



IFCA SUPPORT SERVICE: 2016 ANNUAL REVIEW

Service Summary

This is the third review of IFCA'S National Support Service and documents the work of the National Support Helpline and issues arising for foster carers and others who are involved in foster care during 2016.

The aim of this IFCA review is to provide a comprehensive overview of the types of issues presented by users of our service and to also present a summary of accomplishments of the service over the last 12 months.

IFCA's Support Service has continued to develop throughout the year but still faces a number of challenges to overcome, with the aim of the provision of a quality and consistent offering to those involved in foster care and our members in particular. The achievements of the service and details of the ongoing difficulties faced are presented in detail on [pages 2 – 6](#).

The support service dealt with 932 cases in 2016. Improvements in the methods used to collate data were made during the summer months to elicit more defined detail under specific headings. ([see page 6](#)). In 2016, IFCA received a total of 1445 inbound contacts, almost equal to the total of the previous year. In addition to the provision of support through the helpline, we have also referred 68 individuals on to a specific support volunteer for more ongoing and robust assistance.

The Service has dealt with cases from every county, with the most frequently represented being Cork (7.5%), Dublin South West (5.7%), Waterford (5.3%), and Dublin North City (4.9%). Throughout 2016 IFCA's support service monitored increases in calls on particular issues from a number of different areas. This has led to IFCA making contact directly with the relevant area managers to discuss particular issues in these specific regions throughout the year ([See pages 11-14](#).)

The range of primary presenting issues for users of the service continue to be diverse. However, the most recurrent trends relate to *General Information on Fostering* (10.3%), *Access*: (7.3%), *financial query* (6.4%), *Allegations* (6.4%), Specifics relating to most of these issues are outlined on [pages 14- 22](#).

There continues to be a significant volume of cases that cite *Communications with a Social Worker* as a secondary factor: **31%** of all cases. Every month in 2016, this accounts for the highest number of cases where callers have stated this is the main compounding factor in dealing with their current issue. This is in accordance with last year's findings also and is elaborated on [pages 23- 28](#). This section also describes the improved reporting capacity of IFCA's CRM system, allowing for a more detailed analysis of this particular concern.

With regards to cases referred to National Support Volunteers, the increase in volume and complexity of cases and requests for support workers continues to be a challenge to IFCA. Five new national support volunteers have been recruited and trained, in addition to five new helpline volunteers. It is becoming more apparent that more specialist training to all volunteers will be required, especially with regards to issues such as allegations and

placement disruptions, in order for them to maintain the standards of support which we hope to provide. 43% of cases referred to volunteers are centred around allegations and placement breakdowns/endings. Details of cases allocated to National Support Volunteers are on [pages 31-33](#).

2016 Support Service Achievements

1. The further development and implementation of IFCA's case management database. The addition of further categories as requested by Tusla and the improvement of reporting parameters. This has greatly enhanced the accuracy of reporting and analysis of cases that come through IFCA's support service.
2. The ongoing use of support statistics to facilitate discussions with all relevant parties regarding fostering issues. These have routinely been provided and discussed at local CFA meetings and with senior Tusla staff. Such meetings have increased in frequency with collaborative relationships being built with key personnel involved in Foster Care in Ireland
3. IFCA have noted significant reductions in calls (and subsequent cases) from a number of areas in which we engaged in meaningful and productive dialogue with such relevant Tusla personnel.
4. The recruitment and training of 10 support volunteers (5 Helpline Volunteers / 5 National Support Volunteers) to meet the demands of our service users for support.
5. A comprehensive survey and consultation was undertaken and facilitated by an independent organisation to improve the quality of the support service, whilst also ensuring that our volunteers are provided with tailored support and training. This project also enabled IFCA to further analyse and review the experiences of those involved in foster care through robust and insightful discussion and engagement with the individuals who are supporting them through our service.
6. The provision of ongoing training (internal and external) to all support volunteers.
7. Consolidation of a robust and comprehensive model of professional supervision and support for all helpline and national support volunteers. This has been further strengthened by the appointment of a dedicated Supervision Professional in a staff role (30 hours per month).
8. The appointment of a dedicated Project Worker for the Support Service (21 hrs per week). This role allows for considerable assistance to the Head of Support in providing the highest quality of service provision, ongoing management of all support volunteers and associated research and analysis of relevant issues and trends in fostering.
9. 932 cases created by the support team.
10. Successful management of a 39% increase in allocated cases to National Support Volunteers.
11. The review and analysis of numerous relevant cases informed the content and solutions of the submission to Tusla on the current review of the Foster Care Committees: Policy, Procedure and Best Practice Guidance.

12. Research into three years of support cases relating to Aftercare informed the content and solutions submitted for Tusla's review of National Leaving and After Care Policy.
13. Involvement in the foundation of an organisation called Irish Attachment in action. The aims of the organisation are to advocate for attachment theory and practice to be a fundamental element of the education of all professionals (social workers, healthcare practitioners, social care workers, teachers, etc), parents, foster carers; develop training opportunities on attachment; advance effective attachment-informed practice; develop, promote and disseminate research into attachment.
14. Liaison with Tusla's quality department concerning the policy relating to "Tell Us" – Tusla's new complaints and feedback mechanism. IFCA consulted with the Tusla Quality Department throughout 2016 and made a number of suggestions relating to this new policy, which were included in the final document.
15. To provide our members with support and relevant information, IFCA published an information document on ["Safe Care and Dealing with Complaints & Allegations of Welfare Concerns and Abuse"](#) which was made available to all members and carers relating to allegations. To supplement this, the support service has made conducted a number of information talks on the issue in a number of areas around the country.
16. Completion of Phase 1 of a specific project relating to the provision of peer support to children of Foster Carers. Considerable research into the topic has been completed with phase 2 to commence in February 2017.

Challenges to Provision of Support

IFCA's 2015 service summary highlighted a number of challenges to the delivery of its service, as in many instances change required is external to IFCA. The 2016 annual report unfortunately highlights many of the same issues again which is disappointing despite the continued efforts by IFCA to work collaboratively with the relevant stakeholders to address them. Comparisons between the 2015 and 2016 Support Service Helpline data confirms this trend. Issues which remain the same are highlighted with this symbol!

IFCA advocated for change in the areas highlighted throughout 2016, with the dissemination of our half-yearly report to Tusla, and joint local area IFCA/Tusla specific meetings where issues specific to that particular area were raised. In some instances, local area meetings have effected greater change rather than change at the macro level.

- **! Poorly defined protocol relating to IFCA/Tusla relationship:** As in 2015, it is evident that both organisations have a different structure and this may often cause considerable delays in obtaining information. The Head of Support has working relationships with a number of senior Tusla personnel but there is no dedicated point of reference to compliment and coordinate joint efforts for improvements in levels of support, information and advice offered to those involved in foster care. This can frustrate the response to the submission of reports, reviews or relevant observations or articulation of concerns where a defined protocol for jointly addressing such matters is not in place or agreed.

- **Solution:** IFCA to meet with policy advisors and other relevant contacts in Tusla to determine a structure and mutually agreed protocol for any collaborative work together. This could address a structure of communication, relevant timelines, procedures for requesting assistance etc.
- **Solution:** IFCA to discuss a structure for sharing quarterly support statistics with senior management in Tusla in order to maintain a consistent review of issues faced and possible collaborative solutions. A defined follow-up mechanism to be agreed to ensure productive forward motion on issues to be addressed.
- **! Lack of availability of Tusla Policies and Procedures:** Throughout 2016 IFCA has engaged with colleagues in Tusla making frequent requests to obtain assistance and guidance. Requests to obtain relevant documentation, in particular policy documents, have not always been forthcoming, which impedes the work of the Support Service. IFCA continues to await numerous policies relating to placement endings, relative care and other areas. As stated at the onset of this report, issues raised two years ago remain the same, and where requests for relevant policies, procedures or guidance documents are made, this situation remains unchanged. The volume of cases relating to such difficulties has increased steadily with requests sought from all involved in foster care, including social workers. IFCA has received very few policies or procedures that were requested during 2016. There are a number of policies quoted in the alternative care handbook that remain in “draft” format which pertain to foster care.
- **Solution:** IFCA to compile a list of documents required to enable it to offer advice and guidance to foster carers and submit to the COO of Tusla.
- **Solution:** Appropriate access to Tusla’s information “Hub” to be granted to the relevant IFCA personnel to allow for access to useful documentation to assist in the delivery of quality advice, information and support.
- **Solution:** Similar findings have arisen from the recent IFCA/Tusla joint consultations for the resolution of such problems is currently being proposed.
- **Variation of approach to management of key issues:** Particular reference is drawn to issues such as allegations and placement disruptions throughout the body of this review. IFCA is aware of many varying practices and procedures relating to these and other areas of practice such as access, aftercare, communication modalities etc. In many instances, even where there is a national Tusla policy in place, this is often not implemented and many regional and local variations of approach are observed. Where possible, IFCA bases its advice, information and support on best practice, national standards and relevant legislation. Lack of consistent implementation of the standardised policies and the widely varying practices locally make it difficult for our volunteers or the support service to offer definitive advice on many topics.

The importance of dissemination, implementation, training and monitoring of adherence to Tusla policies and procedures needs to be put in place to ensure that compliance is observed and IFCA has been in consultations at management level and also through engagement with the Quality department in respect to this.

- **Solution:** IFCA to continue to liaise with the Quality Department and senior management in Tusla with a view to articulating these concerns and to be kept abreast of plans to improve the standardisation of approach.
- **Solution:** IFCA to make available to Tusla any specifically tailored reports derived from the support service on request. IFCA to again highlight to Tusla the benefit of joint consultations and the availability and cooperation of our organisation in supplying an overview of issues in Fostering in Ireland.
- **! Placement Breakdowns/Endings:** The complexities of such events are compounded by the fact that there appears to be no defined policy to guide practice. Placement breakdowns are one of the most distressing aspects of foster care for all involved, and are required to be approached with sensitivity and respect. Where a placement breakdown is imminent or has occurred, foster carers have articulated a perceived ongoing lack of support in such instances and are often reluctant to request assistance through the social workers with whom they work. This was further evidenced in the recent analysis of the joint IFCA/Tusla consultations. The joint consultations report offers solutions that will seek to resolve some of the more common difficulties and inconsistencies in the approach to management of such situations, and it is hoped that these can be advanced by both organisations in 2017. However, the absence of a current policy presents a significant challenge for the support team as they seek to advise individuals along the lines of accepted best practice.
 - **Solution:** IFCA will undertake specific research into all cases citing placement disruption as a primary or secondary issue to enable a robust overview and analysis of the subject. This will be shared with Tusla.
 - **Solution:** IFCA will aim to produce an information leaflet on the topic before quarter 2 of 2017.
- **! Communication difficulties with Social Workers:** The majority of difficulties and issues brought to our attention centre around this.
 - **Solution:** The importance of effective and respectful communication between all those involved is essential and located in good practice within Fostering. The area of effective, timely and respectful communication between social workers and foster carers continues to be highlighted in the Support Service statistics. It also features for both social workers and foster carers in the joint IFCA/Tusla report. IFCA continue to be committed to the sharing of information and statistics on these issues with key personnel in Tusla – with improvements already underway in the provision of more concise and tailored analysis of these difficulties, with the capability of creating individualised reports on request.
 - **Solution:** Draw from, and implement the solutions as identified in the joint IFCA/Tusla report to improve the area of communication between social workers and foster carers.

- **Resolution of Issues/Complaints:** Our support volunteers are trained to advise all users of our service of the options and steps available to take in resolving issues of difficulty. This involves attempts at resolution at a local level initially, and where no satisfactory outcome is achieved, foster carers advised of the availability of Tusla’s complaint and feedback service, as well as the existence and purpose of both the Office of the Ombudsman and the Ombudsman for Children. We continue to receive feedback from foster carers in particular, who state that as a result of taking matters through such routes, that they feel their situation has worsened. This is a significant issue for concern for foster care and IFCA.
 - **Solution:** Continued liaison with the Tusla Director of Quality and National Manager for Quality Assurance. A suggested proposal is to link individuals who have experienced such difficulties, directly with these relevant personnel (with the permission and cooperation of the involved carers) in order to facilitate a verifiable investigation into how such situations can be avoided and appropriate measures taken to improve trust in the complaints mechanism. It is also proposed that measures be put in place to monitor the progress of complaints with regard to the outcomes in placements.
 - **Solution:** IFCA aim to produce an information leaflet on the topic before quarter 2 of 2017.

Overview on Data Capture

IFCA’s tailored CRM case management system (“Einstein”) is in its second year of implementation for the support service. A number of amendments were made to the database, based on suggestions from both the helpline volunteers and ongoing requests from Tusla management with regards to a desire for increased detail on issues such as “communication difficulties with social workers” etc.

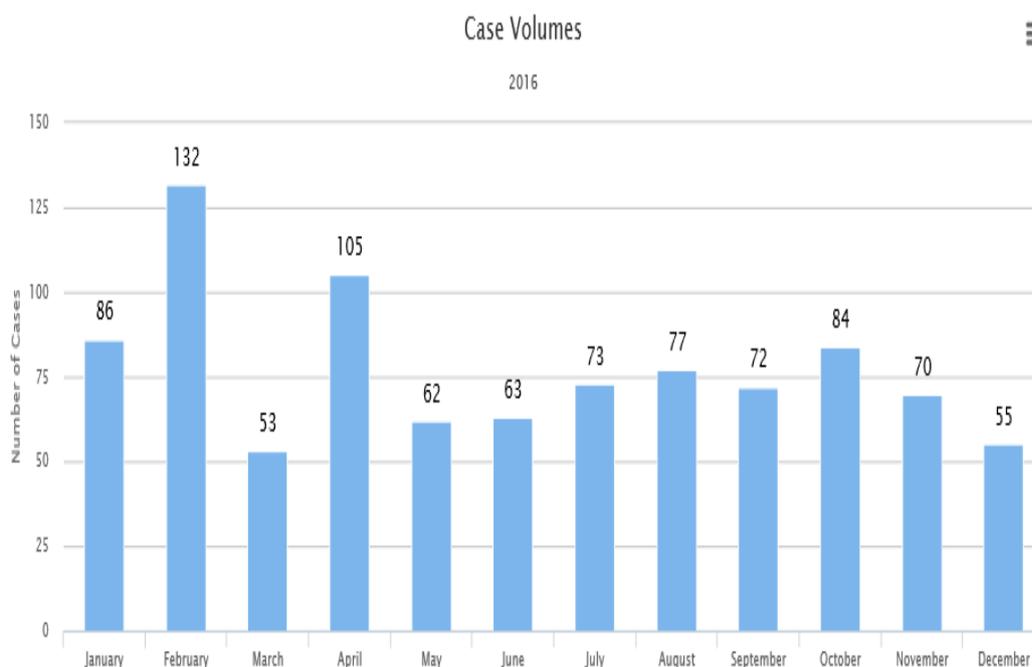
Additional improvements include:

- More categories added for identification of contact types (e.g. Private Placement, Child of Foster Carers, and Citizen’s Information Service).
- An increased range of “presenting issues” to more accurately pinpoint areas of concern. (e.g. Data Protection/Freedom of Information, Private Arrangement Placement)
- The sub-division of concerns citing “*communication difficulties with a social worker*” that allows for recording of the category of social worker whom the difficulties are being experienced, and the specific type of difficulty (since Sep. 1, 2016)
- Recording (on a case by case basis) of whether there is an allocated children’s social worker or link worker in place, where applicable (since Sep. 1, 2016).
- Better reporting parameters allowing for bespoke reporting by the Head of Support. E.g.: *Volume of contacts from a certain county over a defined period relating to a specific issue.* (25% of all calls from ***** in January were concerned with special needs etc.)

Overall Case Volumes

There has been a wide fluctuation in both calls and subsequent case volumes throughout 2016. This is in contrast to reasonably consistent volumes from month to month in 2015. We experienced our most prolific month to date on the helpline (February: 132 cases) along with our least busy (March: 53 cases). We believe the significant increase in February case volumes is linked to increased awareness of the helpline, following on from the commencement of the joint IFCA/Tusla consultations with carers and social workers around the country during this period. Case volumes for the year are represented below.

Fig. 1: Support Service Case Volumes: 2016

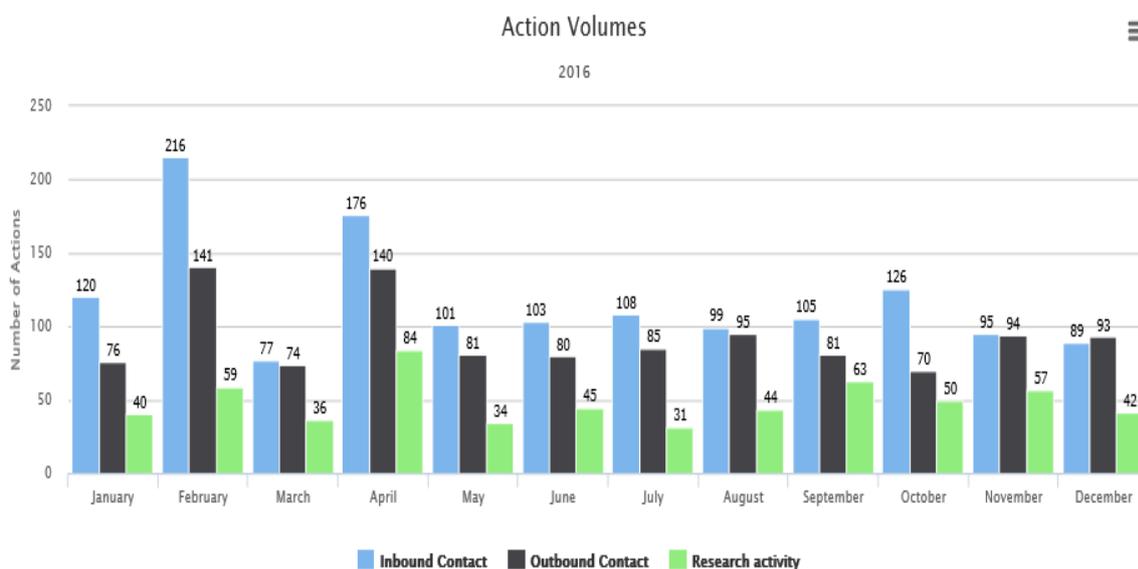


The support service managed 932 cases in 2016, compared to 1079 in 2015. This represents a slight reduction in volume (-13.62%). However, the complexities of many cases, coupled with the consistent volume of actual inbound contacts, has remained relatively high (see next section). The helpline remains available for five days per week and increased support volunteer numbers has enabled the effective management of cases of a more complex nature.

Action Volumes

Depending on the complexity of any individual's query, the volume of work or duration of time spent assisting that individual can vary. For ongoing complex cases, we may refer IFCA members to a specific national support volunteer. However, even cases that stay under the responsibility of the telephone Helpline team can accrue significant amounts of work in order to bring a case to resolution. This may involve (for any one case) more than one **inbound contact** (phone/email/in person) and numerous **outbound contacts** in return. In many instances, a significant piece of "**research activity**" can also take place. This can consist of (but not limited to) checking appropriate legislature and guidelines, researching available resources, liaising with relevant statutory organisations (e.g: Social Welfare, Dept. of Justice etc) or case discussion with supervisors. IFCA have decided to record these actions separately in order to give a concise indication of the volume of work undertaken by the support service – which is not always solely represented by the number of "cases". Fig. 2. shows the volume of case actions for 2015:

Fig. 2: 2016 Case Action Volumes



Despite the reduction in overall case totals, the volume of inbound contacts for 2016 was 1445. This compares to 1454 in 2015, showing that despite the case volume reduction, the volume of inbound communication has stayed almost the same.

In 2016 we accrued the following volumes of work relating to case management:

- 1445 inbound contacts (by phone, email or in person).
- 1110 outbound contacts.
- 585 Research Activities.

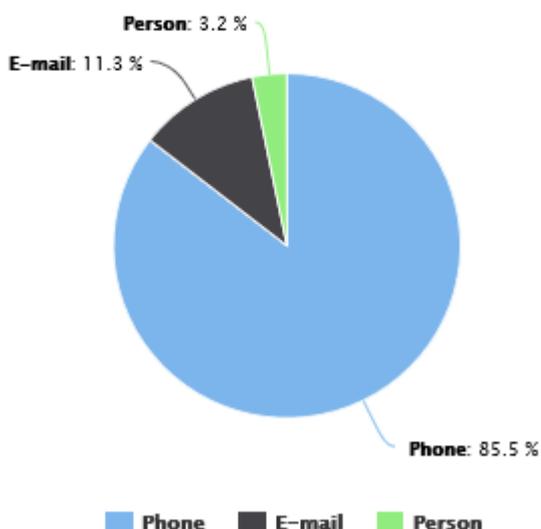
Fig. 2.1: 2016 Case Action Volumes

	Inbound Contact	Outbound Contact	Research activity
January	120	76	40
February	216	141	59
March	77	74	36
April	176	140	84
May	101	81	34
June	103	80	45
July	108	85	31
August	99	95	44
September	105	81	63
October	126	70	50
November	95	94	57
December	89	93	42

Initial Contact Route

Cases grouped by *Contact Route*

01.01.2016 – 31.12.2016



There are a number of ways in which individuals may make contact with IFCA's Support Service. The primary route is through our dedicated helpline on 01 4585123. We also have a dedicated email address (support@ifca.ie) through which many people make their initial enquiries. As always, the majority of our cases are routed through our telephone helpline. In recent months we have seen an increase in numbers of carers presenting in person at our head office. These have tended to be local relative carers or those engaged in private arrangements that have required specific assistance in dealing with Tusla.

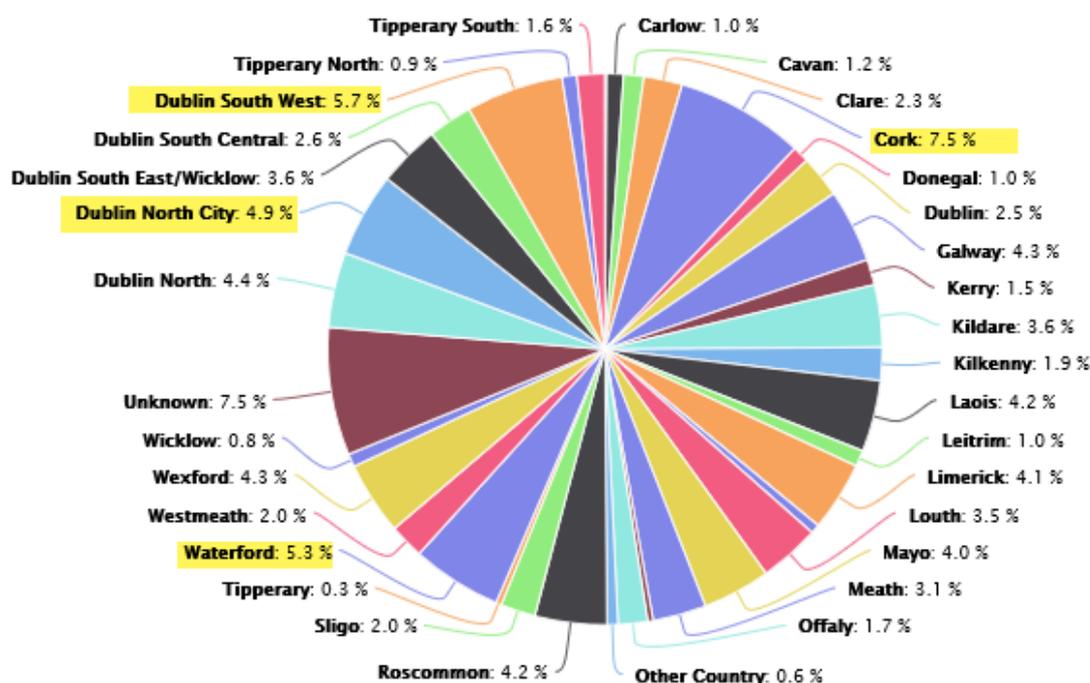
Cases by Area

From January 2016, cases have been tracked by specific regions in Dublin in response to a request from the various Tusla Dublin teams, in order to more accurately report on findings for specific areas. In addition, we have split Tipperary into North & South regions. This now means that we can be more precise in determining the social work team represented in each case. It is worth noting that when dealing with Foster carers, we always check the area where their social work team is based as opposed to their geographical location. In this way, we can ensure that a case, for example, for a carer living in Louth but working with the North Dublin Tusla team is attributed to North Dublin.

Fig. 4: Cases by County /Tusla area

Cases grouped by County

01.01.2016 – 31.12.2016



The areas with the highest volumes of support cases (as % of overall case total) are as follow:

1. Cork: 7.5%
2. Dublin South West: 5.7%
3. Waterford: 5.3%
4. Dublin North City: 4.9%

The spread of cases grouped by county has remained similar to that recorded in 2015, with calls from every county represented. The most significant increases (as a percentage of the overall total) related to the following counties:

- Waterford: from 3.3% to 5.3% of the overall case total.
- Roscommon: from 1.5% to 4.2% of the overall case total.
- Limerick: from 2.9% to 4.1% of the overall case total.

The areas with the highest numbers of cases also happen to be the areas in which there are the greatest numbers of children in care and/or foster carers active. IFCA acknowledges that high percentages of cases from any one area does not necessarily indicate a prevalence of issues or difficulties there. However, through monthly analysis of the captured statistics, we can indicate if there is any increase in the overall percentages that may indicate that there are particular issues which may have increased in any one area.

The combination of analysis of support statistics and the sharing of this information with Tusla Area Manager/Principal Social Workers in a number of areas has been used to serve as a template for our ongoing collaborative work in identifying trends and possible solutions to area-specific problems. Support statistics are reviewed on a weekly and monthly basis by

the Head of Support. Specific trends in issues are tracked, and if a particular area shows an increase in cases over a prolonged period (ideally up to three months), IFCA makes contact with senior management in Tusla (Area Manager/PSW) with a view to discussing specific issues and the recent emerging trends. Whilst we are sure to maintain confidentiality on behalf of all those who use the service, we can provide a snapshot of the specific issues relevant to any one area with a view to finding collaborative solutions.

It is recognised that with regularity over 2016, that such engagement appears to often have a corresponding effect in reducing the volume of calls and subsequent cases from those areas. This is, of course, a correlation and we cannot confirm any causative factors. However, it continues to be our belief that by IFCA articulating the concerns of foster carers in any area to the relevant social work management team, that increased awareness of the issues may assist Tusla in obtaining a better understanding of the issues “on the ground”.

Using this method we have noted a reduction in cases in a number of specific areas:

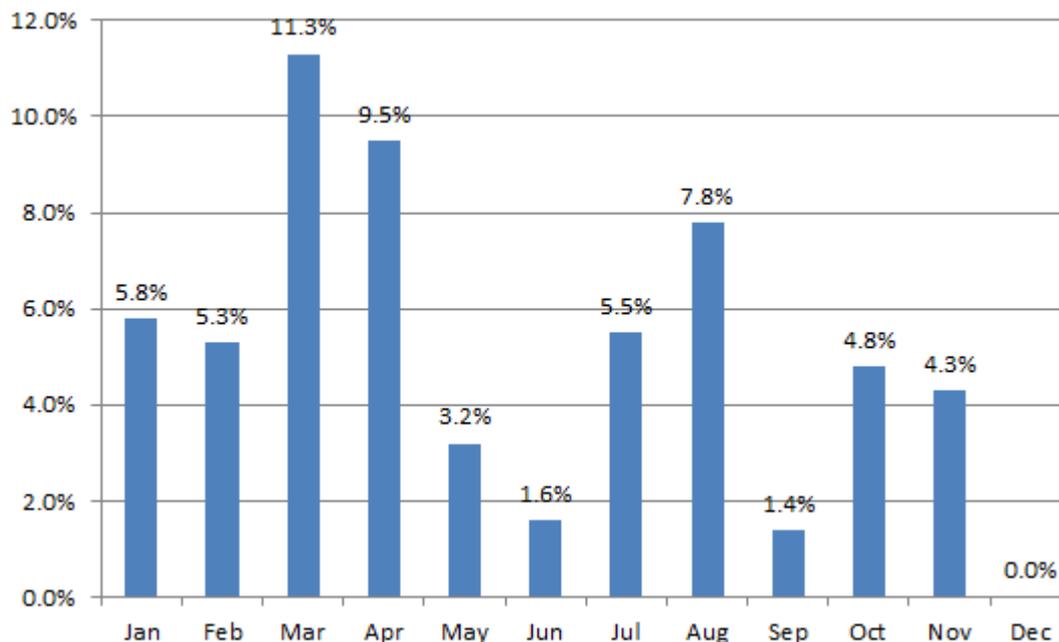
In late 2015, the significant increase in cases from **Carlow/Kilkenny/South Tipperary** was brought to the attention of the relevant Area Manager and PSW. Following a number of meetings throughout the year and the sharing of analysis and trends, plus work on bringing mutual solutions forward for wider discussion, we have seen a significant decrease in cases from the area. These had peaked at 11.1% of our overall case total in late 2015. The average for this year from the same area is 4.5%.

Similar reductions in calls and case volumes, as well as the reduction of reports of difficulties with specific issues has also been noted in **Dublin North City & Dublin North** in the latter part of 2016, following on from the reintroduction of regular meetings with key senior personnel with Tusla.

Another area in which significant case increases have been discussed is **Waterford**. We had noted that from January to April, case rates through our support services were at their highest for the county in 2 years of specific monitoring. There were a range of issues being presented but the highest volume related to Allegations and Child Protection concerns. At a combined total of 44%, this was significantly higher than the national average. Of all the cases relating to allegations nationally in 2016, Waterford at this stage had accounted for close to a third. IFCA met with senior Tusla personnel with a view to articulating the general difficulties that carers were expressing to us, specifically the volume of carers citing communications with social workers as a compounding issue. At 62%, this was amongst the highest cited percentage we have recorded for any one area over a prolonged period. Although this is a difficulty in every area on a regular basis, the level was notably higher in Waterford than the national average (37.1%).

Although specific causation cannot be cited, there has since been a significant decrease in cases from this area coming through our service since the combined IFCA/Tusla correspondence in late April. The reduction in cases (comparative totals as percentage of overall cases) has reduced from 11.3% in March to 0% in December (see fig.5).

Fig. 5: 2016 Waterford Case Volumes 2016.



Cases from the midlands (**Laois/Offaly/Westmeath/Longford**) represent 7.9 % of our overall caseload in 2016. The increase in case volumes had been gradual over the first half of the year. We had seen an obvious increase in cases from Laois (peaking at 14.3% in July) We have also observed increases from Westmeath and Offaly, but with Longford being one of the counties with the lowest utilisation rates in the country. However, many carers who are located in Longford, will indicate they are working with the fostering team in Westmeath or Laois – and as such the issues were recorded as “belonging” to those counties.

The following observations were presented at a senior management level in August in the midlands:

It was highlighted that the following issues were of concern:

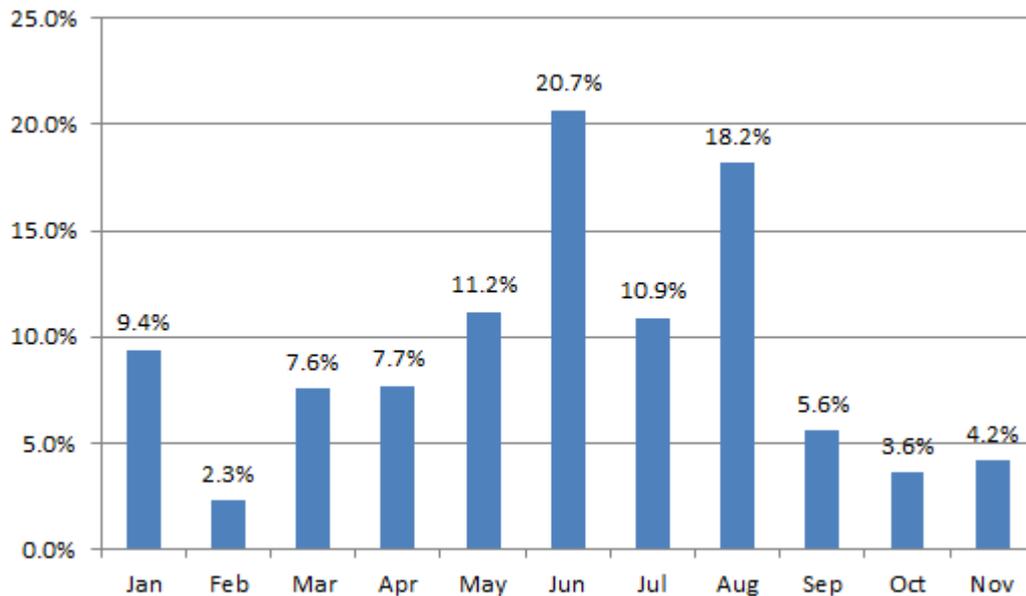
- Placement issues: Reviews: **13% of all midlands cases: 6 times the national average**
- Access: 10%: Higher than the national average
- Allegations: 8%: Higher than the national average
- Placement Endings/Breakdown (collectively): 7%: nearly double the national average

Of specific concern were issues relating to foster care reviews, of which carers identified

- Inconsistent approaches to practice relating to Foster Care Reviews
- A failure to adequately prepare carers for the review process.

Following on from the meeting with Tusla in this area in late August, a significant reduction the volume of cases was noted (see below).

Fig. 6: Midlands Case Volumes 2016.



We are hopeful that ongoing collaboration of this type will continue and further subsequent meetings are planned to review the progress made and to determine causative factors, and welcome the collegial approach to supporting foster carers in their role of fostering.

IFCA continues to view collaborative and productive communication with Tusla as an integral means of articulating the relevant issues in any one specific area and we hope to continue working with all areas to continue to resolve difficulties and become solution focused in our approach to working together. IFCA will also focus on meeting with relevant Area Managers/PSWs in areas as standard practice that we feel would benefit from specific issues and difficulties being highlighted. In 2017 these areas will include those predominantly in the West:

- Mayo
- Galway/Roscommon
- Sligo/Leitrim
- Limerick/Clare/North Tipperary

Presenting issues

There are many new categories which do not necessarily allow for direct comparison with trends from 2015. However, these new categories have been created in order to reflect the increase in concerns of this nature but not necessarily highlighted in previous reports. The Primary issue is that which the contact cites as their main concern (although there will often be a number of secondary concerns or compounding factors). However, in some instances there may be just one area of query only (e.g: requests for general information on fostering).

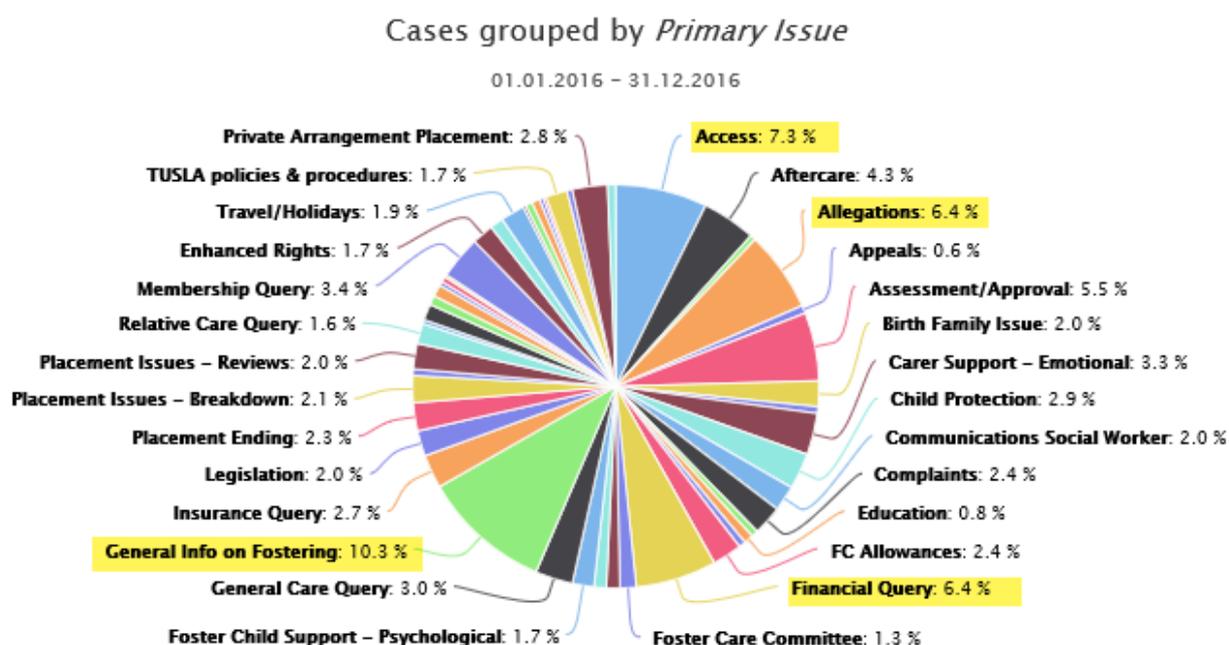
Figure 7. represents the cumulative totals for all presenting issues for 932 cases in 2016. The prevalence or percentage of overall cases in any given month may often be quite different. As we encounter new presenting issues we will add them to the case management database. In some instances these may not have been present in earlier parts of the year and hence will show as a lower percentage when taken in the context of the full twelve-month period.

Recent additions include:

- Data Protection/Freedom of Information
- Private Arrangement Placement

Primary Issue

Fig. 7: Primary Issues (Nationally) 2016



The most prevalent issues are:

- General Info on Fostering: 10.3%
- Access: 7.3%
- Financial query: 6.4%
- Allegations: 6.4%

Overview of most frequent presenting issues

➤ **General Info on Fostering:**

The highest percentage of our cases relate to individuals seeking information about becoming foster carers. Prospective carers are sent information packs and advised to make contact with their local Tusla fostering team and are also provided with the details of the private fostering agencies. Internet searches for general information on fostering yields results that point to IFCA and in many instances, prospective callers indicate to have been given our number by the local Child and Family Agency with regards to obtaining details.

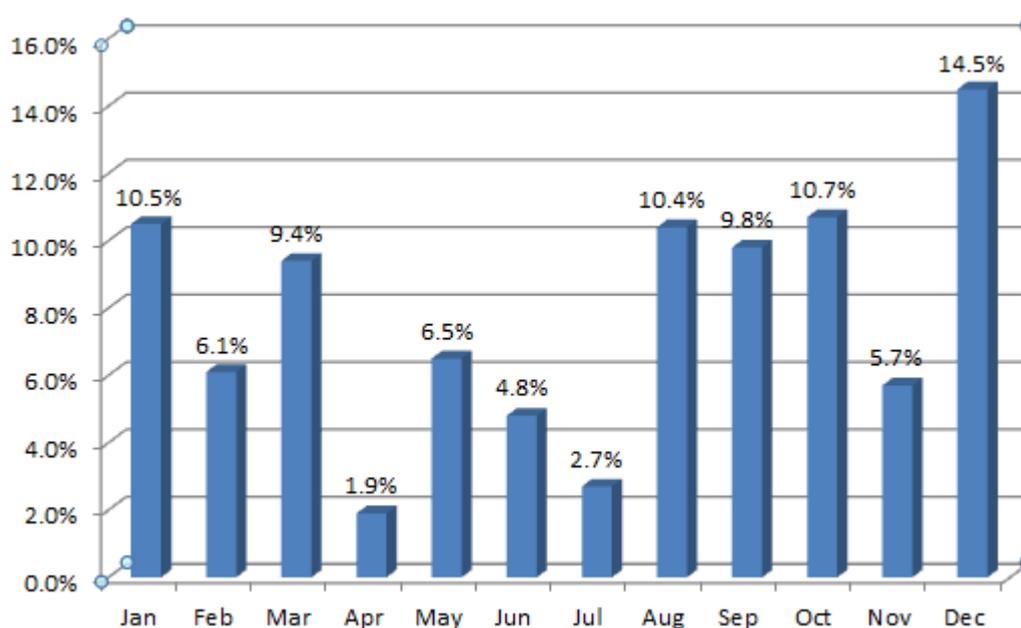
In 2014, such cases accounted for nearly a quarter of all calls and queries. This number was smaller in number again in 2015. Over the last 12 months we have seen this number reduce yet again. Analysis of the reasons for this reduction is required. It is frequently cited that there is a continual need for the recruitment of foster carers, yet there appears to a reduction

in number of those expressing such interest. It would be of benefit for IFCA to share such information with Tusla and to identify if this reduction in potential carers is being witnessed and recorded by them also. It is possible that the economic upturn may be responsible for reduced numbers of new foster carers and further research is needed to determine if the number of carers retiring, stepping down from fostering etc. outstrip the volumes of new carers being assessed. Another possibility is that the improvements in information provision and the initial application route on the Tusla website has routed more potential carers to Tusla directly.

➤ **Access:**

The volume of cases citing *Access* as the primary issue has increased in 2016. Last year such cases accounted for 4.7% of the overall total. This year, it was a factor in 7.3% of all support cases. The monthly totals (as % of overall case volume) are shown in figure 8

Fig. 8: *Percentage of cases relating to Access: 2016 (as primary issue)*



It has been brought to our attention that some foster carers are being requested to attend access with children which is unsupervised by a social worker or access worker. Foster carers have expressed their fear and vulnerability in such situations. Foster carers are relating to IFCA that they are aware of the importance of access of children placed with them with their natural family. The majority of access is “facilitated” by the foster carer – which means they are responsible for bringing the child to and from access. The following comes from IFCA’s own A-Z guide on Fostering: *“Foster carers are not required to pay the costs associated with access such as payments to birth parents or for venue. They are, however, expected to transport the child to and from access visits, where it is possible and appropriate to do so. Foster Carers are encouraged to ensure, where appropriate, that their foster child has some small monies for their own use when attending access.*

At all times where supervision of access is required this is the responsibility of the child and family social worker, child care worker or access worker”.

IFCA is concerned that foster carers are being placed in situations to attend such access which is unsupervised and which may compromise the relationship between the foster carers, foster child and birth family.

Additional difficulties relating to access include the management of children's' behaviour prior to and following on from access visits; frequency of access visits conflicting with arrangements for other children in care or carers' own children; cancellation of access visits and uncooperative rescheduling; lack of clarity regarding "court-imposed" access etc.

Of disquiet is the negative response to foster carers where they highlight issues of concern for the child whilst on access or if they advocate on the child's behalf. There are examples of carers who have articulated to IFCA that as a result of their raising concerns regarding frequency, duration, supervision of, or lack of during access, that they are being viewed negatively in the review process. Foster carers have also articulated a real fear of the child being removed from the placement where they raise issues for the child or themselves. It is clear that at the centre of many of these cases is poor communication between carers and social workers as demonstrated in secondary issues– this will be elaborated on at a later stage in the report.

IFCA considers that situations such as this are not conducive to positive placements and as research indicates, that where a foster carer feels supported through listening, hearing and responding to them, this promotes positive stable placements. Every support should be offered to maintain a placement – except in the presence of significant risk.

There are frequent queries relating to the financial aspects of facilitating access, with many carers indicating that they travel increasingly further distances with increasing frequency and incurring considerable cost and time.

IFCA has requested Tusla to review the current HSE (2013c) guidance document in respect of excess travel for access and financial reimbursement where appropriate.

➤ ***Allegations:***

The issue of allegations and related child protection queries was one of the most pressing challenges for the first half of 2016. By March the service continued to see an increase in cases relating to allegations with a relative increase of over 100% apparent. This continues to be an area of great concern, with clusters observed within certain parts of the country. This was an unprecedented increase for any one issue reported to the support service, and it placed considerable demands on the support team. The ongoing complexities of many of these cases have led directly to the necessity of additional training relating to allegations for our support team throughout the year.

In our meetings with various Tusla managers, it is apparent that there are a wide range of differing policies being used in the management of allegations. Carers continue to report that they are not being provided with sufficient information or correspondence on the processes involved nor are they receiving what they consider to be adequate support when an allegation has been made against them. One of the key difficulties reported to us in such situations continues to be the lack of information regarding the process or the corresponding timelines involved.

IFCA is aware that the national policy is under review. We strongly recommend that this policy be finalised and that those currently facing ongoing or recent allegations should be provided with a copy of the policy currently being adhered to.

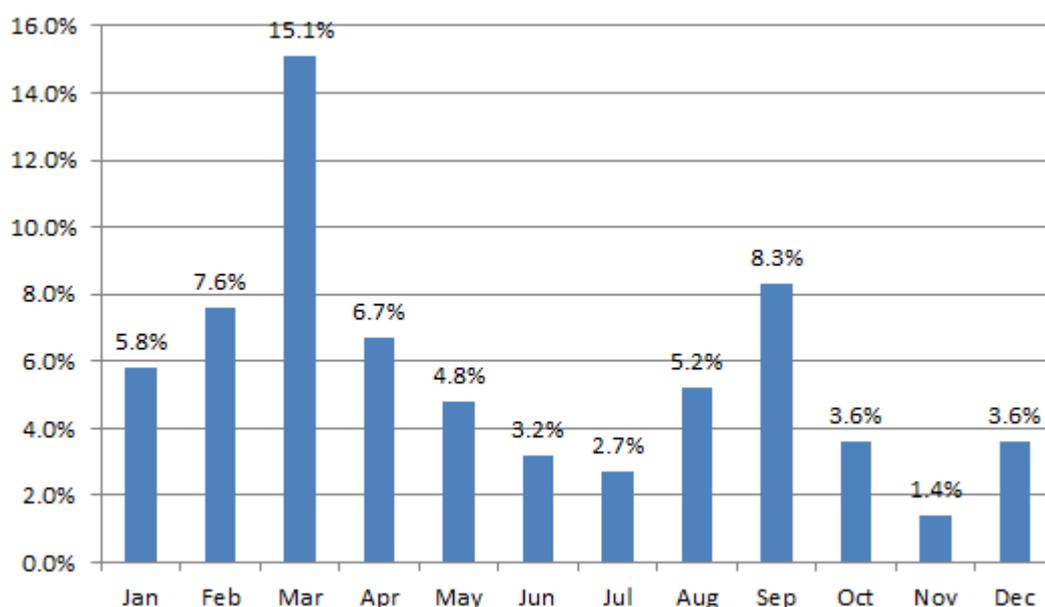
Being the subject of an allegation is extremely stressful for those involved and on review of cases during 2016, communication difficulties with social workers is often central in the situation. Many carers present as extremely upset due to having very little information on the allegations procedures and processes. Our helpline volunteers assist callers with explaining the best practice guidelines relating to such situations but this is often difficult as

each “allegation” case is unique and there would appear to be variations in the approach taken with regards to the information communicated to carers by social workers.

IFCA has prioritised seeking clarity on the policies and procedures relating to allegations and have devised a specific action plan internally to address this. We have communicated directly with the Chief Operating Officer, Head of Policy in Tusla and the Policy Advisor for Alternative Care.

IFCA has met directly with the appropriate managers in areas where allegations cases were featuring most predominantly through the helpline, or where we had seen notable increases. Following on from a number of these meetings the volume of such cases that present through the helpline has reduced significantly. IFCA continues to view this issue as one of our highest priorities for 2017

Fig. 9: *Percentage of cases relating to Allegations: 2016 (as primary issue)*



In 2016, 16% of our allocation of national support volunteers has been to assist with cases where an allegation has been made against a foster carer. 67% of all such cases have directly cited communication difficulties with social worker as a secondary concern or difficulty in dealing with the allegation.

In the absence of a National Policy, IFCA published an information document on [“Safe Care and Dealing with Complaints & Allegations of Welfare Concerns and Abuse”](#) which was made available to all members and carers relating to allegations. To supplement this, the support service has made presentations on the issue in a number of areas around the country. The publication has been well received by our members, garnering much positive feedback on the clarity of its information.

➤ **Financial Queries:**

These account for 6.4% of our overall total. Such queries generally relate to issues concerning payments, social welfare allowances, domiciliary care allowance, family benefit etc. We continue to find that many carers have been given inaccurate information from social welfare representatives or other departments relating to whether they are eligible for tax,

family benefits etc. IFCA volunteers have a comprehensive library of information at their disposal and we have created guidance documents relating specifically to financial payments and their relevance to foster care on a range of topics such as: Family Benefit, Domiciliary Care Allowance, Guardians payments etc.

➤ **Placement Breakdowns/Endings:**

Cases citing “Placement Breakdown/Placement Endings” (combined) as a primary issue account for 4.4% of all cases in 2016. This is in line with the figures from the previous year. This is a particularly complex issue and requires individualised responses by the support team as those affected often present to us in need of much emotional support. The highest percentage of cases referred to an IFCA National Support Volunteer have been related to placement endings or disruptions (21%).

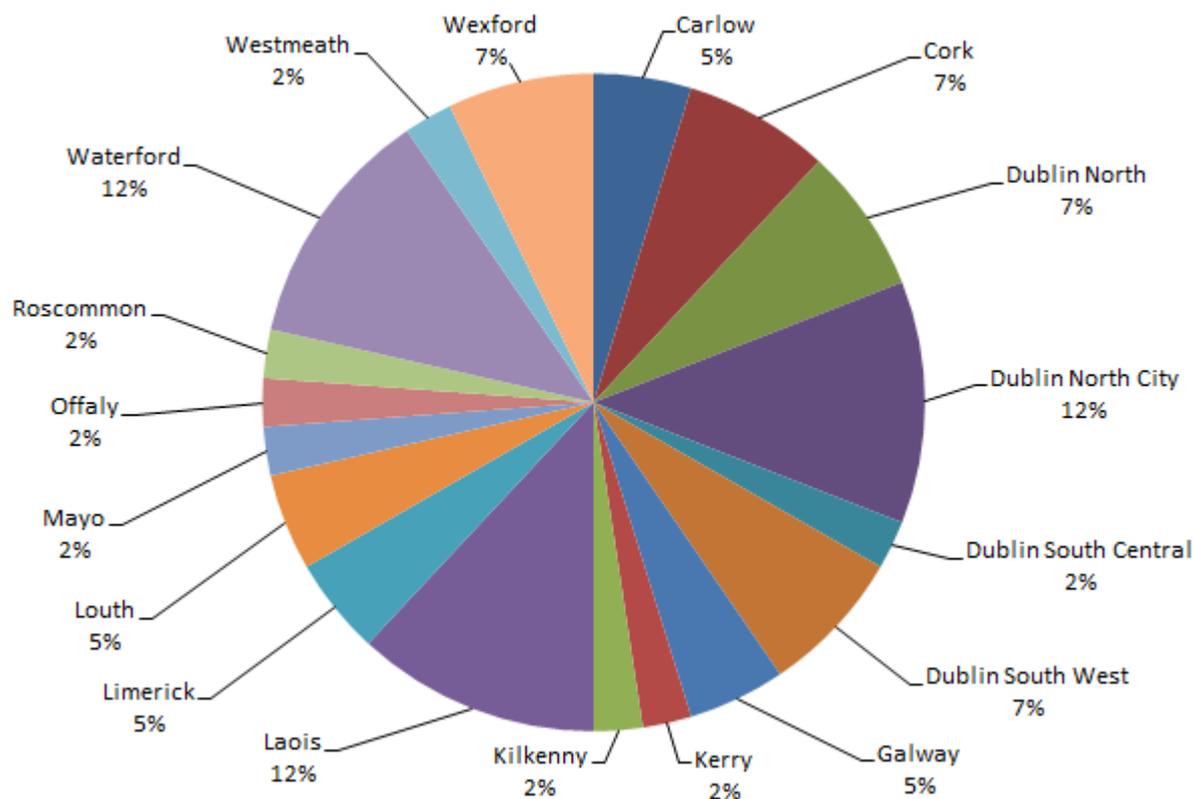
The formal Child & Family Agency response, as outlined in the Alternative Care Handbook, is that following the ending of the placement there should be a local disruption meeting held at local social work department level. These meetings are held in the hope that this will assist reflective practice regarding the contributing factors that lead to the breakdown in the foster care placement. Critical to this process is the expectation is that the disruption meeting provides a therapeutic forum for all affected parties. We have offered advice to many carers on this practice and in some instances, have had the carer return to us quoting that they have been informed by the social work team that such meetings do not take place in their area, or in other instances, that such meetings do take place- but without the presence of the foster carers involved. In other instances, carers had not been aware of having attended such a forum, only to find at a later stage that a meeting attended was considered a “disruption meeting”. This mirrors feedback received in 2015 and it would appear that little has changed in the management of such occurrences.

Given the variety of practice in the management of placement breakdowns and endings - with no readily available or standardised policy available for review which may assist all parties in following a set of defined procedures in managing such incidences, IFCA has repeatedly requested a copy of the policy quoted in The *Alternative Care Practice Handbook* (Tusla 2014). This publication provides a useful overview of the management of various situations that can arise. The reference page lists 13 policies and states they are available on the Tusla website. This document is titled *Placement Disruption/Breakdown in Foster Care: Policy, Procedure and Guidance Document (2014f)*. We have been informed that this policy is still currently only in “draft” and unavailable. This situation has remained unchanged since 2014 and IFCA will make this issue a priority in 2017.

Best practice dictates that the stabilisation and maintenance of foster care placements should be a priority, with the removal of a child from a placement as a last resort. IFCA has supported a number of foster carers during 2016 where a child has been removed from their care without preparation, notification or with any concise follow-up with regards to the reasons for such actions. Again this is an area of concern as such an experience may be damaging for both the child and foster carer leaving with the potential to leave both traumatised as a result.

A county by county overview of the cases that cite placement ending or breakdown as a primary concern is presented in fig 10:

Fig. 10: *Percentage of cases relating to Placement Breakdown/endings: 2016 (as primary issue)*



The areas with the highest percentages (Dublin North City, Waterford, and Laois) are also in tandem with the areas that cite the highest level of communication difficulties with social workers.

➤ **Private Placements:**

In mid-2016 IFCA began to specifically record those who are in a “private arrangement”. This was as a result of our volunteers noting an increase in those with such a situation in place contacting the helpline, as well as our increased awareness of the volume of complexity inherent in such cases. Such individuals account for 3% of all our callers in 2016. The overall total may be higher, given that such callers were only specifically titled from June onwards.

In addition to queries from those directly involved in such arrangements, we routinely take calls from Citizens’ Information Centres with third party queries relating to the subject. We have had a number of such cases in the last year and we now also specifically record caller types of this nature. It is very apparent in our dealings with the Citizens’ Information Centres that there is a very narrow knowledge base relating to this particular type of case.

However, at 2.1% of our overall case volume, it is obvious that this is a frequent issue and one that requires a significant amount of time and resources from IFCA to adequately support those involved. Invariably such individual will not be IFCA members. Although we cannot allocate a specific National Support Volunteer to non-members, our helpline team are often consulting with such callers on a frequent and prolonged basis.

It is worth noting that the volume of such cases exceeds that of those seeking support for the following issues:

- Foster Child Support – Medical
- Foster Child Support – Emotional

- Foster Child Support – Psychological
- Respite
- Special Needs Assistance
- Special Needs (Financial)

Many such individuals routinely express concerns over the financial strain of caring for the relative child. The Helpline volunteers seek to explain that in order for such individuals to become a “Foster Carer” for this relative, then the child themselves must be “in care”. Often, there is no necessity for this to be the case, or there is a reluctance on behalf of the relative for this to occur. Nevertheless, the absence of financial assistance (often including child benefit) is often listed as a primary concern for those in this situation. In addition, we frequently receive queries from relatives relating to their confusion regarding the “status” of the child in question. We have numerous cases of Tusla’s involvement with the child’s family, and with situations becoming critical, they approach the extended family to identify a relative to care for that child. Often, once the child has settled in their relative’s home, Tusla are stating that the child is not in the care of the state and the arrangement is in fact a private one and is not a fostering situation, However, many in this situation cite the continued presence and involvement of social workers in the lives of the children for whom they care.

IFCA and representatives from Tusla have discussed this issue through analysis of the outcome of the joint Foster Carer/Social Worker consultation project in 2016. In addition, the topic has been reviewed in meetings with many principal social workers and area managers at regional meetings throughout the year. This is an area which requires attention and clarification, in particular for relatives who are caring for a child of extended family member who have not been assessed as a relative carer.

IFCA will continue to monitor and support such cases in particular in order to provide a comprehensive overview of the volume of individuals experiencing such problems and the considerable degree of time spent supporting them through the service, in respect of resource allocation.

As in 2015, to assist with such queries we have also requested a copy of the following policies) all cited in The Alternative Care Practice Handbook:

- **(2013b) Relative Carer Assessment Policy**
- **(2014c) National Matching Guidelines for Children in Foster Care**
- **(2014h) National Policy, Procedure and Guidance Document on conducting a Relative Carer/S36 Assessment, Part 1 & 2**

We also requested an update on the progress of the following policy cited as “in press”:

Guidance to Child and Family Practitioners regarding private foster care arrangements (Children Act 2001, section IVB23R) in relation to care of children.

To date no policies have been forthcoming although assurances have been received that a Relative Care policy is currently being drafted.

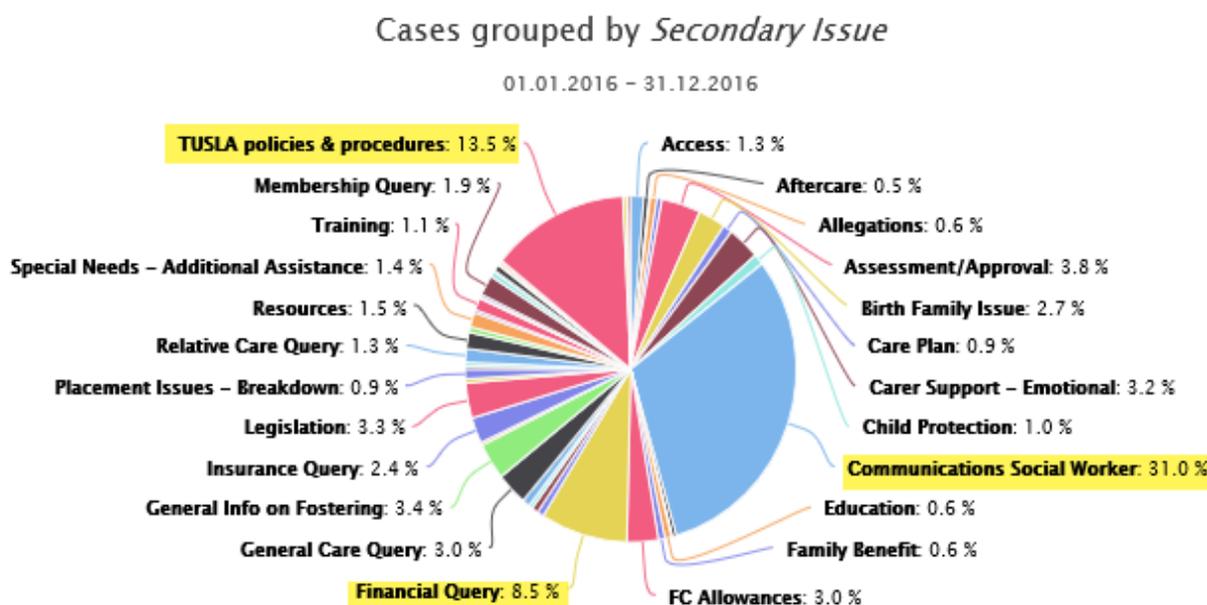
Secondary Issues

The inclusion of the secondary presenting issue gives a much more comprehensive overview of the difficulties experienced by our contacts in dealing with their primary area of concern (Figure. 11)

In September 2016, on request from a number of Tusla managers, we have included further sub-divisions to be applied to “Communications with Social Worker”. This is elaborated on in the next section. Also, the introduction of new case categories to our recording system allows for any issue to be selected as either “primary or “secondary”.

There were a wide range of secondary options cited – but as in every prior year, the majority issue was stated as “Communications with Social Worker”.

Fig. 11: Secondary Issues (Nationally) 2016.



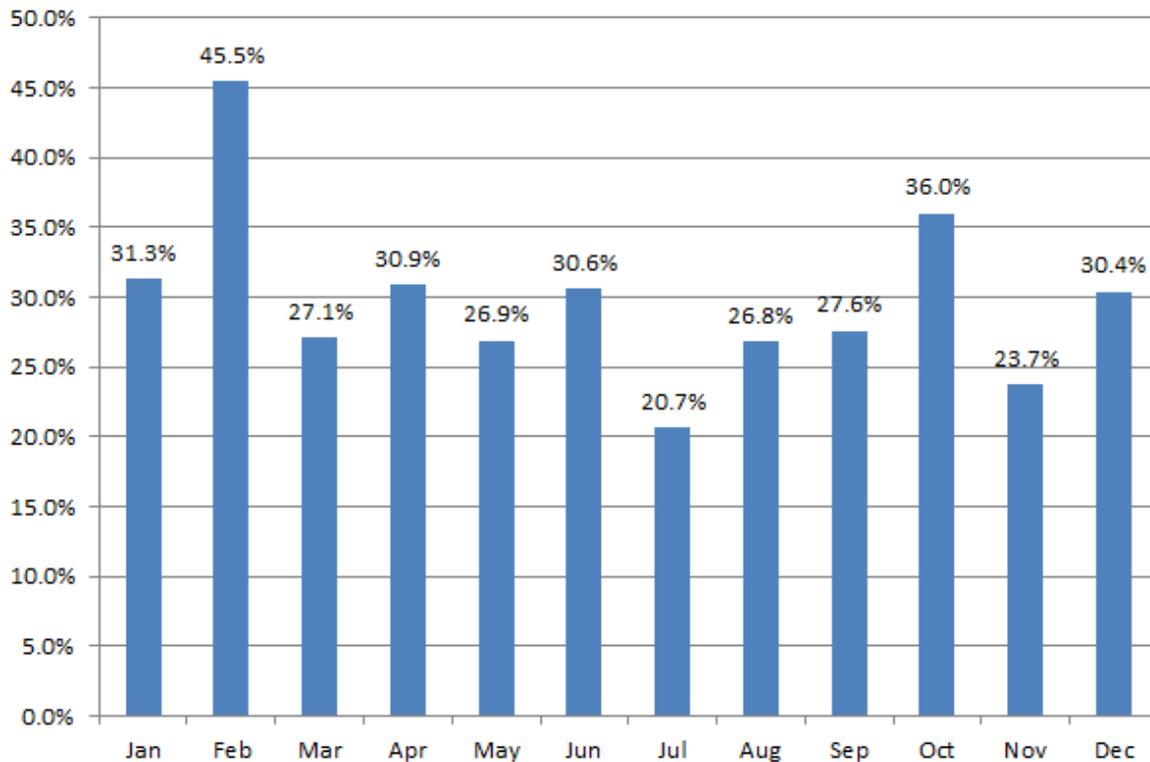
Communications with Social Worker:

This particular issue is frequently cited as a secondary or compounding issue in conjunction with other concerns such as allegations, placement breakdowns, access etc. In reviewing the cases and through supervision, team discussions and training, we are discovering common difficulties inherent in relations between carers and social workers. These issues are also frequently articulated at support group meetings and in training events, seminars, AGM, conferences etc. In addition, the issues presented through our support service have been replicated in the final evaluation of the joint IFCA/Tusla consultations during 2016.

It is important to note that when a foster carer contacts IFCA’s support helpline, it is because they are experiencing a difficulty within some aspect of providing foster care in most cases. Many foster carers cite that they have very good working relationships with their link worker / children’s social worker, and where this is the case, the relationships are positive for all involved. It is evident that where communication with a social worker is a problem, this is not conducive to positive working relationships.

31% of all cases involve this difficulty as a secondary issue. The relative percentage of our cases on a month to month basis is shown below.

Fig. 12: Monthly percentage of cases relating to Communications difficulties with Social Workers 2015(as secondary issue)

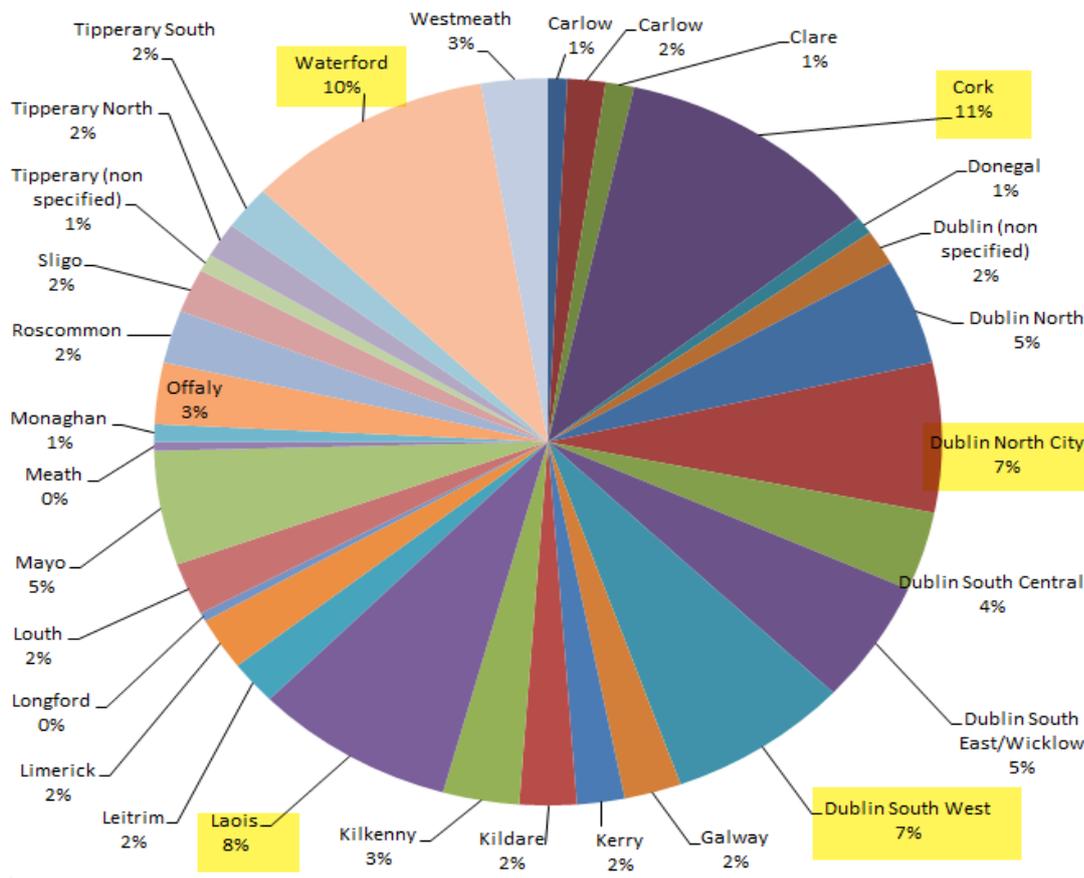


It is worth noting that these figures take into account all cases recorded. However, many cases relate to those who are enquiring about becoming carers and will not therefore have any existing relationship with a social worker. Also, a number of our cases are from social workers themselves and hence, their case totals could also be excluded. In taking these cases out of the overall relevant case total, the relative percentage of cases that cite communication difficulties with social workers elevates to **37%** of all such cases. This is consistent with the statistics from the joint IFCA/Tusla consultations.

Throughout the course of 2016, those who reported such communication difficulties were from every location around the country. The relative percentages (by county) are shown in fig. 13. This has been recorded as most prevalent in the following areas:

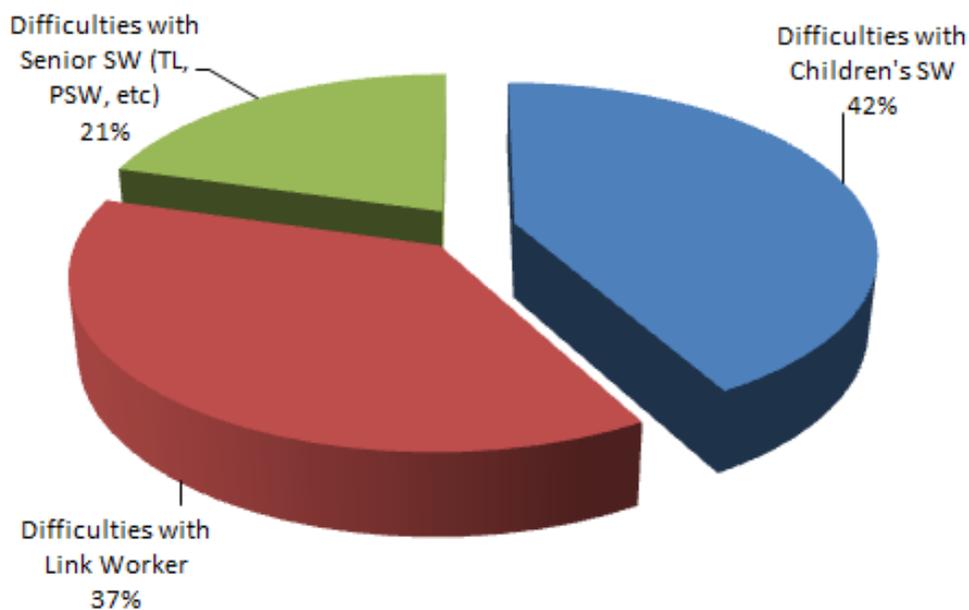
- Cork: 11% of all such cases
- Waterford: 10% “ “ “
- Laois: 8% “ “ “
- Dublin North City: 7% “ “ “
- Dublin South West: 7% “ “ “

Fig: 13: Cases by county citing communication difficulties with social workers.



Many Tusla area managers and Principal Social Workers have requested a breakdown of whom exactly these difficulties are occurring with. This is reflected below.

Fig: 14: Specific Roles of Social Workers with whom difficulties are experienced (as primary/secondary issue) Sep –Dec, 2016.

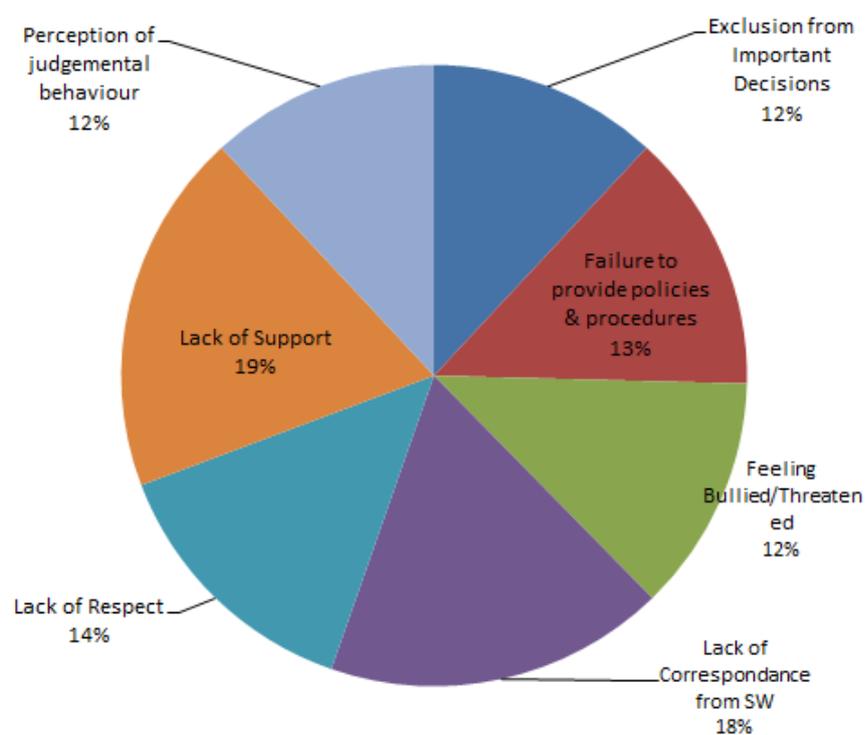


There is only a small gap between those who present with difficulties with the child's social worker and a link worker. One of the most frequent difficulties reported regarding Link workers is that often carers feel that they are not being supported or being heard by them. Whilst IFCA understands the importance of all carers having an allocated social worker and also recognises the efforts of Tusla to make impressive improvements to the volume of such

appointments, it must be noted that by having a link worker in place does not not necessarily equate to the quality of the support, quality of relationship or frequency of interaction. The ultimate goal of successful foster care placements is that all those involved support and respect each other whilst at times, managing difference. For foster carers and link workers to have meaningful and productive relationships that strengthen the chances of stabilising and securing placement integrity and is mindful of the wellbeing of the child in care – communications must be of the highest quality also.

The sub-categories of communication difficulties are presented in fig. 14 – detailing the specific issues articulated in such cases from Sep. 1, to Dec. 31, 2016. It is hoped, that in line with requests from Tusla, that this more concise mode of reporting on this broad issue will enable tailor-made reports to be created for specific areas with a view to ensuring that solutions are found to ultimately improve the quality of foster care and all associated relationships in any respective area.

Fig: 15: Specific Communication Difficulties (as primary/secondary issue) Sep –Dec, 2016.



➤ **Failure to Provide Policies and Procedures**

This is a frequent report and details of the difficulties IFCA’s support service faces in this regard are contained in the section entitled “*Challenges to Provision of Support*”.

➤ **Lack of Correspondance from Social Workers**

Many carers detail ongoing difficulties relating to the inconsistency and unreliability of communication routes. For example, many state that they need to phone/email several times in order to get a response. In some instances, individuals have reported that despite regular ongoing attempts to make contact with the relevant professional, some have been left without a response for many months. Another regular area of concern is related to the formalisation of recommendations or information given at meetings or through conversations in writing. This is of great importance where matters into allegations are concerned, which can be the source of a great deal of distress for those involved. IFCA continues to

recommend to all involved in fostering about the need to maintain appropriate records and to ensure that all important developments relating to their roles and the welfare of the children in their care are documented. These issues have continued to be present for a considerable period of time and are reflected in both the 2014 and 2015 annual review.

As part of our ongoing approach to the management and resolution of issues within fostering, we continually advise all those involved to ensure their concerns/issues/progress etc. is captured in writing. This may often take the form of a written letter but we are also aware that many individuals prefer to correspond by e-mail. It is observed that there are varying approaches to the use of email as a communication medium around the various Tusla areas. IFCA maintains that the modes of appropriate communication between carers and the social workers with whom they are dealing is an important and integral part of the relationship that holds the child at the centre. However, we have been unable to find any current policy that relates directly to this area. IFCA would welcome confirmation from Tusla regarding the use of e mail as an accepted medium of communication between foster carers and social workers.

➤ **Tusla Policies and Procedures**

This was the secondary issue in 13.5% of all cases. This particular issue has been discussed as one of the obstacles to IFCA's support service at an earlier section of this report. In summary, many individuals in seeking clarity and advice on particular issues seek the appropriate Tusla policy, procedural information or guidance documents to support their understanding of their difficulties, and the way in which this can be managed. Such documentation is often not available and in many instances, carers are articulating that despite requesting it through the appropriate professional with whom they are dealing with, it is not available or they are being advised that no such resource currently exists.

Allocated Social Workers

The National Standards for Foster Care (Department of Health and Children, 2003) and the National Standards for Children's Residential Centres (Department of Health and Children, 2001a) require that all children in care have an allocated social worker. Standard 5 of the National Standards for Foster Care (2003) requires that there is a designated social worker for each child and young person in foster care.

In September 2016, we began to track if the children at the centre of each case have an allocated social worker and if the foster carer has an allocated link worker. This information is only captured for the last quarter of the year – the percentages (of relevant cases) is listed in fig 16.1 & 16.2. This reflects assertions from Tusla regarding substantial efforts to ensure that standards and legislation regarding such allocations are met.

Fig: 16.1: Carers with allocated Link Worker (Sep –Dec, 2016).

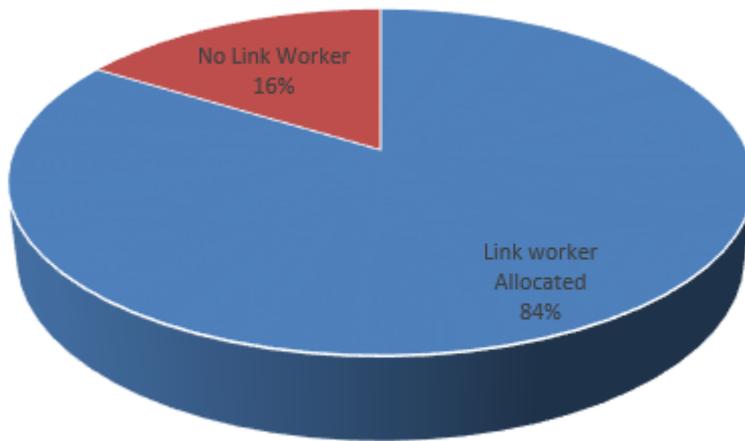
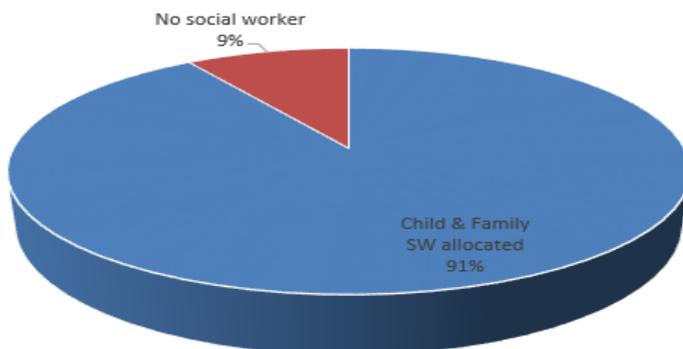


Fig: 16.2: Cases where Child & Family SW is allocated (Sep –Dec, 2016).

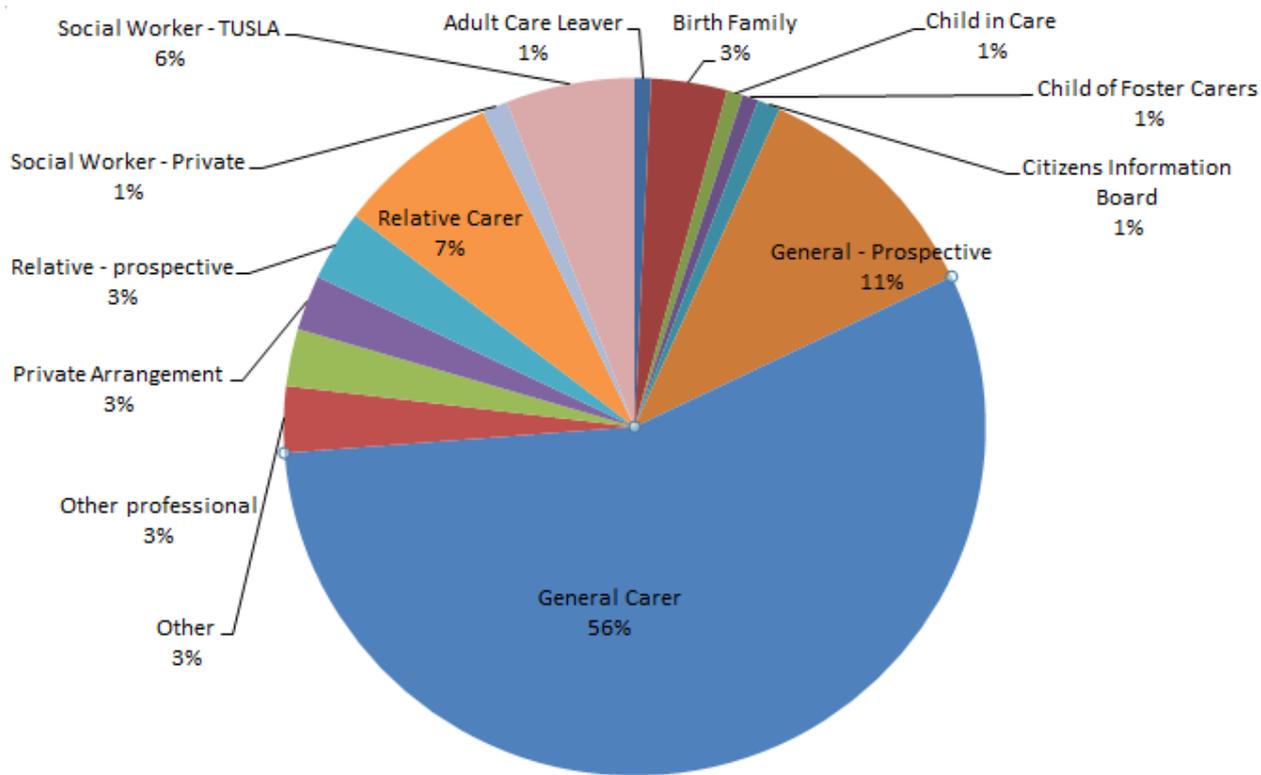


Cases by individual types

Whenever possible, our helpline volunteers determine the “category” of any caller to the service and record as such. In 2016, we introduced a number of new categories throughout the year in order to accurately reflect the origins of certain issues and to better enable IFCA to locate concerns and issues at their source. The different categories are shown in fig. 16.

As in 2015, the majority of our cases related to general carers. The overall volume of cases for relative carers remains comparatively low but 3% of all our cases relate to those involved in a “private arrangement”. In the majority of these cases it is a relative of the child in question that we are dealing with. This volume is considerably high, given that we have only tracked it since midway throughout the year – and is on a level with the volume of queries from birth family members yet higher than that of children of foster carers, adult care leavers and social workers in the private agencies.

Fig: 17: Cases by individual type



We have continued to see an increase from social workers themselves, seeking advice and guidance on a wide range of issues. As IFCA’s support service supports and advises all those with an interest and connection with foster care, this extension of service to the professionals involved is viewed as an important and valuable aspect of the helpline in particular. The most prevalent primary issues with which social workers have sought advice are as follow:

- Carer Support – Emotional: 10% of all related cases
- Allegations: 9% “ “ “
- Access: 9% “ “ “
- Assessment/Approval: 9% “ “ “

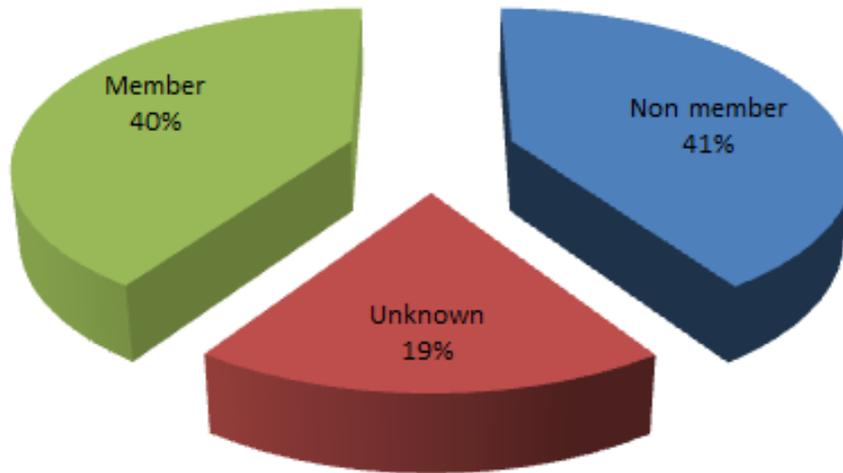
The range of secondary issues is also diverse, with requests for **Tusla Policies and procedures** being cited by 30% of all cases from social workers – mirroring the secondary issues of foster carers themselves.

We receive requests for advice, support and information from social workers throughout the country, with some areas having a high utilisation of the service. While IFCA considers such use of the service to be both welcome and warranted.

Membership status

This category allows us to view the percentages of contacts made by members/non-members. There are a few relevant points to consider. In many instances with email queries, we do not manage to ascertain if the individual is a member or not. In addition, a large volume of our contacts are from prospective Foster Carers looking for initial information – and as such, will invariably be non-members initially.

Fig: 17: Cases by membership status



IFCA is a membership organisation, we also offer advice, information and support to anyone who contacts our service. Additional benefits are available to members, such as the appropriate allocation of a national support volunteer if necessary.

Review of support cases nationally

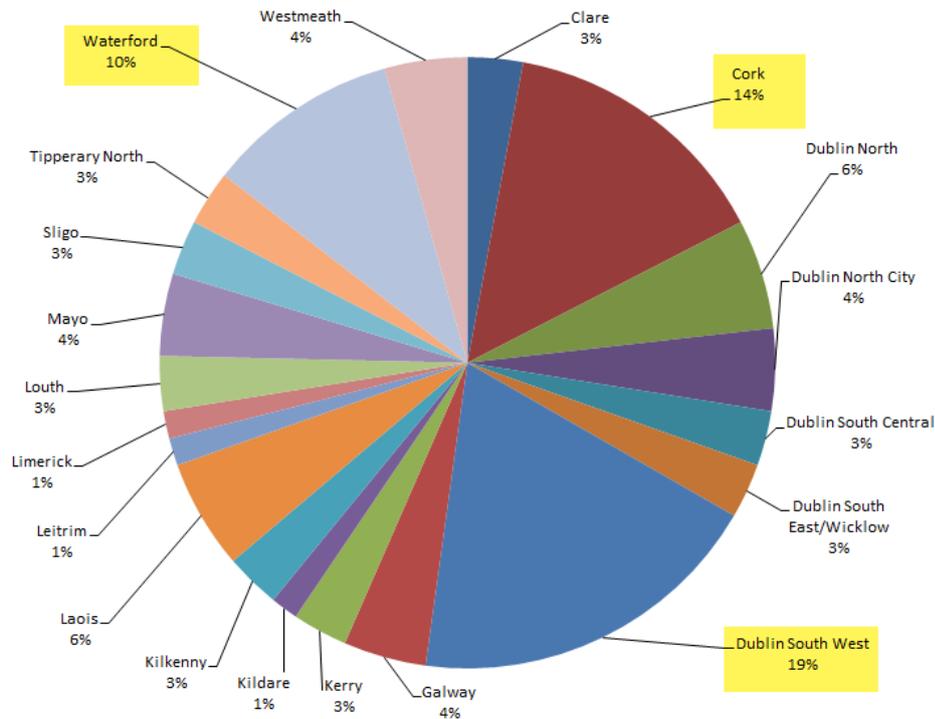
In the event that any of our members require assistance of a more prolonged or robust nature, the *Head of Support* reviews the case in question and may assign a regional volunteer Support Worker to assist the individual in question. This may involve frequent scheduled phone contact and in appropriate circumstances, meeting in person with that individual.

There were a total of 68 cases referred out to support workers in 2016. This is considerably higher than for 2015, given the lower number of overall cases (+39%). Many of such cases are exceptionally complex and we have needed to recruit additional support volunteers to facilitate such an increase, as well as providing ongoing training for existing volunteers especially in the area of allegations.

The following areas account for the highest volume of referrals for ongoing support work:

- Dublin South West: 19%
- Cork: 14%
- Waterford: 10%

Fig: 18: Allocation of National Support Volunteers by area



Such referred cases tend to be of a similar nature. In 2016, 22% of these cases were relating to Allegations and Child Protection and 21% concern Placement Ending/Breakdown. (See below)

Fig: 19: Primary Issue for Referred Cases

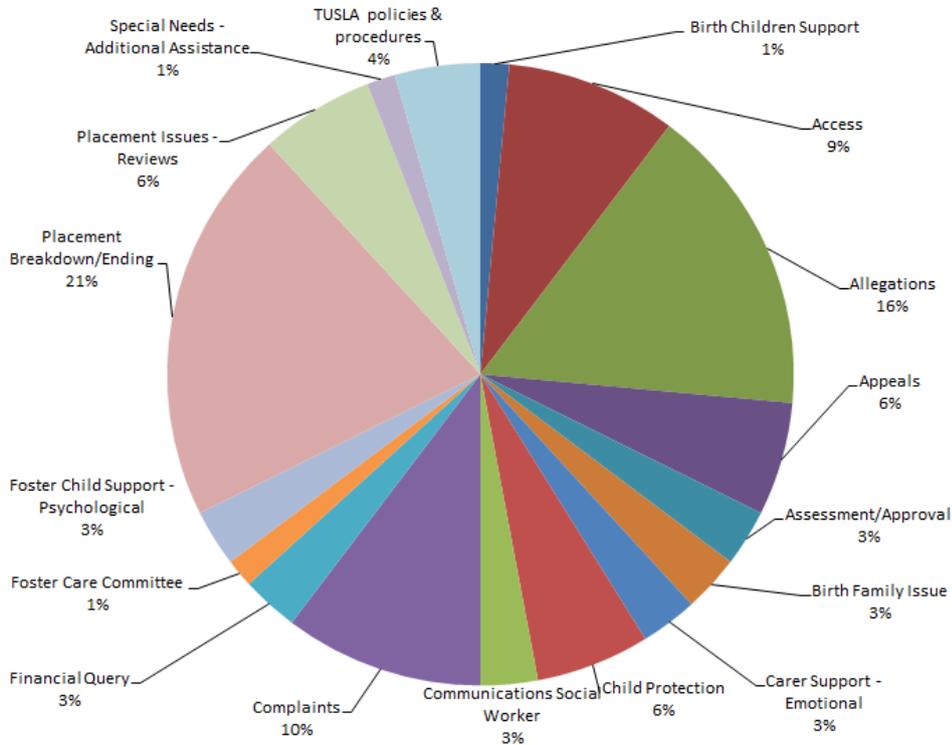
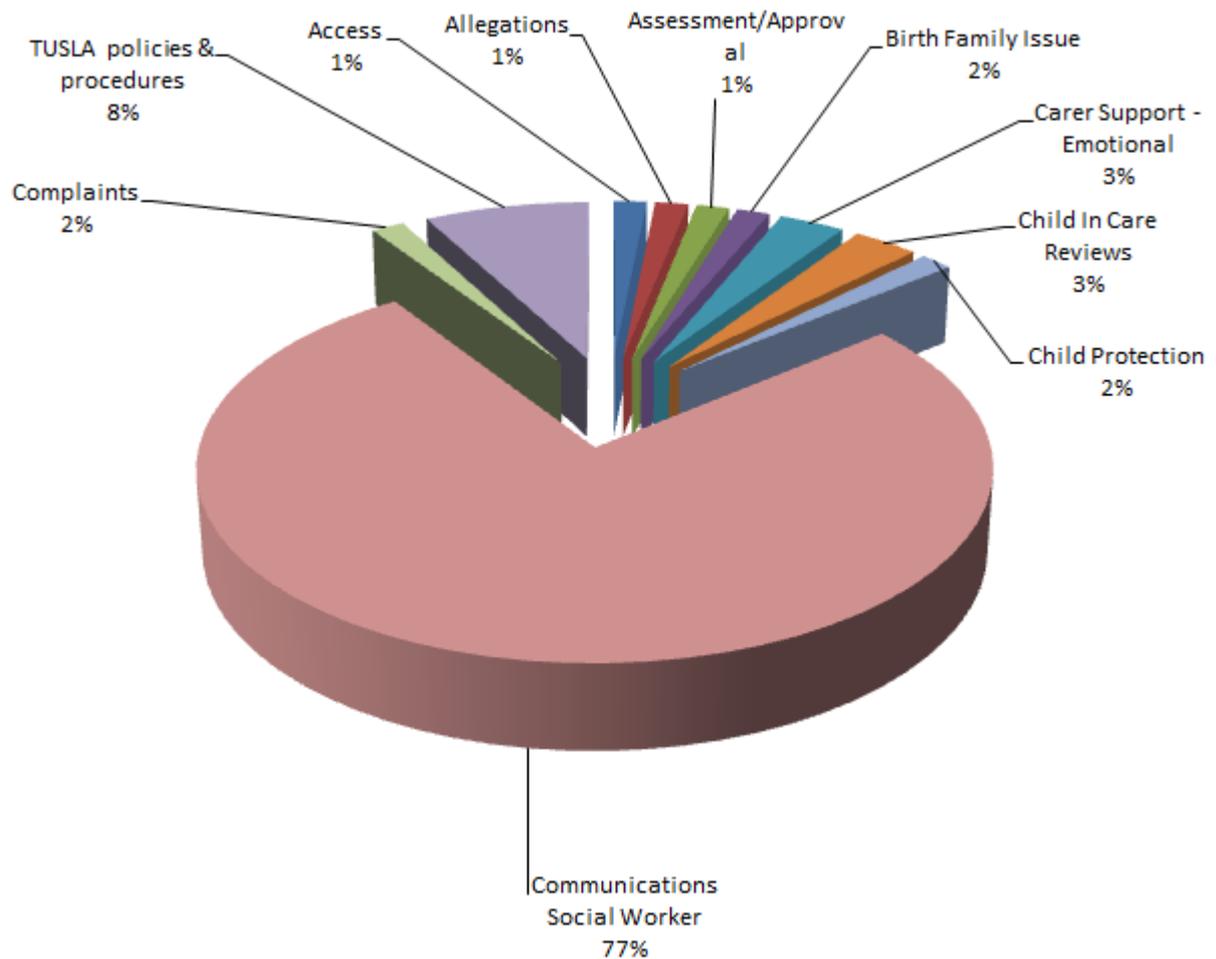


Fig: 20: Secondary Issue for Referred Cases

77% of all allocated cases concern those who articulated communications difficulties with social workers.



The Irish Foster Care Association is grateful for the support of the Support Service by the Department of Housing, Planning, Community and Local Government under its Scheme to Support National Organisations.



An Roinn Tithíochta, Pleanála,
Pobail agus Rialtais Áitiúil
Department of Housing, Planning,
Community and Local Government

