collated nationally and therefore was not available to the Committee.7

ii. Short Term Foster Care

Short term foster care provides a temporary care solution for a child or children, separated from their birth family. Short term foster care can range from one week to several months and aims to facilitate the child or children being returned to their family home or moving to long term foster care. The JCCYA requested figures for the number of children who were provided with short term foster care but was informed by Tusla that this data is not collated nationally and therefore was not available to the Committee.8

iii. Long Term Foster Care

Long term foster care is needed for children who are unlikely to be able to live with their birth family and who, for a variety of reasons, cannot be adopted.

Long term requires a commitment on the part of the foster family for a number of years and is usually required when it is decided by the social worker that it is unlikely the child/young person will return to live with their own family. The situation is reviewed regularly and decisions can be changed. According to the Irish Foster Care Association (IFCA),

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7 Information requested by the Committee Secretariat and received from Tusla on 18 September 2017.
8 Ibid.
many children in long term care become so much part of their foster family that they continue to live with them until their independence.\footnote{Available at: \url{http://www.ifca.ie/fostering/types-fostering/}.} The JCCYA requested figures for the number of children who were provided with long term foster care but was informed by Tusla that this data is not collated nationally and therefore was not available to the Committee.\footnote{Information requested by the Committee Secretariat and received from Tusla on 18 September 2017.}

\section*{iv. Emergency Foster Care}

Emergency care is used when a child comes into care very quickly and is placed with 'emergency carers'. It could also happen that an existing placement breaks down and a child needs to be moved quickly. Tusla informed the JCCYA that this data is not collated nationally. Tusla did however inform the Committee that 240 children (out of a total of 5,926) in foster care at the end of December 2015 were placed under an emergency care order and that data for 2016 was not yet available to it.\footnote{Ibid.}

\section*{v. Respite Foster Care}

Respite foster care is provided by some foster parents/carers to provide a break for a child's family or another foster family. Where a foster child/young person is under stress and may be displaying very difficult behavior, a break gives breathing space to all concerned. Whether this break takes place during the week, at weekends or at other times depends on the needs in each child's case. Where a child is in foster care and the placement is at risk of breaking down or where planned breaks are part of the Care Plan, a support or respite family is identified and it is essential that both families work together in the interests of the child. Tusla informed the JCCYA that a breakdown by care type (for example, foster care / residential care) is not collated nationally. However, a total of 179 children were in respite care (all care types) at the end of December 2016.\footnote{Ibid.}

\section*{vi. Relative Foster Care}

Relative foster care refers to situations whereby a family member becomes foster parent of the child, for example a grandparent, aunt, uncle or adult sibling. The relative of the child is subject to assessment by Tusla in the same manner as all other prospective foster parents. Assessment also takes into account the needs of the child and the abilities and suitability of
the relative to be a foster parent. 1,715 children were in relative foster care at the end of December 2016, 27% of the total number of 6,258 children in care at this time.13

vii. After Care

Aftercare provides young people with a range of services to assist them with their needs as they transition into independent adult life. Assessment and care planning consultation with a young person takes place prior to them leaving care. Aftercare provision includes advice, guidance and practical support. The social worker, aftercare worker, young person, carer and others consider what the young person will need for support and how these needs will best be met. This may include education, financial support, social network support, and training and to facilitate their development as an adult in their community. The most important requirements for young people leaving care are for secure, suitable accommodation, access to further education, employment or training and supportive relationships. The provision of aftercare is provided for in legislation under Section 45 of the Childcare Act 1991 which places a duty on Tusla to decide whether a person leaving care needs aftercare on reaching the age of 18. Figures supplied by Tusla indicate that there were 1,880 young adults in receipt of aftercare at the end of December 2016.14

At the end of December 2016, 1,880 young people aged 18 to 23 years and older were in receipt of an aftercare service. Of these, 74% were aged 18 to 20 years, with the remainder aged over 20. Of those in receipt of an aftercare service, 58% of 18-20 year olds and 57% of 18-22 year olds were in full-time education. 46% of care leavers remained living with their foster carers.15

Young people who have had a care history with Tusla are entitled to an aftercare service based on their assessed needs. The core eligible age range for aftercare is from 18 years up to 21 years. This can be extended until the completion of a course of education in which a young person is engaged, up to the age of 23 years. The Child Care (Amendment) Act 2015 strengthens the legislative provisions regarding aftercare, imposing a statutory duty on Tusla to prepare an aftercare plan for an eligible child or eligible young person. The relevant

13 Ibid.
14 Ibid.
sections of the Act of 2015 were commenced on 1 September 2017.\textsuperscript{16}

<table>
<thead>
<tr>
<th>Recommendation 1</th>
</tr>
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<tbody>
<tr>
<td>The Committee recommends that comprehensive data be collated nationally so as to give a precise breakdown of the type of care settings in which children are being placed and the circumstances surrounding their placement in care. The Committee questions whether the lack of comprehensive data is adequate in accurately accounting for voted expenditure.</td>
</tr>
</tbody>
</table>

\textsuperscript{16}Available at: https://www.dcy.gov.ie/viewdoc.asp?fn=%2Fdocuments%2FChildren_In_Care%2FChildreninCareAftercare.htm.
6. Rates of pay for Foster Carers

i. Maintenance Allowance payable to foster carers

Tusla pays a basic maintenance allowance to foster parents and families and offers strong support structures to assist the child, carer and family during the fostering term. Tusla also provides training for the carer or family, on-going liaison with social workers, insurance and a medical card for the child in care. Allowances currently payable for children in foster care placements are dependent on age and broken down below. Foster care allowances from Tusla are not taken into account in the means test for social welfare payments and are not taxable. An increase for a child dependant may also be payable.\(^{17}\)

An allowance may be paid between the ages of 18 and 21 or 23, for those young people who are eligible as per Section 45 of the Child Care Act 1991 to young people leaving care who are still in training or education. This allowance is known as an Aftercare Allowance. A range of other supports is available to all young people leaving care, whether they are in education or not. Where a young adult is in education/training at 18 years of age and remains in placement, the Aftercare Allowance of €300 is payable to the foster carer(s) or supported lodgings provider. Where a young adult continues with education/training and is in independent living, the Aftercare Allowance is payable directly to the young adult.\(^ {18}\)

Table 1: Rates of maintenance allowances payable to foster carers 2017

<table>
<thead>
<tr>
<th>Age of child</th>
<th>Weekly rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 12 years</td>
<td>€325 per child</td>
</tr>
<tr>
<td>Over 12 years</td>
<td>€352 per child</td>
</tr>
</tbody>
</table>

\(^{17}\) You can find more information on the Standardised Aftercare Allowance (pdf) on the Tusla website.

ii. Child Benefit

When a child has been placed in foster care by Tusla, Child Benefit may continue to be paid to the child's mother or father for a period of six months from the date of the child's placement. Payment may then transfer to the foster parent(s) provided that the child has been in their continuous care for a period of six months.19

19Available at: http://www.citizensinformation.ie/en/birth_family_relationships/adoption_and_fostering/fostering.html
7. Private Foster Care

Foster carers can also be recruited and provided by private foster care companies. Nonetheless, all foster carers even those working with a private agency are subject to approval by Tusla. The local Tusla foster care committee where the private foster carer resides is responsible for approving private foster carers and placements and includes responsibility for reviewing placement suitability and ensuring, through the matching process, that the private foster care placement will meet the child’s individual needs.

The Health Service Executive began to use private foster care providers in the late 1990s. The challenges in the recruitment and retention of social workers directly impacted on the ability to recruit and approve foster carers. Due to the moratorium on recruitment in the public service in 2009, there was a restriction on the numbers of social workers which the HSE could employ which lead to difficulty in recruiting and approving foster carers. Another impact on service provision was the gradual withdrawal of Non-Government Organisations (NGO’s) in the provision of alternative care services due to the recession. Evidence-based research has been consistent in stating that foster care is the preferred alternative care model as opposed to residential care. Due to a number of factors, including population increase with corresponding increases in social deprivation statistics, there was a growth in demand for foster placements resulting in 5,819 children in foster care (March 2017). The increased demand coupled with the challenges in service provision detailed above resulted in the necessity for using private foster care companies by state agencies. Tusla informed the JCCYA that 10% of the 384 placements in private care are separated children seeking asylum, while another proportion of them are young people over 18 years of age who Tusla continues to support. Some children placed in private care also have a disability and require specialist care.20

The Child Care Act 1991 and more recently the Child and Family Agency Act 2013 (Part 8) were enacted by Dáil Éireann to approve the use of non-statutory agencies to assist with the provision of services such as private foster care.

At the meeting of the JCCYA on 31 May 2017 the issue of the cost of private compared to Tusla-registered fostering was raised by Empowering People in Care (EPIC).

They outlined:

There are a number of private foster care organisations operating in Ireland. Placing a child through one of the private foster care organisations costs the State an average of €58,000 per child per year versus €17,900 for children fostered with foster carers registered directly with Tusla. EPIC would encourage the committee to look into the disparity of cost between private providers and State agencies.21

Tusla informed the Committee at its meeting on 21 June 2017 that 6% of children in foster care are placed with private providers. In 2016 and 2017 there was an increase in the use of private foster care and residential placements. As of December 2015 there were 308 children in private foster care which rose to 361 in December 2016 and 384 in 2017. This represents an increase of 17% in 2016 and a further increase of 8% year on year to June 2017. Tusla attributes the increased in demand to difficulties in some areas in placing children with relatives, a general shortage of suitable placements in some areas, on-going difficulty in recruiting new foster carers to meet demand and an increased demand for specialist services.22

Tusla also briefed the Committee on its plans to establish a governance arrangement with the private foster care providers and attested that a Senior Tusla manager will have responsibility for national oversight.

Furthermore, it was confirmed that all private services commissioned by Tusla are required to comply with financial regulations and submit financial documents such as tax clearance certificates. As part of the contract with the private service provider, Tusla states that it ensures that agencies are responsible for providing the Tusla monitoring service with information on a monthly basis in respect of child protection concerns, termination of placements, serious incidents, and complaints made by children and young people. The Tusla monitoring service maintains responsibility for ensuring compliance with requested action plans including those required by HIQA.

Table 2: Number of children placed with foster carers sourced by private foster care companies December 2014 – December 2016

<table>
<thead>
<tr>
<th>Date</th>
<th>Number of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>December 2014</td>
<td>274 children</td>
</tr>
<tr>
<td>December 2015</td>
<td>308 children (figure does not include children in respite care from home, if any - number of children in respite care from home is collated separately since January 2015 - breakdown of placement type not collated)</td>
</tr>
<tr>
<td>Dec 2016</td>
<td>361 children</td>
</tr>
</tbody>
</table>

Table 3: Expenditure from 2014 – 2016 and Budget Allocation for the provision of services supplied by private foster care companies in 2017

<table>
<thead>
<tr>
<th>Year</th>
<th>Expenditure</th>
<th>% change year-on-year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>€17,235,186</td>
<td>n/a</td>
</tr>
<tr>
<td>2015</td>
<td>€18,358,444</td>
<td>+6.52%</td>
</tr>
<tr>
<td>2016</td>
<td>€19,564,139</td>
<td>+6.57%</td>
</tr>
<tr>
<td>2017</td>
<td>€18,965,055 (Budget allocation)</td>
<td>-3.06%</td>
</tr>
</tbody>
</table>

Recommendation 2

The Committee recommends that a Value for Money (VFM) review be carried out on the use of private foster care companies and consideration be given to diverting funds away from the use of these companies and redirected into the recruitment of foster carers and sufficient social workers so that the same range of supports can be provided directly by Tusla.

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23 Figures supplied by Tusla ahead of the meeting of the JCCYA 21 June 2017.
24 Ibid.
8. The *Adoption (Amendment) Act 2017* and its impact on adoption by long term Foster Carers

The *Adoption (Amendment) Act 2017* was enacted on 19 July 2017 to amend and extend the law in relation to the adoption of children and, for that purpose, to amend the *Adoption Act 2010*; to provide for the repeal of Part 11 of the *Children and Family Relationships Act 2015*; and to provide for related matters. Adoption is the process whereby a child becomes a member of a new family and creates a permanent, legal relationship between the adoptive parent(s) and the child. The introduction of the *Adoption (Amendment) Act 2017* allows foster carers to apply to adopt foster children who have been in their care after a period of eighteen months or more in certain prescribed circumstances.

i. The transition from Long term Foster Care to Adoption

Where a child is in a long term fostering situation it may become clear after a period through the child care review or plan that it will not be possible for the child to be returned to their birth parents/family and that the child’s best interests would be served by being adopted by their foster parent(s).

The *Adoption (Amendment) Act 2017* provides for a number of changes including:

- The right of any child to be adopted, irrespective of the marital status of his or her parents, where both birth parents consent to the placing of the child and to the making of an adoption order;

- The Act introduces a new test in the case of the adoption of children whose parents fail in their duty towards them in light of a Constitutional amendment. In deciding whether to grant an order under this section (section 54), the court will have to regard the rights of all persons concerned and will have to have regard to the views of the child. This section emphasises that in the resolution of these applications, the best interests of the child shall be the paramount consideration.\(^{25}\)

\(^{25}\)Available at: [http://www.irishstatutebook.ie/eli/2017/act/19/section/24/enacted/en/html#sec24](http://www.irishstatutebook.ie/eli/2017/act/19/section/24/enacted/en/html#sec24). Children in foster care may be adopted if their parents have failed in their duty towards them for three years, when there is no reasonable prospect of parents caring for them, and when children have spent at least 18 months living with the applicant carers.
The Act provides for the adoption of a child by his or her step parent without the requirement for the child's birth parent to adopt his or her own child. The step parent will be the sole adopter and will have parental rights and duties in respect of that child as a result of the adoption being effected. Under this Act, the legal status of the parent will not change and only the step parent will be an adoptive parent;\(^{26}\)

- The Act provides for the adoption of a child by civil partners and cohabiting couples.\(^{27}\)

At the time of the Committee’s considerations on this topic, the provisions of the Act were not in effect as they required Commencement Orders. The then provision for adoption, under the *Adoption Act 2010*, was that the birth mother’s consent to the adoption was required. In some cases the birth mother may have objected to the proposed adoption or may not have been contactable to give her consent. Where the birth father is a legal guardian his consent was also required. Where the birth father of the child is not a legal guardian he was entitled to be notified and consulted about the application for adoption. At that time, the Department of Children and Youth Affairs expected that the provisions of the Act would be commenced shortly; however no precise date was given.\(^{28}\)

On 17 October, Minister for Children and Youth Affairs, Dr Katherine Zappone, signed the Commencement Order to give effect to the provisions in the *Adoption (Amendment) Act 2017*. These provisions were commenced on 19 October 2017.

**Recommendation 3**

The Committee recommends that the *Adoption (Amendment) Act 2017* Commencement Orders are made at the earliest possible date.

\(^{26}\) This was a legal requirement under *The Adoption Act 2010* that required birth mothers to adopt their own children when their partners wished to adopt.


9. Legislative Framework, Regulations and Standards around Foster Care

i. Child Care Act 1991

The primary legislation regulating child care policy is the Child Care Act 1991 which brought in considerable changes in relation to children in care. Until the main part of the Act was implemented in 1995, child care policy had been regulated by the Children Act 1908.

Under the Child Care Act 1991, as amended by the Child and Family Agency Act 2013, Tusla - the Child and Family Agency - has a statutory duty to promote the welfare of children who are not receiving adequate care. Tusla was established in January 2014 under Section 8 of the Act. The definition of a child in this legislation is a person under 18 years of age who is not or has not been married.29

ii. Children Act 2001

The main legislation covering children and the criminal justice system is the Children Act 2001. This Act focuses on preventing criminal behaviour, diversion from the criminal justice system and rehabilitation. The use of detention for a child is to be a last resort. The Act requires that all avenues be explored before it is used.30

iii. Child Care (Amendment) Act 2007

The purpose of the Act was to give foster carers and foster relatives increased autonomy for long-term care. Custodial and guardianship rights are unaffected, as the state continues to be the guardian of the child while he or she remains in their care.31

iv. Child Care (Placement of Children in Foster Care) Regulations 1995

These regulations require that a Care Plan for the child is drawn up which sets out the support to be provided to the child and the foster carers and the arrangements for access to the child in foster care by parents or relatives.32

They also cover standards in residential care, monitoring of placements, reviews and other miscellaneous provisions.

30 Available at: https://www.dcy.gov.ie/docs/The_Children_Act_2001/166.htm.
31 Available at: https://www.ucc.ie/en/media/academic/appliedsocialstudies/docs/AmandaTanner.pdf.
v. National Standards in Foster Care 2003

These Standards apply only to those services provided under the Child Care (Placement of Children in Foster Care) Regulations 1995 and the Child Care (Placement of Children with Relatives) Regulations 1995. It is against these Standards that inspectors will form judgements about the quality of foster care services. The Standards aim to provide useful and constructive guidelines for Health Boards and foster carers alike, as well as a basis for those in foster care and their families to judge the quality of the services they are receiving.33


The aim of the Children First National Guidance is to promote the safety and well-being of children. Parents and guardians have the primary responsibility for the care and protection of children. Many parents from time to time require support and help from the State in carrying out their parental role.

The Government’s policy underpinning this Children First National Guidance is:

- the welfare and safety of children, which is central to all Government policy;
- the promotion of and support for family life;
- the use of the minimum necessary intervention, in a timely way, to keep children safe;
- agencies working together to help children reach their full potential;
- agencies working together to provide safer and more effective services;
- the State and civil society working together to promote children’s welfare.34

33 Available at: https://www.dcy.gov.ie/documents/publications/National_Standards_for_Foster_Care.pdf.
34 Available at: https://www.dcy.gov.ie/documents/Publications/ChildrenFirst.pdf.
10. The role of HIQA as a monitoring authority for Foster care services

HIQA has statutory responsibility for monitoring and inspecting children’s social services, including children’s statutory residential centres, special care units, child protection services and Oberstown Children Detention Campus. HIQA is authorised by the Minister for Children and Youth Affairs under Section 69 of the Child Care Act 1991, as amended by Section 26 of the Child Care (Amendment) Act 2011, to inspect foster care services provided by the Child and Family Agency (Tusla) and private providers, and to report on its findings to the Minister for Children and Youth Affairs.

HIQA also has statutory responsibility for monitoring foster care services against the National Standards for Foster Care, published by the Department of Health and Children in 2003. HIQA began its monitoring programme of statutory foster care services in Ireland in 2007 and completed inspections by the end of 2016 of all the seventeen foster care service areas in the country. Although private foster care companies have been used since the 1990s, it was not until 2014 that HIQA began to inspect these companies after legislation was introduced in 2013 to expand its remit. Inspection of private foster care companies was completed by the end of 2016.

The Joint Committee on Children and Youth Affairs met with HIQA on 17 May 2017 as part of its deliberations on Foster Care. HIQA provided an overview of its inspection and monitoring role in the provision of foster care services and asserted that whilst there were many examples of good practice in both statutory and private foster care services, some significant areas for improvement remain. In this regard, HIQA particularly referred to the assessment and approval of foster carers, the management of allegations against foster carers and the governance and oversight of care practices.

The Committee raised concerns with Tusla regarding the publication of two reports in particular relating to the Dublin South Central foster care service operated by Tusla and the Care Visions private fostering service which were conducted by HIQA. Some of the key findings of the HIQA report in Dublin South Central were that:
• Safeguarding measures such as the vetting of carers and other adults who lived with or had unsupervised access to children were not consistently undertaken.

• There was no system in place to ensure all staff were vetted in line with Children First (2011) and Tusla's own recruitment policy.

• There was confusion and uncertainty among the team on how to manage welfare concerns and allegations. Among the serious risks that were identified at this service were long delays in the commencement and completion of relative foster carer assessments and in achieving a decision from the foster care committee.

• Regular reviews of foster carers to assess their continuing capacity to provide high quality care to the children placed with them were not taking place.

• Management of the service was crisis-led rather than delivered in a planned manner.\textsuperscript{35}

In relation to the Care Visions fostering service, HIQA found that management and monitoring systems required significant improvement to ensure safe services were provided. In addition, the service told HIQA there had been no child protection concerns in the previous two years.\textsuperscript{36}

\begin{tabular}{|l|}
\hline
\textbf{Recommendation 4} \\
The Committee recommends that the remit of powers afforded to HIQA be extended to include powers of enforcement. This would mean that HIQA could implement the recommendations made in its reports. \\
\hline
\end{tabular}

\begin{tabular}{|l|}
\hline
\textbf{Recommendation 5} \\
The Committee recommends that transparent and robust governance and oversight procedures between Tusla and the private foster companies be put in place without delay. It further recommends that Service Level Agreements (SLAs) are put in place with these companies immediately. \\
\hline
\end{tabular}

\textsuperscript{35} Available at: \url{https://www.hiqa.ie/system/files?file=inspectionreports/0004417-FC-DSC-29-11-2016.pdf}.

\textsuperscript{36} Available at: \url{https://www.hiqa.ie/system/files?file=inspectionreports/0004246-Care%20Visions-08-November-2016.pdf}. 
11. Emergency Out of Hours Service

Tusla provide an ‘Emergency Out of Hours Service’ (EOHS) which has been operational since November 2015. The purpose of the EOHS is to co-operate with and support An Garda Síochána in the execution of their duties and responsibilities under Section 12(3) of the Child Care Act 1991 and referrals made under Section 8.5 of the Refugee Act 1996.

Currently Tusla has dedicated teams for Dublin, Kildare, Wicklow and separately for Cork who provide an EOHS as well as back up emergency residential care for children and young persons who require placements.

For the rest of the country an on-call service is available to An Garda Síochána to provide specialist guidance, advice and information should they request it in the context of their obligations under Section 12 of the Child Care Act 1991.

The Committee met with Tusla on 21 June 2017 and raised concerns in relation to disparity of the provisions of services across the country and the gaps in the on-call service in the EOHS. The service operates 365 days a year from 6pm to 7am and from 9am to 5pm on weekends and Bank Holidays. This means there is a gap in service weekdays from 7am to 9am and at weekends and Bank Holidays from 5pm to 6pm and from 7am to 9am. Tusla has stated that this is due to operational rostering reasons and has not presented a difficulty thus far.³⁷

³⁷ Available at: http://oireachtasdebates.oireachtas.ie/debates%20authoring/debateswebpack.nsf/committeetakes/CYJ2017062100002?opendocument#B00250.
The EOHS is operational 365 days a year from 6pm to 7am and additionally from 9am to 5pm on weekends and bank holidays.

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<thead>
<tr>
<th>Total number of referrals</th>
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<tbody>
<tr>
<td>Age groups</td>
<td></td>
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<tr>
<td>• 0-12yrs: 64</td>
<td></td>
</tr>
<tr>
<td>• 13-15yrs: 80</td>
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<tr>
<td>• 16-17yrs: 107</td>
<td></td>
</tr>
<tr>
<td>• Not specified: 1</td>
<td></td>
</tr>
<tr>
<td>Care status</td>
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<tr>
<td>• Section 4 (voluntary care order):</td>
<td>10</td>
</tr>
<tr>
<td>• Section 5 (accommodation for homeless children):</td>
<td>9</td>
</tr>
<tr>
<td>• Section 12 (power of Garda Síochána to take a child to safety):</td>
<td>120</td>
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<tr>
<td>• Section 13 (emergency care order):</td>
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</tr>
<tr>
<td>• Section 17 (interim care order):</td>
<td>2</td>
</tr>
<tr>
<td>• Section 18 (care order):</td>
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</tr>
<tr>
<td>• Not Specified:</td>
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<tr>
<td>Reason for referral</td>
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</tr>
<tr>
<td>• Child Protection Concerns:</td>
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<tr>
<td>• Family Relationship Breakdown:</td>
<td>76</td>
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<td>• Residential Placement Breakdown:</td>
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<td>• Foster Placement Breakdown:</td>
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<td>Outcomes</td>
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</tr>
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<tr>
<td>• Original Foster Placement:</td>
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<tr>
<td>• Original Residential Unit:</td>
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<td>• Returned Home:</td>
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<td>• Relative Care:</td>
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<td>• Neighbours/Friend:</td>
<td>4</td>
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<table>
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<tr>
<th>On call Social Worker Contacts</th>
<th>• On call social worker contacts for 2017 : 15</th>
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<tr>
<td>Social Admission to Hospital:</td>
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<tr>
<td>Medical Admission to Hospital:</td>
<td>31</td>
</tr>
<tr>
<td>Remained in Garda Custody:</td>
<td>3</td>
</tr>
<tr>
<td>Missing from Care/Placement:</td>
<td>10</td>
</tr>
<tr>
<td>Other:</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>252</td>
</tr>
</tbody>
</table>

**Recommendation 6**

The Committee recommends that an EOHS be provided in all areas of the country. It further recommends that the gaps in the service are closed immediately so that EOHS is available 24 hours a day, 365 days a year.
12. Recruitment and Retention of Staff

The Joint Committee on Children and Youth Affairs addressed the area of recruitment and retention of staff in Tusla which was a recurring theme over the course of their investigations into the area of foster care.

At its meeting with the JCCYA on 31 May 2017, the Irish Foster Care Association (IFCA) brought to the Committee’s attention that the shortage of social workers has resulted in foster carers being requested to supervise access arrangements which is not part of the foster carer’s role. IFCA stated that it had highlighted the inappropriateness of such requests to Tusla.

At the same meeting EPIC addressed the need to have a dedicated link social worker who provides support to the foster carer stating that “In March 2017 approximately 6% of children in general foster care and 8% of children in relative care did not have a dedicated social worker. This equates to over 400 children. At the end of 2016, 18% of general foster carers and 20% of relative foster carers did not have a link social worker.” EPIC believes that it is critical that this situation is addressed through the recruitment process.

At its meeting with Tusla on 21 June 2017 Members raised concerns as to what could be done to improve the situation and what analysis had been carried out to attract more social workers into vacant positions. Mr Fred McBride, Chief Executive Officer (CEO) of Tusla, informed the Committee that “for the past two years we have had significant funding investment into the agency and our challenge now is to try to recruit sufficient numbers in line with the investment. That has been challenging, but as I said in my presentation in the first quarter this year, we are recruiting significantly more people than have been leaving the service. That is probably the case for the first time.”

Other areas identified by Tusla as being factors which impact their ability to recruit staff quickly enough is that the National Recruitment Service System is too slow to enable them to recruit social workers as needed. To address this Tusla stated that it has begun developing
its own capacity to hire social workers and administration staff and is examining creative approaches to recruitment such as the possibility of an apprenticeship programme for social workers.

Tusla wrote to the JCCYA on 11 July 2017 stating that it intends to recruit an additional 369 whole time equivalent posts across a range of professional, para-professional and business support functions before the end of 2017. Tusla advised that it had recruited an additional 201 staff from January to May 2017 and informed the Committee that a further 178 were in the process of completing the recruitment process.41

<table>
<thead>
<tr>
<th>Recommendation 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Committee recommends that Tusla continues to be creative in their approach to recruitment and retention of staff. The Committee also recommends that a collaborative approach between the HSE and Tusla be examined to see what is working in the area of recruitment and retention of staff with a view to knowledge sharing and improvement of processes.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Recommendation 8</th>
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</thead>
<tbody>
<tr>
<td>The Committee recommends that link social workers be assigned to all foster carers to provide support. The Committee recommends that a dedicated social worker be provided to all children in foster care.</td>
</tr>
</tbody>
</table>

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41 Figures taken from correspondence received from Tusla by the JCCYA dated 11 July 2017.
10. Section 12 of the Child Care Act 1991 – Consideration of the Section 12 Audit Report

The Committee met with Dr Geoffrey Shannon on 28 June 2017 to consider the findings of his Audit Report on Section 12 of the Childcare Act 1991. This report examines cases where children are removed from their parents/legal guardians and placed in care. The Section 12 Audit Report was commissioned by An Garda Síochána on the use of the child protection powers afforded to it under the Child Care Act 1991 and was published on 29 January 2017.

i. Audit Findings

The Audit’s remit was confined to an examination of the treatment of children when removed under An Garda Síochána’s child protection powers and functions. The evidence from each stage of the Audit suggests that removal of children under Section 12 is a rare occurrence for members of An Garda Síochána. There is no standard case in which a child is removed under Section 12. The power is invoked in a highly diverse and complex range of circumstances. The Report made largely positive findings on the treatment of children by members of the Gardaí following their removal under Section 12.42

The main findings of the Report with regard to foster care include:

- The Report found removal under Section 12 was used most often when a parent or person caring for a child failed to be able to care for the child or was temporarily unable to care of the child. The Audit has found evidence of repeated removal of some children under Section 12 from the same family circumstances.
- The Audit highlighted significant gaps in training of Gardaí, primarily the lack of formal core training in child protection issues. It also found an almost total absence of training in policy direction at an operational level with regard to ethno-cultural diversity.

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The Audit found little evidence that An Garda Síochána, Tusla and related agencies had formal structures in place to encourage inter-agency cooperation. It found that Tusla did not follow-up with Gardaí following on from a transferral of responsibility back to Tusla.

The Audit found that Garda Stations are not appropriate as an ‘immediate place of safety’ for children who are removed under Section 12 actions.

The Audit identified instances where private foster care services refused to organise placements for children with challenging behaviour.

The Audit highlighted the need for an adequate out of hour’s service. The Report noted the fact that there are service providers for four locations only, Dublin, Kildare, Wicklow and Cork and suggested that the demand for services in other jurisdictions be examined. In the rest of the country where Tusla provide no service, private providers are under no statutory obligation to take a child deemed too difficult or problematic.

The Audit identified issues surrounding the operation of the Garda PULSE system and how narratives/information are recorded on the system. The Audit found that certain ethno-cultural demographic information was not routinely documented on PULSE.

The Audit raised issues relating to data collection and data management. The Audit found that this can largely be attributed to difficulties with inter-agency co-operation.

**ii. Audit Recommendations**

There are seventeen recommendations put forward in the Report, which include the following:

- A social work service that is directly accessible to children or families at risk outside of office hours should be developed as a matter of priority to ensure a comprehensive and unified child protection system.

- Specialist child protection units within An Garda Síochána should be established on a national basis.
Consideration should be given to having social workers assigned to specialist child protection units.

The legal framework applying to emergency placement with private providers should be clarified to remove any ambiguity as to the standards to be applied in respect of such placements, particularly in cases where children have emotional and behavioural problems.

Comprehensive training on child protection should be provided as part of the Garda training programme, reflecting current law and international best practice.

Inter-Agency co-operation and data sharing should be carried out to enable Gardaí, Tusla and other related agencies to operate effectively.

The Committee held in-depth discussions with Dr Shannon and supported the recommendations made in the Audit. Dr Shannon’s Report highlighted incidents of repeated removal of children from the same families under Section 12 and this was recorded on the PULSE system as to be largely attributable to the misuse of alcohol. Members raised their concerns that the same children were returned to their families after removal under Section 12 as identified in the Audit. The Committee recognises the area of alcohol abuse as a key factor putting children at risk and causing the need for their removal from families and agrees that the area of alcohol abuse in Ireland needed to be addressed.

Another key theme to emerge from the Audit is in the area of inter-agency co-operation, specifically relating to data sharing and communication issues. Members agreed that it is essential that those who work in the area of child protection services can share information on vulnerable individuals and their families. Dr Shannon recommended that Gardaí and social workers are co-located in specialist child protection units, to mitigate the risks posed by the disparities in the out-of-hours service which he feels is currently not fit for purpose. The Committee would like members of An Garda Síochána and Tusla construct a joint plan and present it to the Committee at a future date, on how it is envisaged that this proposal could be successfully rolled out.
**Recommendation 9**
The Committee supports the recommendations made in the Audit Report on Section 12 of the Childcare Act 1991 and advocates that these recommendations are implemented within an agreed timeframe.

**Recommendation 10**
The Committee recommends that co-location of Gardaí and Tusla officials in specialist child protection units be implemented at the earliest possible date to strengthen the area of inter-agency collaboration and data sharing and to mitigate against risks posed by gaps in the Emergency Out of Hours Service.

**Recommendation 11**
The Committee recommends that a plan be put in place to ensure that vulnerable children are not returned after repeated instances of having being removed under Section 12 of the Childcare Act 1991 to the same circumstances that required them to be taken into care in the first place.
13. Adoption of ‘Signs of Safety – a National Approach to Practice’ by TUSLA in relation to Foster Care

At its meeting of 21 June 2017 the Joint Committee on Children and Youth Affairs met with Tusla in relation to its ongoing examination of the area of foster care as part of its work programme. Tusla informed Members that it was adopting ‘Signs of Safety – a National Approach to Practice’ as part of its ongoing comprehensive reform of child protection, early intervention and family support services under its newly launched Child Protection and Welfare Strategy.

i. Background

The Signs of Safety process is a risk assessment and case planning framework that integrates professional knowledge with local family and cultural aspects in an effort to keep the safety and well-being of the child at the centre of the work. It is a solutions-based therapy approach. The Signs of Safety approach to child protection casework was developed during the 1990s in Western Australia by Andrew Turnell and Steve Edwards, in collaboration with over 150 West Australian front-line child protection workers and examined what these practitioners viewed as what works best in difficult cases. Its purpose is to enable practitioners across different disciplines to work collaboratively and in partnership with families and children. The tools are designed to help conduct risk assessments and produce action plans for increasing safety, and to reduce risk and danger by identifying areas that need change while focusing on the strengths, resources and networks that the family have. It is not intended to be a fixed set of rules, rather it was created to be an evolving strategy, informed over time by practitioners as to what works best for them.

The aim of Signs of Safety is to work in partnership with families, to increase safety and reduce risk by focusing on the family’s strengths, resources and support networks. It is deemed to be a strengths-based, safety-organised approach to child protection casework. Signs of Safety is now used in jurisdictions in the USA, Canada, the UK, Sweden, the Netherlands, New Zealand and Japan.
ii. Benefits

Studies have found that the benefits of *Signs of Safety* include:

- Working collaboratively with all stakeholders involved in a case to assess and plan for increasing safety and reducing risks by focusing on strengths, resources and networks the family have;
- Taking more time to engage the family in the process focuses on the strengths of the family that support safety. Encouraging participation from extended family, who can contribute and be a part of the family’s safety plan;
- Using straightforward tools to work with children;
- Improving questions that the child protection workers ask a family, focusing on their strengths, which in turn can lead to families to become more engaged in the process. This can provide some assurance to workers with regards to the safety of children;
- Building confidence by using this approach to allow parents to be viewed as the experts and to take ownership for their collaborative plan;
- Aiming to reduce the number of children removed from families.

iii. Challenges

- Parents or carers may disagree or be unwilling to engage or cooperate with the process;
- There has to be buy-in from both leaders and child protection workers for it to work effectively;
- Critics claim the danger is that focusing on a parent's future could mean everyone fails to see what's happening to the child right now;\(^3\)
- A pilot project using solution-focused brief therapy in child protection was launched by Haringey Council in March 2006. Haringey had responsibility for the case of Baby P at this time. Social workers and managers were given a two-day training course followed a month later by further instruction on risk assessment and *Signs of Safety*. A solution-focused brief therapy was deemed not appropriate in this case and the authority no longer uses it in child protection following on from the death of the

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Baby P on 3 August 2007. A second review of his case found that his death could and should have been prevented.\(^4^4\)

The roll-out of the *Signs of Safety* approach was discussed at the meeting with Tusla on 21 June 2017 in addition to the matter being raised again at the meeting with Dr Geoffrey Shannon on 28 June 2017. Members signalled their concerns on the adoption of the *Signs of Safety* and discussed its failings in relation to the case of Baby P in London in 2007. The Committee sought assurances from Tusla that the adoption of the *Signs of Safety* model in the area of child protection be assessed on a continuous basis to ensure its effectiveness.

<table>
<thead>
<tr>
<th>Recommendation 12</th>
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<tbody>
<tr>
<td>The Committee recommends that the implementation of the <em>Signs of Safety</em> approach is monitored and reviewed on an on-going basis to ensure that it is fit for purpose.</td>
</tr>
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</table>

14. Other issues

1. The issue of the handling of allegations of abuse made against foster carers was raised by IFCA its meeting with the JCCYA on 31 May 2017. The JCCYA wishes to support the IFCA’s request that the national policy in responding to allegations made against foster carers which was published in May 2017 be implemented consistently across all Tusla areas. It further agrees that social workers should be trained in its implementation and that there is continuous assessment of its implementation. In addition to this, the JCCYA requests that regular updates be provided to the Committee on the implementation of this policy.

2. The JCCYA would also like the area of placing children with foster carers long distances from their place of birth to be addressed by Tusla. The placement of children in care at great distances from their home of origin requires foster carers to travel long distances to support access arrangements.

3. The JCCYA wishes to see improvements in the timeframe for the assessment of relatives as suitable foster carers so that children taken into care can experience the minimum amount of disruption in the care process.

4. The JCCYA views the lack of mental health services as a child protection issue and would like to see improvements in children in care accessing Child and Adolescent Mental Health Services (CAMHS). This is to ensure that children who find themselves in the care of the State and are experiencing mental health difficulties receive appropriate treatment in a time-frame commensurate to their needs.45

45 Available at: https://hse.ie/eng/services/list/4/Mental_Health_Services/CAMHS/
5. The JCCYA wants procedures in the area of information gathering, processing and sharing to be streamlined across all seventeen foster care areas to enable greater communication between agencies and a coherent approach to the provision of foster care. The Committee welcomes the rollout of the National Childcare Information System (NCCIS) and requests that it be kept up-to-date with its implementation, which Tusla has stated will be fully functional by March 2018.\textsuperscript{46}

\textsuperscript{46} http://oireachtasdebates.oireachtas.ie/debates%20authoring/debateswebpack.nsf/committeetakes/CYJ20170621000017/opendocument.
Appendix 1

COMMITTEE ON CHILDREN AND YOUTH AFFAIRS

TERMS OF REFERENCE

a. Functions of the Committee – derived from Standing Orders [DSO 84A; SSO 70A]

(1) The Select Committee shall consider and report to the Dáil on—

(a) such aspects of the expenditure, administration and policy of a Government Department or Departments and associated public bodies as the Committee may select, and

(b) European Union matters within the remit of the relevant Department or Departments.

(2) The Select Committee appointed pursuant to this Standing Order may be joined with a Select Committee appointed by Seanad Éireann for the purposes of the functions set out in this Standing Order, other than at paragraph (3), and to report thereon to both Houses of the Oireachtas.

(3) Without prejudice to the generality of paragraph (1), the Select Committee appointed pursuant to this Standing Order shall consider, in respect of the relevant Department or Departments, such—

(a) Bills,

(b) proposals contained in any motion, including any motion within the meaning of Standing Order 187,

(c) Estimates for Public Services, and

(d) other matters as shall be referred to the Select Committee by the Dáil, and

(e) Annual Output Statements including performance, efficiency and effectiveness in the use of public monies, and

(f) such Value for Money and Policy Reviews as the Select Committee may select.

(4) The Joint Committee may consider the following matters in respect of the relevant Department or Departments and associated public bodies:

(a) matters of policy and governance for which the Minister is officially responsible,

(b) public affairs administered by the Department,
(c) policy issues arising from Value for Money and Policy Reviews conducted or commissioned by the Department,

(d) Government policy and governance in respect of bodies under the aegis of the Department,

(e) policy and governance issues concerning bodies which are partly or wholly funded by the State or which are established or appointed by a member of the Government or the Oireachtas,

(f) the general scheme or draft heads of any Bill,

(g) any post-enactment report laid before either House or both Houses by a member of the Government or Minister of State on any Bill enacted by the Houses of the Oireachtas,

(h) statutory instruments, including those laid or laid in draft before either House or both Houses and those made under the European Communities Acts 1972 to 2009,

(i) strategy statements laid before either or both Houses of the Oireachtas pursuant to the Public Service Management Act 1997,

(j) annual reports or annual reports and accounts, required by law, and laid before either or both Houses of the Oireachtas, of the Department or bodies referred to in subparagraphs (d) and (e) and the overall performance and operational results, statements of strategy and corporate plans of such bodies, and

(k) such other matters as may be referred to it by the Dáil from time to time.

(5) Without prejudice to the generality of paragraph (1), the Joint Committee appointed pursuant to this Standing Order shall consider, in respect of the relevant Department or Departments—

(a) EU draft legislative acts standing referred to the Select Committee under Standing Order 114, including the compliance of such acts with the principle of subsidiarity,

(b) other proposals for EU legislation and related policy issues, including programmes and guidelines prepared by the European Commission as a basis of possible legislative action,

(c) non-legislative documents published by any EU institution in relation to EU policy matters, and

(d) matters listed for consideration on the agenda for meetings of the relevant EU Council of Ministers and the outcome of such meetings.
(6) The Chairman of the Joint Committee appointed pursuant to this Standing Order, who shall be a member of Dáil Éireann, shall also be the Chairman of the Select Committee.

(7) The following may attend meetings of the Select or Joint Committee appointed pursuant to this Standing Order, for the purposes of the functions set out in paragraph (5) and may take part in proceedings without having a right to vote or to move motions and amendments:

(a) Members of the European Parliament elected from constituencies in Ireland, including Northern Ireland,

(b) Members of the Irish delegation to the Parliamentary Assembly of the Council of Europe, and

(c) at the invitation of the Committee, other Members of the European Parliament.

b. Scope and Context of Activities of Committees (as derived from Standing Orders) [DSO 84; SSO 70]

(1) The Joint Committee may only consider such matters, engage in such activities, exercise such powers and discharge such functions as are specifically authorised under its orders of reference and under Standing Orders.

(2) Such matters, activities, powers and functions shall be relevant to, and shall arise only in the context of, the preparation of a report to the Dáil and/or Seanad.

(3) The Joint Committee shall not consider any matter which is being considered, or of which notice has been given of a proposal to consider, by the Committee of Public Accounts pursuant to Standing Order 186 and/or the Comptroller and Auditor General (Amendment) Act 1993.

(4) The Joint Committee shall refrain from inquiring into in public session or publishing confidential information regarding any matter if so requested, for stated reasons given in writing, by—

(a) a member of the Government or a Minister of State, or

(b) the principal office-holder of a body under the aegis of a Department or which is partly or wholly funded by the State or established or appointed by a member of the Government or by the Oireachtas:

Provided that the Chairman may appeal any such request made to the Ceann Comhairle / Cathaoirleach whose decision shall be final.
(5) It shall be an instruction to all Select Committees to which Bills are referred that they shall ensure that not more than two Select Committees shall meet to consider a Bill on any given day, unless the Dáil, after due notice given by the Chairman of the Select Committee, waives this instruction on motion made by the Taoiseach pursuant to Dáil Standing Order 28. The Chairmen of Select Committees shall have responsibility for compliance with this instruction.
Appendix 2

Joint Committee on Children and Youth Affairs

Deputies:
- Lisa Chambers (FF)
- Alan Farrell (FG) [Chairman]
- Kathleen Funchion (SF)
- Denise Mitchell (SF)
- Tom Neville (FG)
- Sean Sherlock (LAB)
- Anne Rabbitte (FF)

Senators:
- Lorraine Clifford-Lee (FF)
- Máire Devine (SF)
- Joan Freeman (Ind)
- Catherine Noone (FG)

Notes:
2. Senators nominated by the Seanad Committee of Selection and appointed by Order of the Seanad on 21 July 2016.
3. Deputy Catherine Martin discharged and Deputy Kathleen Funchion appointed to serve in her stead by the Fifth Report of the Dáil Committee of Selection as agreed by Dáil Éireann on 4 October 2016.
4. Deputy Josepha Madigan discharged and Deputy Tom Neville appointed to serve in her stead by the Sixth Report of the Dáil Committee of Selection as agreed by Dáil Éireann 15 November 2016.
5. Deputy Jim Daly discharged and Deputy Alan Farrell appointed to serve in his stead by the Tenth Report of the Dáil Committee of Selection as agreed by Dáil Éireann 11 July 2017.
