

TÚSLA

An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

**Annual Report
& Financial
Statements 2019**

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Part II

Annual Financial Statements for the Year Ending 31st December 2019

Glossary

Acronym	Definition
ABC	Area-Based Childhood
ACIMS	Alternative Care Inspection and Monitoring Service
ACTS	Assessment Consultation Therapy Service
AGS	An Garda Síochána
ARC	Audit and Risk Committee
C&AG	Comptroller and Auditor General
CAS	Capital Assistance Scheme
CASP	Child Abuse Substantiation Procedures
CCA	Creative Community Alternatives
CEO	Chief Executive Officer
CFSN	Child and Family Support Network
CPC	Child Protection Conferences
CPD	Continuing Professional Development
CPNS	Child Protection Notification System
CPRIs	Claims Previously Reported and Incidents
CPW(S)	Child Protection and Welfare (Strategy)
CRC	Children's Residential Centre
CRS	Children's Residential Services
CSR	Children's Services Regulation
CYPP	Children and Young People's Plan
CYPSC	Children and Young People's Services Committees
DCYA	Department of Children and Youth Affairs
DEIS	Delivery Equality of Opportunity in Schools
DML	Dublin Mid-Leinster
DNC	Dublin North City
DNE	Dublin North East
DP(C)	Data Protection (Commission)
DPER	Department of Public Expenditure and Reform

DPO	Data Protection Officer
DPSU	Divisional Protective Service Unit
DSGBV	Domestic, Sexual and Gender Based Violence
EAG	Expert Assurance Group
EPIC	Empowering People In Care
E-Sign	Electronic Signing
ESRI	Economic and Social Research Institute
EU	European Union
EWS	Educational Welfare Services
FOI	Freedom of Information
FRC	Family Resource Centre
GAL	Guardian Ad Litem
GDPR	General Data Protection Regulation
HIQA	Health Information Quality Authority
HR	Human Resources
H&S	Health and Safety
HSCL	Home School Community Liaison
IADT	Institute of Art, Design and Technology
ICT	Information and Communications Technology
IFMS	Integrated Financial Management System
INIS	Irish Naturalisation and Immigration Service
IRPP	Irish Refugee Protection Programme
ISS	International Social Services
KPI	Key Performance Indicator
MACES	Multiple Adverse Childhood Experiences Service
MOU	Memorandum of Understanding
NCCIS	National Childcare Information System
NIMS	National Incident Management System
NPCF	National Parenting Commissioning Framework
NPOC	National Policy Oversight Committee
NUIG	National University of Ireland Galway

OGP	Office of Government Procurement
PPGs	Policies, Procedures and Guidelines
REC	Research Ethics Committee
RED	Review, Evaluate, Direct Process
RFQs	Request for Quotations
RSA	Road Safety Authority
SCA	State Claims Agency
SCP	School Completion Programme
SCS	Separated Children Services
SCSA	Separated Children Seeking Asylum
SEN(s)	Significant Event Notification(s)
SIC	Statement on Internal Control
SLMF	Senior Liaison Management Forum
SPU	Strategy and Business Planning Unit
SQC	Service and Quality Committee
TAG	Tusla Advisory Group
TESS	Tusla Education Support Service
WLD	Workforce Learning and Development
WRC	Workplace Relations Commission

Chairperson's Foreword



I am pleased to present the Annual Report and Financial Statements for Tusla – Child and Family Agency for 2019.

This Annual Report shows that 2019 was a year of consolidation for the Agency, demonstrating significant and constructive progress in delivering the mandate which has been given to us by government. That mandate is far wider than is generally appreciated, is often complex and will always be challenging. It is gratifying, therefore, to be able to report progress evident across the Agency and I have been consistently encouraged by the professionalism and level of commitment by staff in the course of their work.

Responsibility for improving well-being and outcomes for children will always be onerous. Attaining perfection in the delivery of our mission statement is a standard that will never be easily realised but must remain a goal towards which we strive. The challenges of providing a service that is consistent and appropriate for vulnerable children and families in communities across the country will always be demanding.

Therefore, the Agency must be prepared to admit its mistakes, continue to improve and innovate and to evolve a culture not hidebound by the past.

The Board of Tusla undertook a number of changes in 2019 designed to enhance the governance of a State body with a workforce of four and a half thousand. Three new committees were established:

- Service and Quality Committee (SQC)
- Audit and Risk Committee (ARC)
- Organisation and Development Committee (ODC)

This reconfiguration is aimed at facilitating the important work of the committees and at enabling the Board to devote more time to strategic decision-making and oversight of the Agency.

The recruitment and retention of social workers continued to be an area of concern for the Agency in 2019. The expectation that the Social Worker Education Group (SWEG) might have advanced some innovative recommendations has not yet been realised. Tusla itself sought to develop new initiatives to attract social work graduates in 2019 and is investing in strategies to improve staff retention. The challenging nature of the work involved in child protection and welfare means that this issue will only be effectively addressed with government assistance.

The leadership of any major organisation is the most important factor in determining its culture and character. Recruitment of a Chief Executive is arguably the most important decision to be made by a Board. In September we welcomed new Chief Executive Officer, Bernard Gloster. By professional background and temperament, the Board is satisfied that the new CEO is well suited to the challenge of leading the Agency's next phase of development and he has our support and full confidence.

Once again I would like to thank Pat Smyth for his contribution as Interim Chief Executive and to acknowledge the achievements made during his tenure of that office.

I also wish to thank the Minister for Children and Youth Affairs, Dr Katherine Zappone, and the Secretary-General of the Department of Children and Youth Affairs and his staff for their support throughout 2019.

Finally, I want to take this opportunity to acknowledge the sad news of the passing of Norah Gibbons, who was the first Chairperson of Tusla. Norah was a passionate advocate for children's rights and a person of fervent convictions who made a lasting contribution to Irish life. She will be greatly missed.

I wish to thank my Board colleagues, the Executive, our Board Secretary and staff at over 300 locations in communities throughout the country for their commitment and dedication, and look forward to continuous progress in 2020.



Pat Rabbitte
Chairperson

Message from the CEO



It was a great privilege for me to be appointed CEO of the Child and Family Agency, taking up the position in September 2019. I want to thank the Board and the staff of Tusla for the very warm welcome I received.

I want to acknowledge the enormous contribution of Pat Smyth, who was interim CEO prior to my appointment and provided the leadership of the organisation for most of the year captured in this Annual Report.

The report reflects the activity of the Agency in an environment which is increasingly busy, complex and challenged on many fronts. Despite that context there is clear evidence of much good work and it is important to recognise the contribution of our teams who are present in every community in Ireland.

By way of responding as an organisation to our complex environment, I set out on my arrival in the Agency three key priorities for me. These are quality, staff and public confidence. Linked to these are three pillars of reform which are practice, culture and structure. I am using the year that was in this report as a basis to inform current and future actions to drive these reforms.

The greatest value of this report is not confined to its role as an instrument of public accountability. The real value is in the detailed information which gives an understanding of the breadth and scope of responsibilities which the Agency discharges in thousands of interactions every day. It is our hope that the reader will take time to be informed about our work in this sensitive and vital area of public service provision for many children and their families.

A handwritten signature in black ink, appearing to read 'Bernard Gloster', with a long horizontal flourish extending to the right.

Bernard Gloster
CEO

Our Mission, Vision, Values and Behaviours

Our Vision

An Ireland that is committed to the safety and wellbeing of children, young people and families.

Our Mission

Working together to provide good quality, supportive services to achieve better outcomes for children, young people, families and communities.

Our Values



TRUST

Empower children, young people, families and communities to participate in decisions that affect their lives and build resilience.

Reliable and committed.

Open, transparent, and clear about the "how" and "why" of our decisions.



RESPECT

Considerate towards all children, young people, family members and colleagues.

Recognise that all families have competencies and strengths.

Speak directly to service users.

Active listening and ensuring we take account of different perspectives.



EMPATHY

Understanding of service users' needs and wants.

Responsive to colleagues and service users.

Act with kindness.

Gather as much information as possible to inform decision-making.

Use plain and straightforward language.



WORKING TOGETHER

Commitment to communicating consistently and continuously with internal and external stakeholders.

Co-created innovative and creative solutions that seek to keep children safe.

Proactive engagement, collaboration, learning and alignment with all relevant stakeholders.

Shared understanding of desired service user outcomes.

Strive for continuous improvement and excellence.



INTEGRITY

Honest, ethical, and fair.

Risk-sensible approach to practice.

Professional at all times.

Consistent service and supports.

Accountable and transparent practices.

Behaviours

1. Service Overview

1.1. Service Delivery

Tusla – Child and Family Agency was established on 1st January 2014 under the Child and Family Agency Act 2013 and is responsible for improving well-being and outcomes for children.

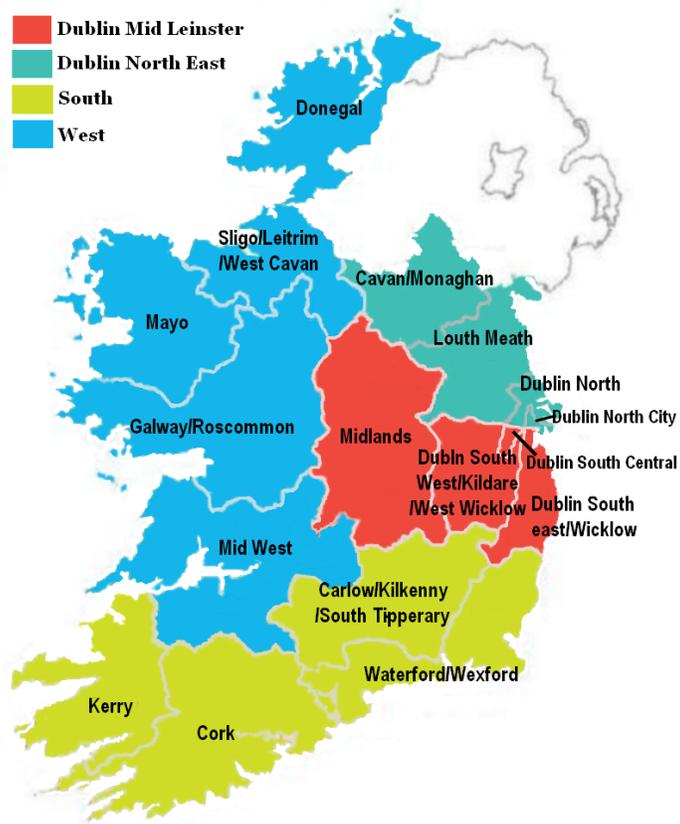
Tusla is governed by a Board, which is responsible for establishing the Agency’s overall strategic direction and ensuring the implementation of the appropriate financial controls, operational and compliance controls, and risk management procedures. The Chair of the Board reports to the Minister for Children and Youth Affairs on the measures taken to achieve the Agency’s priorities and performance targets. The CEO is responsible to the Board for the performance of the Agency’s functions.

Tusla has responsibility for a range of services including:

- **Child Protection and Welfare**
- **Alternative Care & Adoption**
- **Family Support**
- **Early Years Inspectorate**
- **Tusla Education Support Service (TESS)**
- **Domestic, Sexual and Gender Based Violence**

Agency services are delivered through a complex network of four geographical areas: Dublin Mid-Leinster, Dublin North East, South and West which in turn are subdivided into 17 areas with some services being provided at a national level.

Area Management Structures

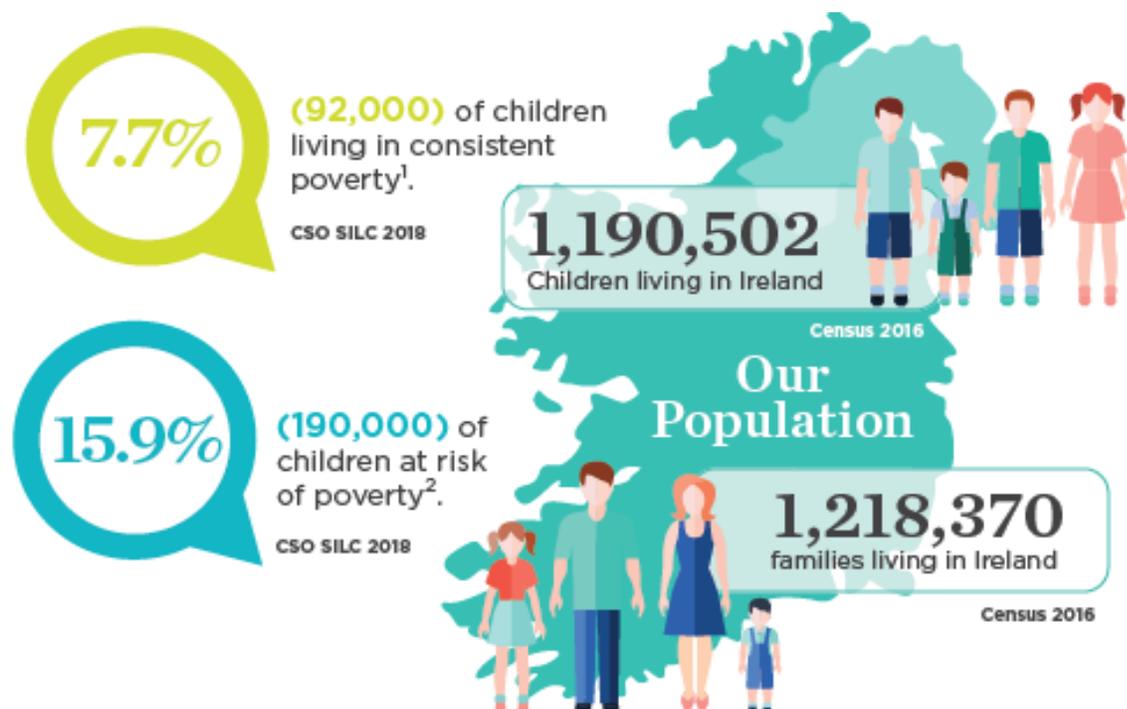


1.2. Supporting Service Delivery

Delivering safe, quality health services relies not only on frontline services but also on those key enablers that ensure the services our population depend on can function effectively. These support services include Human Resources, Finance, Legal, ICT, Commissioning, Corporate Services (Health & Safety, Data Protection, Workforce Learning and Development), Communications, Strategy and Business Planning, Programme Management and Policy and Research.



1.3. 2019 – Our Year in Numbers



¹ An individual is defined as being in 'consistent poverty' if they are at risk of poverty according to the definition below and are living in a household deprived of two or more of the 11 basic deprivation indicators.

² Anyone with an equivalised income of less than 60% of the national median is considered to be at risk of poverty.

Family Support Services

24,828 children received a family support service in 2019
115 Child and Family Support Networks in place at the end of 2019
2,330 Meitheal processes requested in 2019; 34% (596) more than 2018

Children's Services Regulation

4,310 early years services registered with the Early Years Inspectorate at the end of 2019
2,308 inspections of early years services in 2019
1,495 children on the register for home education at the end of 2019
128 inspections carried out on non-statutory residential centres in 2019

Child Protection and Welfare

56,561 referrals to child protection and welfare services in 2019; 3% (1,425) more than 2018 (55,136)
24,827 cases open to social work at the end of 2019

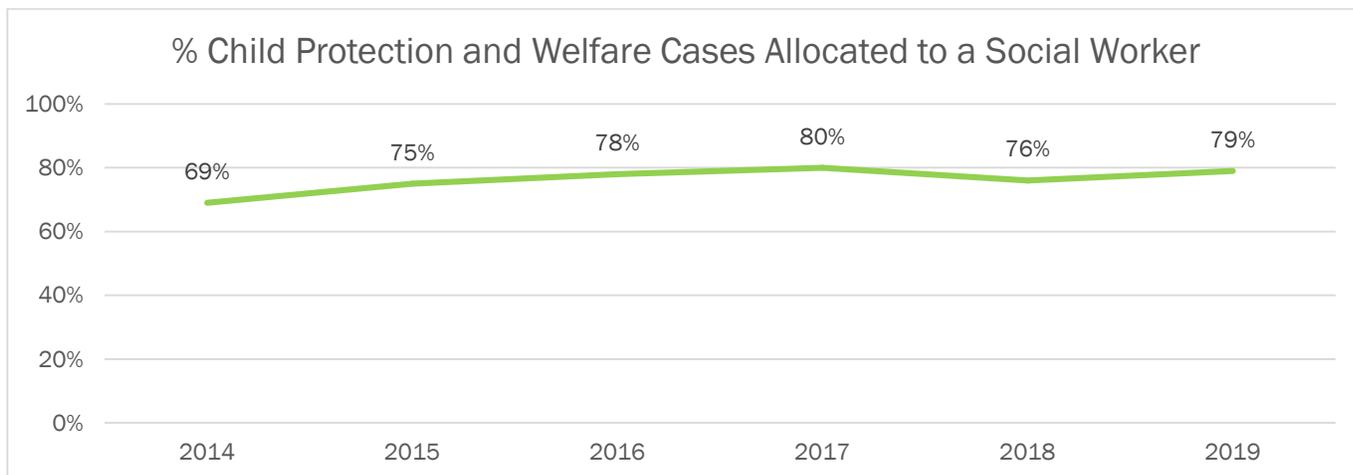
Alternative Care Service

5,985 children in the care of the Agency at the end of 2019
91% of children in care were in foster care
2,774 young persons/adults in receipt of aftercare services at the end of 2019

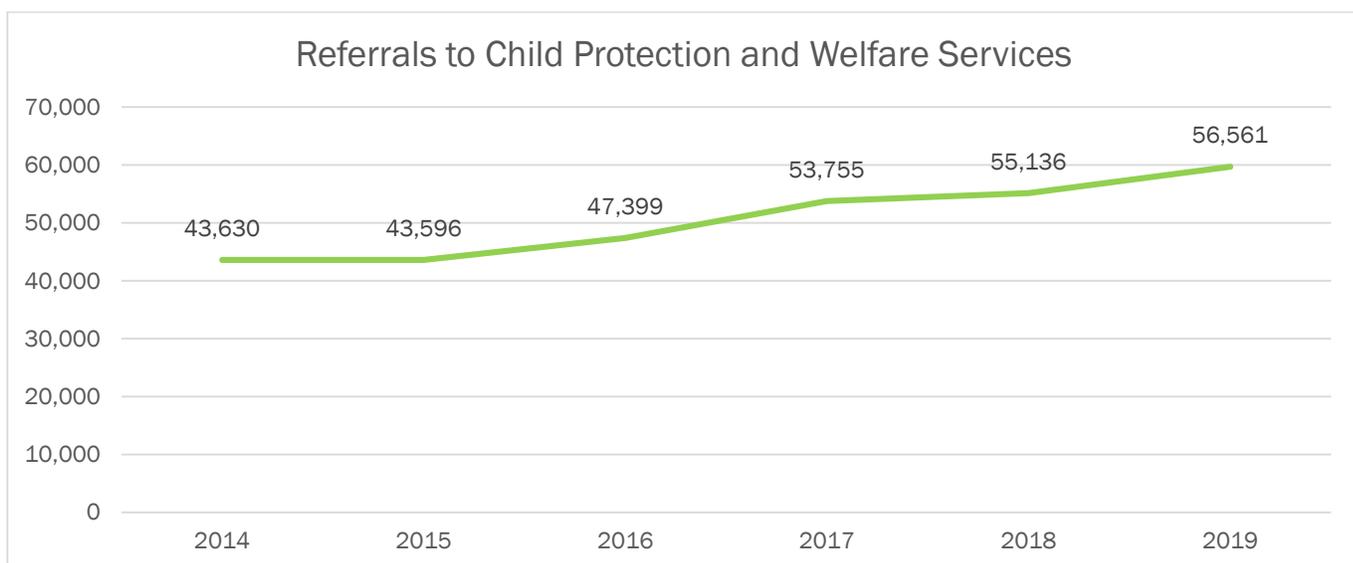
Tusla Education Support Service

Tusla Education Support Services worked with **6,291** children in the 2018/19 academic year

Key Trends 2014–2019

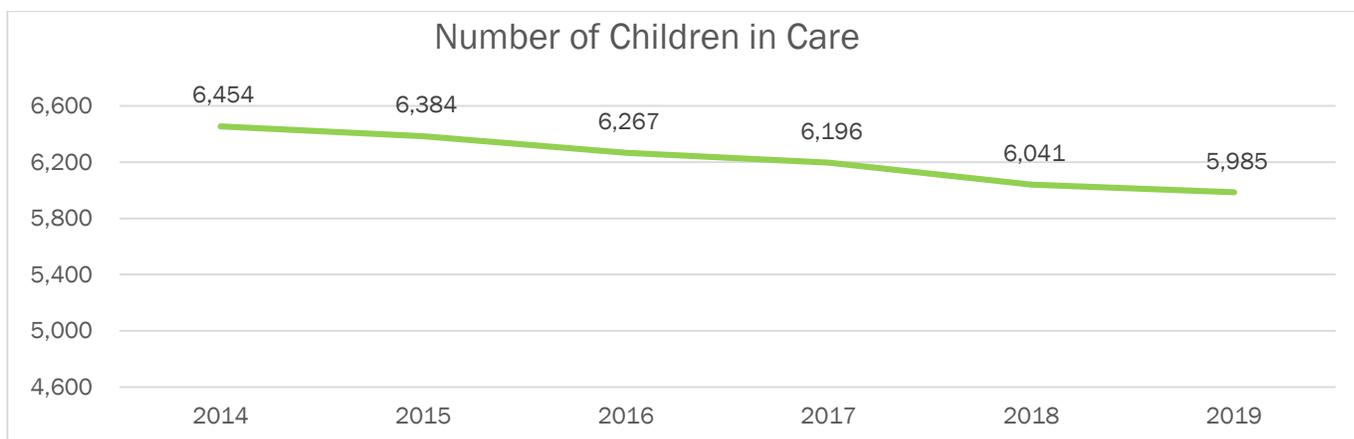


In 2019, 24,827 cases were open to social work nationally by the end of Q4. Of these open cases, 79% (19,536) were allocated to a named social worker. By the end of 2019, 5,291 (21%) cases were awaiting allocation, which was down 18% (1,141) from December 2018, when a high of 6,432 was reported. At least 32% (1,668) of cases awaiting allocation were ‘active’ on a duty system.¹

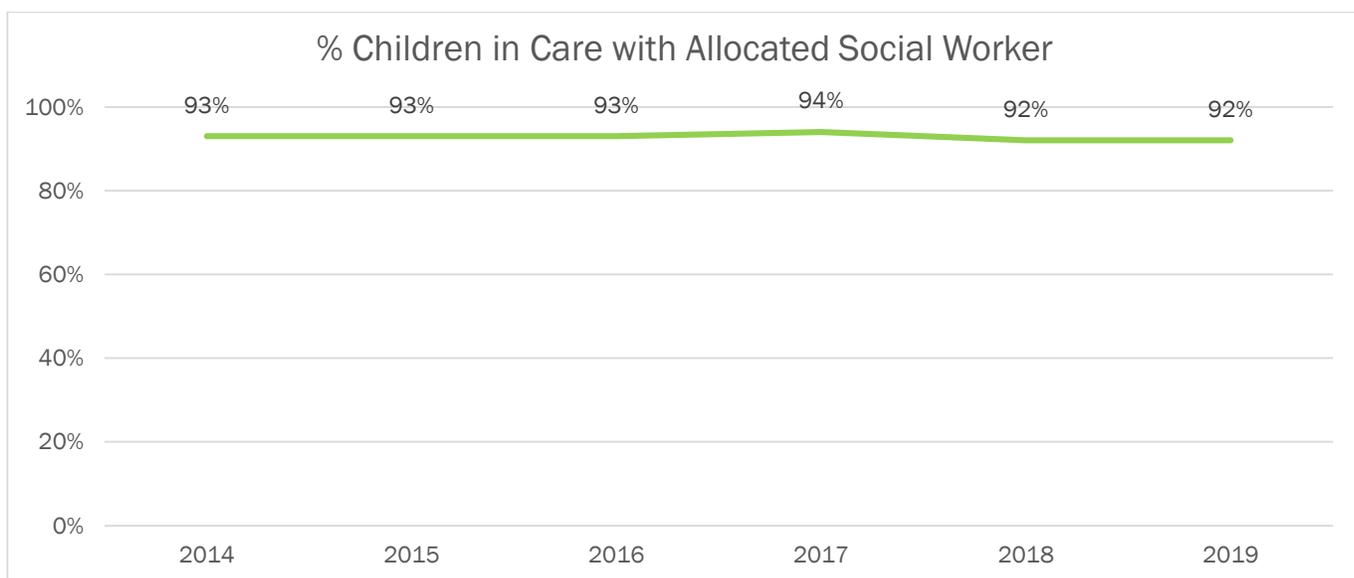


The number of referrals increased from 55,136 in 2018 to 56,561 (3% increase) with reasons for referrals including welfare concerns and concerns of abuse.

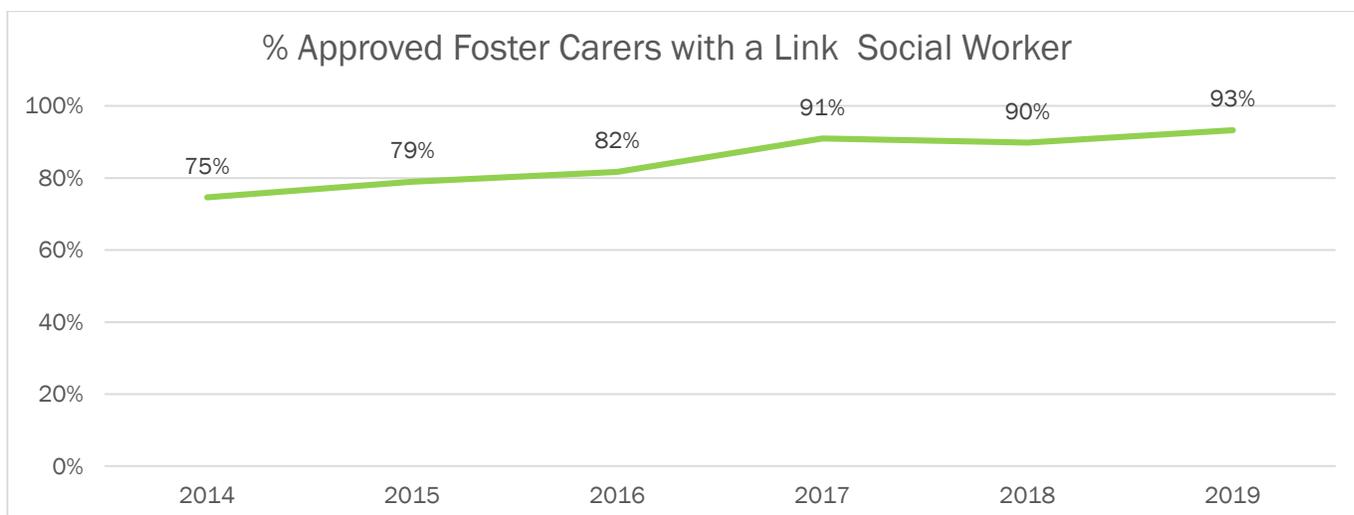
¹ A case awaiting allocation may be “active” on a “duty” system. This means that there are actions being undertaken by a dedicated duty team or rotating social workers on a duty roster to progress the protection and welfare of the child. Examples of actions being undertaken include telephone calls relating to the concern, visits to see children, completing initial assessments and child in care reviews or care plans. The actions undertaken must have occurred within the monthly MTP reporting period.



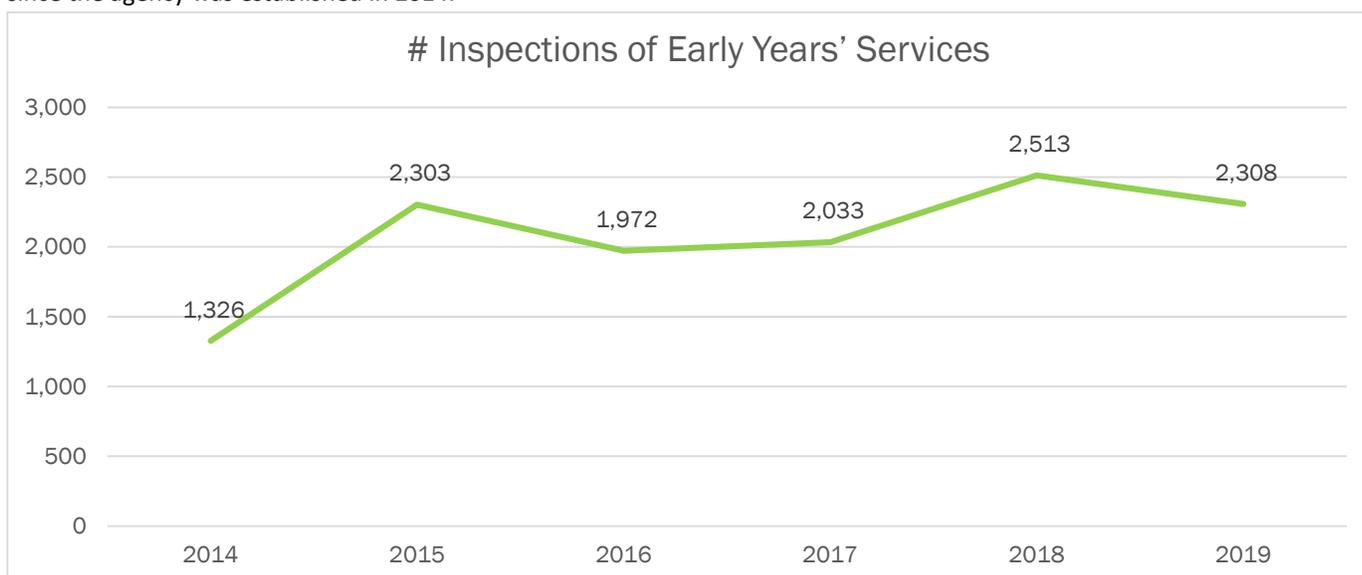
Figures for 2017, 2018 & 2019 include children in care under the social work team for separated children seeking asylum (80, 67 & 67 respectively). The figure for 2014 includes children in respite care from home.



Percentages for 2017, 2018 & 2019 include children in care under the social work team for separated children seeking asylum. The percentage for 2014 includes children in respite care from home.



Of approved foster carers, 93% had a link social worker at the end 2019, up 3% from 2018. This was the highest percentage since the agency was established in 2014.



In 2019, the Early Years Inspectorate completed 2,308 inspections of early years' services. The inspectorate found that additional engagement, time and meetings were required with some services to ensure that they were operating safely. This impacted inspection schedules, but it has provided the necessary assurances.

1.4. Corporate Plan 2018–2020

Developed in accordance with Section 42 of the Child and Family Agency Act 2013, Tusla's Corporate Plan 2018–2020 reflects the Agency's strategic priorities over the three-year period. With implementation supported by an annual series of business plans, many of the priorities identified in the Corporate Plan directly address areas for improvement identified by Tusla's stakeholders and reflect the organisation's commitment to continuous improvement and its desire to develop a culture that is focused on quality, learning and responsiveness. Corporate Plan 2018–2020 outlines seven high-level strategic objectives, each of which is underpinned by a set of Corporate Plan actions that will be achieved through the accomplishment of key performance indicators (KPIs).



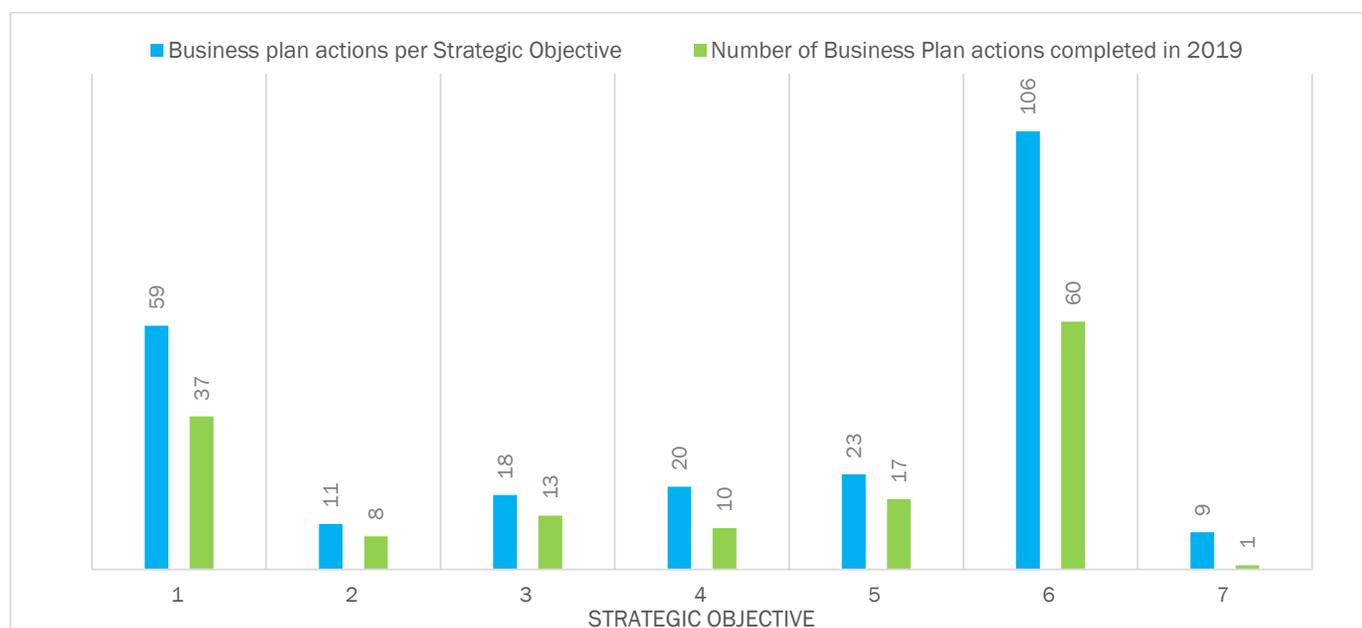
The seven strategic objectives outlined in the Corporate Plan 2018–2020 have been broken down into 69 accompanying Corporate Plan actions to be delivered across the lifetime of the plan. Each of these Corporate Plan actions is to be achieved through the accomplishment of a detailed series of business plan actions and associated key performance indicators clearly setting out the steps involved, the timeline for delivery and the expected outputs. These actions are tracked through an annual series of business plans. Prepared in accordance with the provisions of Section 46 of the Child and Family Agency Act 2013, the purpose of these business plans is to set out an annual account of what the Agency must achieve in the year ahead to meet the overall strategic objectives of the Corporate Plan. Business Plan 2019 details the actions to be achieved in consideration of the Agency Corporate Plan 2018–2020.

1.5. Business Plan 2019

Tusla – Child and Family Agency presented its second Business Plan issued under the second triennial cycle for the Agency's Corporate Plan 2018–2020. In accordance with Section 46 of the Act, it is required that the Agency presents its Business Plan to the Minister within 30 days of the issuing of the Performance Statement by the Minister for Children and Youth Affairs. Business Plan 2019 was underpinned by the Corporate Plan 2018–2020, the Agency's performance information, and also took into account the direction provided in the Performance Framework and the Performance Statement issued by the Minister.

Business Plan 2019 set out what was to be achieved in the year ahead to meet the overall strategic objectives of the Corporate Plan. Progress in respect of the implementation of this Business Plan is tracked and quarterly reports are provided to the Tusla Board and the DYCA. Business Plan 2019 identified 50 service delivery units for 246 actions, in the second year of a three-year cycle. The Agency completed 143 (58%) of its business plan actions set out in Business Plan 2019; 12 (5%) actions were withdrawn, with the remaining 91 (37%) carried over for completion in 2020. Throughout this report, we will identify a number of the Business Plan actions achieved.

The following graph outlines the number of Business Plan actions set against each strategic objective, and the number completed in 2019. Actions which remained outstanding at the end of 2019 were carried into 2020. These actions will be tracked along with 2020 Business Plan actions through the Agency's Business Plan reporting.



1.6. Key Achievements in 2019

Since the establishment of the Agency, there have been many significant milestones and changes and these continued into 2019, including:

- Further implementation the Child Protection and Welfare Strategy to continuously embed improvement in our ability to create the environment where our experienced and dedicated staff are supported to implement our national approach to practice, the Signs of Safety. This practice was supported by access to multiple online evidence-based resources to ensure interventions are based on the best evidence-informed approaches and to enable collaborative work with children, families and communities to achieve effective safety for children;
- The national roll-out of the National Childcare Information System (NCCIS), which saw 17 social work areas having access to one integrated information system to manage child protection and welfare cases;
- The development and expansion of early intervention work through the Prevention, Partnership and Family Support programme. This programme supports families in their local communities with initiatives such as Parenting 24/7 (a parenting-support website) and Meitheal, which is a national practice model, bringing together a range of supports to help children where they may need the support of more than one service;
- Implementation of the National Intake Framework for the School Completion Programme (SCP);
- Integration of governance structures for all of Tusla's four regulatory functions which are responsible for practice audit and reviews in all areas and residential services;
- Acknowledgement by the Expert Assurance Group (EAG) of the significant progress achieved by the agency in progressing the actions in the Strategic Action Plan arising from the HIQA investigation into the management of allegations of child sexual abuse against adults of concern by the Child and Family Agency (November 2018).



January 25th – Launch of the Hidden Harm Practice and Strategic Statement training manuals

- An agency conversion initiative to convert frontline whole-time-equivalent agency staff to direct employment contracts, which provided for greater continuity of care through workforce stabilisation, together with more standardisation of approach and consistency in service delivery, particularly in relation to maintaining long-term relationships with children and families;
- The enablement of over 3,800 staff with laptops, smartphones and MiFis;
- Tusla Fostering Week held in October 2019, which led to over 400 enquiries;
- Rosebrook Children’s Residential Centre and Ballydowd Special Care Unit achieved Investing in Children Membership Awards in 2019;
- Post-adoption therapeutic support services becoming a national service with new offices in Cork and Galway in addition to the Dublin office;
- Development of the new Child and Youth Participation Strategy for 2019–2023;
- The rebrand of Education and Welfare Services to Tusla Education Support Service (TESS);
- Roma Community Conference about responses to domestic and sexual violence held in 2019 with over 80 participants from these communities in attendance.

Further insight with regard to these achievements is detailed throughout this report.

1.7. Key Challenges in 2019

Despite its successes, it is acknowledged that the Agency operates in a challenging environment, in which both internal and external factors impact on its function as an agency and the delivery of its services. The following factors continued to influence the focus of the Agency in 2019:

Legislation and Statutory Requirements

As the statutory body with responsibility for child protection and welfare in Ireland, Tusla operates within extensive domestic and international legislation and statutory requirements, including:

- The Child Care Act 1991
- The Children’s First Act 2015
- The Education (Welfare) Act 2000
- The Child and Family Agency Act 2013
- Adoption Act 2010
- Adoption (Amendment) Act 2017
- Aftercare Legislation
- Domestic Violence Legislation
- UN Convention on the Rights of the Child

This existing legislation places comprehensive responsibilities upon Tusla, which has a direct impact on the provision of its services. The legislative landscape has continued to evolve and has placed additional obligations on the Agency, with the Agency committed to engaging with the Department of Children and Youth Affairs in the review of the Child Care Act 1991, the review of the Education (Welfare) Act 2000, the reform of the Guardian Ad Litem service and proposed changes in the adoption legislation.

Regulation

In 2019 regulation and external oversight from agencies such as HIQA, the Ombudsman for Children, the Data Protection Commissioner and the Health and Safety Authority remained a critical aspect of how we continued to show progress in meeting our statutory obligations and in ensuring the public’s confidence through robust accountability, transparency and ongoing service improvement. The Agency remained committed to improving all areas within the context of increased demand for services, finite resources and the additional burden that regulatory processes can have on the day-to-day delivery of services. The Agency continued to maintain robust oversight and governance in relation to the Tusla Strategic Action Plan arising from the HIQA investigation into the management of allegations of child sex abuse against adults of concern by the Child and Family Agency (November 2018), and the requirements of the EAG (Expert Advisory Group), which place additional demands for service improvement on the Agency.

Demand for Services

A predominant challenge is the change in Ireland’s demographic and socio-economic landscape which is driving an increase in the number of Tusla’s core service users. Of the 1,190,502² children and 1,218,370³ families living in Ireland, 7.7% of children are living in consistent poverty, with 15.9% of children at risk of poverty.

² Census 2016

³ Census 2016

The Irish population grew by close to 420,000 between 2007 and 2017, of which the 0–19-year-old cohort (Tusla’s core service users) grew by almost 140,000. Ireland’s population is expected to continue to grow over the coming years due to net immigration, an above-average birth rate, and one of the lowest mortality rates in Europe.

April 2019 figures show an increase in homelessness in Ireland of 10,378 homeless, of which 3,794 (37%) are children. The number of homeless children increased by over 330% (2,914) between December 2014 (880) and April 2019. The number of immigrants to the State has grown over the past number of years due to the improving economy. As Ireland becomes increasingly multicultural, the broader mix of nationalities and cultures will likely result in increased service demands for Tusla and a requirement to develop new skills to respond appropriately to the emerging needs of service users.

Agency Resources

The fiscal space within which Tusla delivers its services is a significant consideration and the delivery of services within allocation is challenging for the Agency.

In 2019 the Agency required an additional €23.6 million and strict financial governance was required to bring the Agency in on budget. A number of cost pressures experienced in 2018 relating to (1) grants to outside agencies and (2) private residential and foster care services, placed additional financial pressure on the Agency during 2019.

In an effort to provide stability and continuity for children and families, as well as continuity of employment, from early 2019 the focus was on the stabilisation of the workforce in order to address factors impacting the attrition rate. The ability to provide services within the funded WTE was and remains a challenge for the Agency.

Mindful of these challenges, and building on the successes achieved in 2019, Tusla looks forward to 2020 through the ambitious lens of Corporate Plan 2018–2020, and remains committed to the delivery of high-quality, safe and effective services, and the delivery of high-quality, safe strengthening of governance and accountability within the Agency, while remaining focused on its core mission – to achieve better outcomes for children, families and communities.

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

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

An independent Expert Assurance Group (EAG) was established to oversee the implementation of recommendations of the HIQA report.⁴ The EAG met monthly with the Tusla Executive to question and advise, focusing on specific themes as

⁴ HIQA, *Report of the investigation into the management of allegations of child sexual abuse against adults of concern by the Child and Family Agency (Tusla) upon the direction of the Minister for Children and Youth Affairs*, 14 June 2018.

directed by the EAG Chair. The EAG prepared its final report⁵ in Q4 2019. Tusla continues to oversee the strategic action plan internally to ensure that momentum is maintained and all actions are completed.

A number of key achievements were realised in 2019 under each of the improvement themes. The following table outlines the improvement themes and these achievements:

Improvement Theme	Key Achievements
<p>Improvement Theme 1: Improve the management of child protection and welfare referrals in accordance with Children First to ensure harm is identified and responded to in a timely manner. This includes a reduction in cases awaiting allocation to a social worker.</p>	<p>Signs of Safety as the national approach to practice under the Child Protection and Welfare Strategy continued to be rolled out to improve the management of child protection and welfare referrals. ‘Practice-intensive’ workshops were used to help ensure consistency of approach, comparable practice and shared learning in a practical way. Improved systems for case prioritisation and closure were developed and approved and continue to be rolled out through these governance and learning structures.</p> <p>The Tusla portal continued to provide for efficiencies in the system for making mandated reports, by providing the Agency with a ‘digital front door’ for reporters to securely and instantly submit concerns using an easy-to-use online form, which is then forwarded to the relevant dedicated contact teams in each Tusla area.</p>
<p>Improvement Theme 2: Define and implement a new process for safety planning across the Agency to support the management of risk for children and families.</p>	<p>Rigorous safety planning processes were introduced and continue to be rolled out through practice-intensive workshops for both child protection and child welfare cases.</p>
<p>Improvement Theme 3: Improve the processes and structures for the management of retrospective cases of abuse to ensure a consistent and effective national approach.</p>	<p>New national Child Abuse Substantiation Procedures (CASP) (inclusive of retrospective abuse) were finalised,⁶ and a substantial work programme put in place for go-live of the procedures from July 2020, supported by the National Childcare Information System. Multidisciplinary teams were established in each of Tusla’s four regions to ensure that retrospective cases of abuse are consistently managed and to build expertise.</p>
<p>Improvement Theme 4: Develop robust systems and processes to support effective interagency working to strengthen the management of child protection and welfare referrals.</p>	<p>Processes to ensure liaison between Tusla and An Garda Síochána Divisional Protective Services Units (DPSUs) were established and rolled out. Under the Children First joint working protocol, a Senior Liaison Management Forum (SLMF) was established in each Tusla area and Garda division, and a National Principal Social Worker Garda Liaison was introduced.</p>

⁵ See <https://www.gov.ie/en/publication/3eeb15-final-report-of-the-expert-assurance-group-to-the-minister-for-child/>

⁶ At the time of writing this report, while the process was finalised in 2019, the Agency sees challenge in relation to its implementation in 2020.

	<p>The Barnahus model pilot – bringing together health, medical, therapeutic and policing services in a child-centred way where sexual abuse is suspected – was launched in Galway in September, supported by Tusla in the provision of staffing and collaboration with key agencies including the HSE and An Garda Síochána and supported by their parent Departments.</p>
<p>Improvement Theme 5: Implement safe and effective data and information management systems to support case work and compliance with best practice.</p>	<p>An 18-month programme under the ICT Strategy to mobile-enable all social workers was completed in Q1 2019. The initiative provided approximately 1,800 social work staff with a smartphone, laptop and a Mi-Fi connectivity device. This mobile enablement allows social workers to access and update case notes, emails etc. where and when they need to.</p> <p>A Data Management Strategy was approved incorporating a record-management workstream. Significant work was completed on the National Childcare Information Systems CASP module.</p>
<p>Improvement Theme 6: Ensure Tusla’s workforce has the appropriate skill mix, administrative supports and structures to support frontline staff to deliver safe and effective service.</p>	<p>In 2019 Tusla commenced an agency conversion initiative to convert frontline whole-time-equivalent agency staff to direct employment contracts. The target was exceeded; the final number of contracts issued under this initiative was 408. This will ultimately provide for greater continuity of care through workforce stabilisation, together with more standardisation of approach and consistency in service delivery, particularly in relation to maintaining long-term relationships with children and families.</p>
<p>Improvement Theme 7: Improve governance, management and oversight systems across the Agency to optimise performance, identify and manage risk and ensure effective case supervision is in place.</p>	<p>A performance achievement policy was finalised, and agreement was reached with the trade union to implement phases 1 and 2 of same.</p> <p>A new service performance and improvement framework was approved, and review of service performance on a regular and systematic basis through performance conferences was developed.</p> <p>Planned internal audits, supported by an audit charter, became a business-as-usual function for the Agency in 2019.</p>
<p>Improvement Theme 8: Strengthen the organisational risk management system to support effective and consistent risk management practices and service improvement.</p>	<p>The development of an online risk register represented a significant milestone in the development of the organisation’s risk management system. The online system incorporated a number of improvements to the risk management process, which was further enhanced by improved risk reporting reflecting internal dependencies.</p>

1.9. Feedback from our Service Users

As a statutory service, Tusla may have to intervene in private family life, and sometimes where a family has not requested help but where concern about the safety or well-being of a child exists. Ensuring effective use of our authority while maintaining a rigorous focus on the child's safety is a key aspect of our practice. Our goal is to work collaboratively with children, families and their extended network of support so that we can collectively keep children safe from harm. Ongoing feedback from children, parents and other service users helps us to understand where we are achieving success and where we need to improve. To support the commitment to this engagement, Tusla operates a national feedback and complaints policy called 'Tell Us'. Tusla actively seeks out the views of the children, young people and families receiving Tusla services, including those who are reluctant or resistant to receive these services.

All complaints and feedback are responded to by the relevant services where all staff aim for local resolution of complaints. Where investigation is required, complaint and review officers are embedded within local service areas and their working knowledge of the local services assists them with both the investigation of a complaint and its resolution.

In 2019 the Quality Assurance Directorate established the Service Experience Innovation and Development Team to facilitate the proactive engagement with service users. This proactive engagement seeks out feedback/involvement from our service users in relation to their views or experiences of our services (e.g. through surveys, forums, committee membership consumer panels). Additionally, this team quality-assures the delivery of an effective complaints system, provides support to complaint and review officers managing complaints, and puts in place quality improvement initiatives for the complaints system, training in complaints for staff, and data analysis and reporting on complaints for Tusla, among other supports.

Key Achievements in 2019

2019 saw the re-establishment of the Tusla Advisory Group (TAG), which consists of a group of young people aged between 18 and 25 years old who have been through the care system. It acts as an advisory group to Tusla on matters relating to care and aftercare. Young people who were members of the group in 2019 were from Galway, Cork, Meath, Dublin, Mayo, Cavan and Monaghan. TAG will be recruiting new members in 2020. A number of surveys were also developed which, in collaboration with Tusla frontline services, will be rolled out in 2020.

A number of initiatives that encourage a reporting culture were also undertaken by the Service User and Experience Feedback Team and were outlined **Business Plan 2019** under **Strategic Objective 4**. The completion of these actions resulted in:

- The establishment of systems to support the provision of comprehensive and accurately recorded data on complaints throughout the system;
- The development and improvement of the systems and structures for service-user engagement;
- The redevelopment and rollout of a complaints handling training programme.

The team will continue to engage and collaborate with children, young people, families and communities in a participative manner (including people who are reluctant or resistant to receive our services). The information gathered from service-user feedback will be used to inform quality improvements in service developments and support the achievement of better outcomes for children, young people, families and communities.

Complaints

In 2019, 741 complaints were reported to the NIMS system, which represents a 76% improvement in reporting culture generally. It is anticipated that this will increase further in 2020 to reflect continued growth in the reporting culture of complaints.

Tusla aims to resolve as many complaints as possible at a local level and in 2019 the percentage of complaints on NIMS which were resolved locally increased almost 294% on 2019 figures. This reflects increased responsiveness to complaint management at a local level and is to be commended.

Using the data recorded on NIMS, the table below presents a comparative analysis of high-level trends in relation to complaints received between 2017 and 2019.

Complaint Issue	2017	2018	2019
Behaviour or attitude	12.82%	11.31%	16.89%
Insufficient service	22.01%	15.08%	14.80%
Uncategorised	12.18%	14.32%	13.60%
Delivery of information	5.98%	9.30%	10.61%
Unfair treatment	5.13%	4.52%	7.92%
Lack of response / action	10.26%	8.29%	6.88%
Poor communication	5.98%	7.79%	6.73%
Delayed response / decision	4.91%	7.04%	5.98%
Lack of consultation	3.63%	3.77%	4.04%
Outcome of assessment	1.28%	3.27%	2.84%
Negligence	2.56%	2.01%	2.54%
No response to communication	1.28%	1.26%	2.09%
Failure to adhere to policy	1.71%	2.26%	1.79%
Poor application of standards	3.42%	2.26%	0.75%
Poor condition of building	0.00%	0.50%	0.75%
Failure to adhere to legislation	0.21%	0.00%	0.60%
Poor record keeping	1.50%	0.50%	0.60%
Discrimination	0.00%	2.26%	0.45%
Telephone unavailability	0.64%	0.75%	0.15%
Breach of procedure	4.27%	3.52%	0.00%
Catering / Food	0.21%	0.00%	0.00%

Report on Complaints and Reviews from Tusla-Funded Partners

Under Section 70(2) of the Child and Family Agency Act 2013, Tusla-funded and partner agencies are required to provide the Agency with a general report on complaints received during the previous year. During 2019 the National Commissioning Unit, Tusla Service Experience and Feedback Team and ICT worked collaboratively to provide a Complaints Capture System to be housed on the commissioning portal.

Following the engagements carried out in 2019 between the above departments, a Complaints Section was developed and integrated onto the commissioning portal and is due to be commenced on 1st January 2020; this will facilitate the submission and capture of complaints data from Tusla-funded partners.

Positive Feedback

Tusla received 168 instances of reported positive feedback in 2019, which represents an increase of over 300% on last year's reported figures. Below are excerpts from the positive feedback received:

Young Person

"Everyone should know this my experience, if anyone is ever thinking about living independently ... I went down on a hard path that I will never forget. Lucky enough I had aftercare worker that was there for me – stood by my side. To be honest with you guys, when I went down to a hard path it was not easy because I was afraid to ask for help. If I didn't ask I be stuck fed up with everyone and there is one good thing as well – if your aftercare does not answer your call he or she will be in a meeting or something but they always, I mean always, call you back because they never let anyone down"

Early Years Provider

"I would like to acknowledge the professional and courteous approach to myself, my staff and the children throughout the inspection"

Judge

"complimented the Aftercare Service on the comprehensive aftercare plan prepared for and with the young person"

Parent

"I would like to thank you for your letter including helpful information and I look forward to hearing from the prevention partnership services"

Advocacy Group

"I'm just writing a quick note to let you both know how grateful I am for agreeing to meet [name] and pushing his request for the aftercare allowance over the line. This will make a huge difference in his life, his studies and his prospects. He is intending join the [name] council soon and will hopefully become a voice to ensure that other young people will not find themselves in the position he did when he left the care system.

Without your support, he may not have been able to keep on attending third level and will have ended up as homeless for a much longer time. You both can take a lot of credit for ensuring that this did not happen and I really appreciate it"

Judge and GAL

"were exceptionally complimentary to Tusla on their excellent handling of this case and how they managed all the complexities of this case with great care and attention and utter professionalism, especially the involved child protection and welfare team in this case and ensuring [name] and his needs were at the forefront of all decisions"

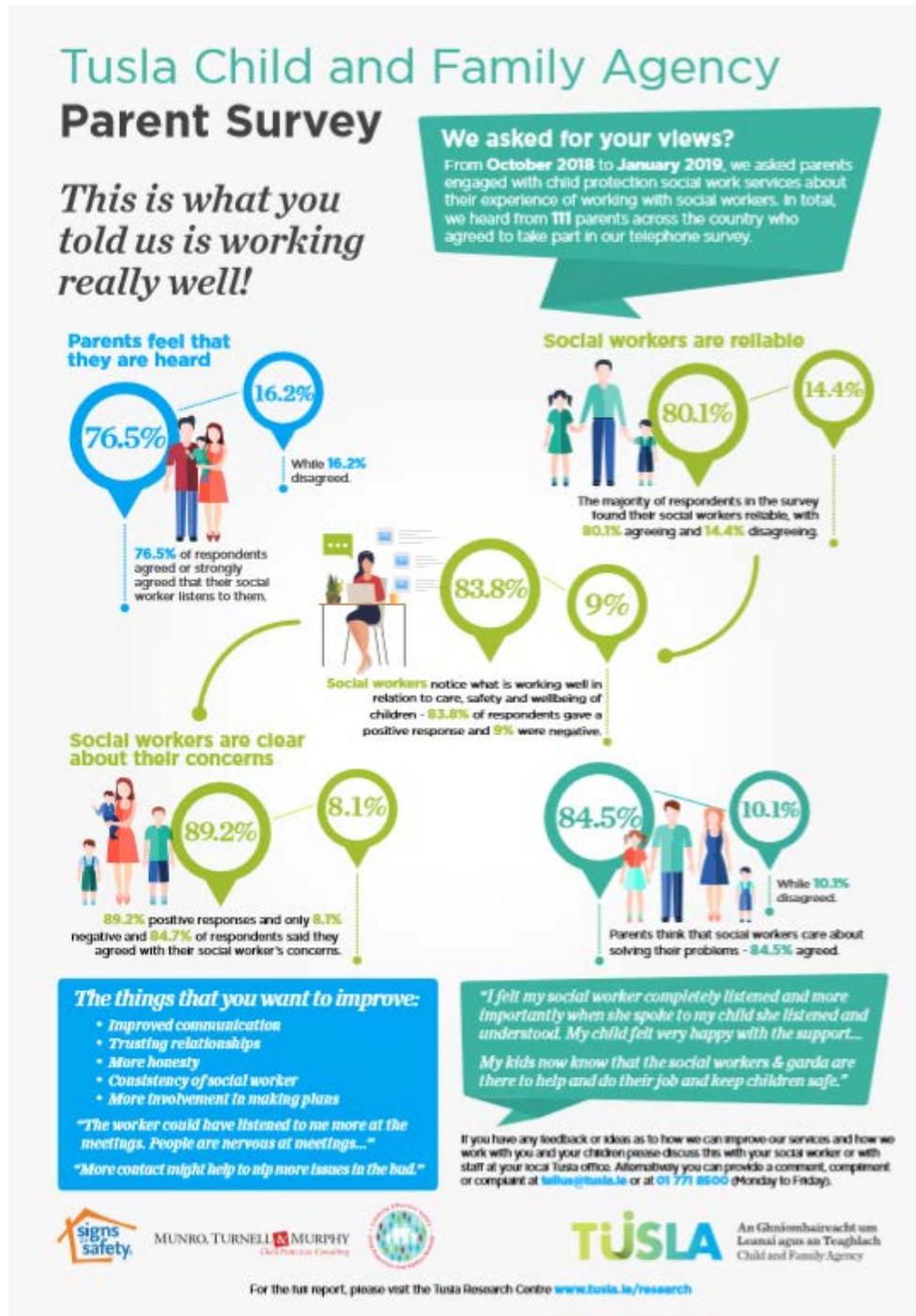
Medical Social Work Department

"thanked the Duty Team for their Threshold Training; staff felt they were more confident in when to refer to Tusla; communications and relationships were positive between staff and the Social Work Department"

Private Residential Service Provider

"You have been a massive support to me and young person [name] and I really appreciate your help and advice in the best interest of [name] over the last four years"

Parent Survey



As part of implementing the Child Protection and Welfare Strategy, a parent survey was administered in 2019, supported by all Tusla areas. The aim of this survey of parents receiving a service from Tusla child protection social work was to understand more about their experiences of the relationship with their worker – in particular, to find out whether they were experiencing the kind of working relationship that is the goal in Signs of Safety practice. The parent survey and the results of the survey are presented on this infographic.

2. Service Delivery



February 15th – Tusla staff and friends from the EPIC Youth Council celebrate Care Day

Tusla provides a wide range of universal and targeted supports and services across the continuum of care, from early intervention and prevention to child protection and child welfare services, through to alternative care (e.g. foster care and residential care). In addition, the Agency has responsibility for a range of educational welfare services, with Educational Welfare Officers working with young people and families who are experiencing problems with school attendance. Tusla Education Support Services (TESS) are also responsible for managing the Home School Community Liaison Scheme and the School Completion Programme under the Delivering Equality of Opportunity in Schools (DEIS) initiative. Tusla also commission a range of DSGBV services. The following sections outline developments in 2019 for the following services:

2.1 Child Protection and Welfare Service

The purpose of the Child Protection and Welfare Service is to meet the Agency's statutory responsibilities in accordance with the Child Care Act 1991 and the Children Act 2001. The Agency is required to identify and promote the welfare of children at risk or in need of protection and to provide child protection services, including applications to remove children into care, and family support services. There are 20,000 cases open to child protection on any given day. The following section outlines the achievements of the child protection and welfare team from each of the four service areas:

Dublin Mid-Leinster (DML)

National project regarding cases awaiting allocation: three areas in the DML region were part of a national project to reduce the numbers of cases awaiting allocation. These areas have Service Improvement Plans in place and areas are restructuring to ensure that the service is operating effectively within available resources.

Dublin South Central: A restructuring of intake/CPW pillars was achieved during 2019, ensuring Signs of Safety implementation on screening of new referrals. Since April 2019 a 45% reduction has been achieved on unallocated cases at initial review and initial assessment.

With restructuring of the **Review, Evaluate, Direct (RED) team** which took place in early 2019, robust operational processes were embedded by the end of 2019. Over 800 medium/low-priority cases referred to RED teams in the area were either closed or diverted to funded agencies via Comhar Counselling Service meetings.

In **Dublin South West/Kildare West Wicklow**, restructuring of intake and CPW service commenced in the area in September 2019 with a completion date set for March 2020. This has involved significant work in realigning both intake and child protection teams across the area. The area has two Domestic Violence Practitioners aligned to the social work intake teams. These practitioners have a key role to play in supporting CPW social workers to manage complex DV cases and in signposting women to relevant domestic violence services in as timely a manner as possible. The domestic violence workers play a key role in the diversion of relevant cases through the RED, Comhar Counselling Service and Meitheal processes. A key achievement in 2019 was the approval of a third Domestic Violence Practitioner, allowing for the expansion of this support, who will take up their post in early 2020. There were 90–100 referrals to RED/Comhar (250 children), and approximately 450 children were directly referred into community services from Social Work Departments.

In 2019, the **Midlands** area evidenced a clear reduction in cases awaiting allocation, from 411 in January 2019 to 230 in December 2019. High-priority cases awaiting allocation also reduced from 84 in January to 20 in December. The restructuring of the duty intake service into dedicated IR and IA teams was a major contributing factor. Also, the introduction of the fifth Duty Team Leader, a role which has a specific focus on cases awaiting allocation, has proven successful in the area.

An Garda Síochána, Mullingar, complimented Team Leader for her collaborative work with the Gardaí when dealing with a suspected people-trafficking situation where young people had to be protected and taken into care.

A Care Order was granted today. Both the Judge and GAL and staff from HSE were exceptionally complimentary to Tusla on their excellent handling of this case and how we managed all the complexities of this case with great care and attention and utter professionalism.

“Children were largely positive of social workers and said that they understood they were there to help them.”

“The majority of children spoke positively about the work that social workers did with them, one child commenting that ‘It was brilliant and more helpful than she imagined’.”

“Children said they were given leaflets about the service and they got very clear information about the supports that were available.”

“All parents whom inspectors spoke to were very complimentary of the service they received. For example, a parent said social workers managed their situation very well and were very professional and courteous.”

“Parents said they were constantly spoken with and kept up to date with developments and everything was explained in detail as things happened.”

Quotes from Child Protection and Welfare Inspection Mayo Oct 2019.

South

In 2019, the South achieved a reduction in cases awaiting allocation through utilisation of the Signs of Safety model of practice and practice-intensive workshops. Teams were reorganised to enhance screening and assessment of referrals so they could be uploaded to NCCIS within the 24-hour timeframe. The use of social care staff within CPW teams has aided the ability of the region to close cases faster.

In terms of retention and training, 2019 saw stabilisation of the CPW teams, achieved due to an agency staff conversion programme. Staff also achieved significant learning from practice workshops active in the area.

The South experienced a very positive impact from the Prevention, Partnership and Family Support (PPFS) programme with Creative Community Alternatives (CCA) initiatives being utilised in all areas.

The Regional Child Protection and Welfare Forum and Regional Child Protection Conference (CPC) Chairs Forum became operational in the region and this supported, enhanced and provided service improvements for child protection and welfare.

Dublin North East (DNE)

The key achievement in DNE during 2019 links to Strategic Objective 1 of the 2019 Business Plan (implementation of the Child Protection and Welfare Strategy including Signs of Safety) and delivering on the CPWS priorities aligned to the HIQA action plan.

All four DNE areas have continued to implement and promote Signs of Safety, which has included the restructuring of child protection and welfare teams. Additional actions have included:

- Regular sessions with the Signs of Safety consultants;
- Area-led practice-intensive workshops;
- Child protection conferences aligned to Signs of Safety;
- Training on the use of trajectories.

Evidence from quality assurance (QA) audits carried out in two of the four areas highlights the progress being made in this area, with positive findings

in relation to the use of Signs of Safety at the front door in Dublin North City (DNC) and the use of scaling being more evident in an audit of DNC than in a previous audit.

Reducing the number of unallocated cases has been the other key achievement in DNE during 2019, in keeping with the CPWS priorities identified in the HIQA action plan. Unallocated cases were at an all-time low in Cavan/Monaghan by the end of 2019 and were reduced from in excess of 1,200 to 555 in Dublin North. This was achieved in Cavan/Monaghan as a result of having a full complement of staff and making use of resources within the community and Tusla PPFS services, including early intervention to prevent families from reaching the threshold for CPW interventions. Dublin North achieved

their reduction through the use of a planned risk management strategy. Increased oversight of cases awaiting allocation in Louth/Meath and work in relation to initial assessments in DNC supported all four areas in reducing the number of unallocated cases over the course of 2019. These achievements were attained whilst working with insufficient capacity, particularly in relation to staff, in all four areas over the course of the year.

West

Regional Task and Finish groups took place in June, July and August 2019 in preparation for the child protection and welfare inspections. This work was focused on regional standardisation of best practice in implementation of the HIQA standards. Two areas in the West were inspected by HIQA in 2019 under the new inspection regime on child protection and welfare – Mayo and Sligo/Leitrim/West Cavan.

Mayo was the first area in the country to be inspected. This involved a self-assessment and development of a Quality Improvement Plan. The Mayo inspection was carried out in early October 2019 and inspected under seven standards. The final report was published on December 16, 2019. The area was compliant in three standards, substantially compliant in three standards and partially compliant in one standard.

The Sligo/Leitrim/West Cavan inspection was carried out in late October 2019. The area was compliant in three standards, substantially compliant in three standards and partially compliant in one standard. Duty intake and CPW services were reorganised to ensure full implementation of the Signs of Safety national practice model. The National Childcare Information System was also fully implemented regionally for CPW.

The operation of RED teams across the region is an example of best practice in ensuring strong connectivity and effective interface between the PPFs programme and the duty intake social work service. The procedures and processes which underpin RED enable clear referral pathways and decision making where cases are stepped down or diverted from the social work service, or conversely are escalated from Meitheal. Decisions of the RED team result in a family being recommended for one of four options: a community-based response with partner organisations, Meitheal, family welfare conferencing or return to social work.

Child Protection and Welfare Strategy (CPWS)

The Child Protection and Welfare Strategy office provides a special advisory function to inform long-term strategic planning and the development of key policy actions relevant to child protection and welfare services.

In 2019, the CPWS achieved a number of commitments included in **Business Plan 2019** identified under **Strategic Objective 1**, including:

- Delivery on CPWS priorities aligned to the HIQA action plan;
- Progression of the action research project designed to track the implementation of Signs of Safety and experiences of staff, parents and children;
- Delivery of two- and five-day training programmes to Child Protection and Welfare staff (1,657 attendees in total) and the delivery of external briefings with all partner agencies.

In addition to this, a safety planning workshop was developed and delivered with teams from ten areas. The first round of practice-intensives for intake and case prioritisation were also completed across all areas; 34 area-based practice leads were nominated and supported to facilitate ongoing intake and case prioritisation practice-intensives.

NCCIS⁷

The high-level aim of the National Childcare Information System is to improve the quality, safety, responsiveness and delivery of children's services. The programme is focused on providing a technical solution to support this high-level aim by configuring and deploying the National Childcare Information System throughout the organisation.

Actions achieved from **Business Plan 2019** under **Strategic Objective 6** included:

- The creation of a business process (with the Policy and Research Unit) for historical cases of abuse for the appropriate storage of adult data;
- Issues of data quality (relating to legacy data migration) addressed with review of data and plans to clean up data in each area;
- Collaborative working with the QA Directorate regarding the process of internal data validation and authorisation through the appropriate governance structures.

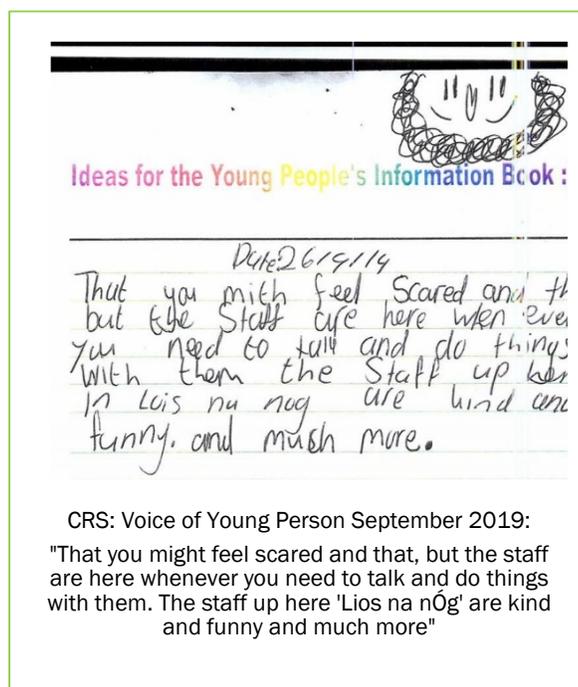
2019 saw the recruitment of a National Manager, National Lead for Data Quality and Report and a National Practice Lead to support the development of the data quality framework and improved reporting in the Agency. With these posts in place, data quality will continue to rise and subsequent reporting will be more informative and accurate.

There was gradual steady increase in the numbers of records created on NCCIS, rising from 89,000 at the end of 2018 to 131,000 by the end of 2019, reflecting the increased familiarity with the system and its extension into more areas of practice supported through the increased availability of mobile technology, laptops and MiFi devices. The additional capacity and continued work in 2019 has resulted in improved recording and retrieval of records supporting more effective interventions for children and families.

Out of Hours

Tusla Out-of-Hours Social Work Service (OHS) ensures the safety and welfare of children who are not receiving adequate care and protection outside of normal office hours. The service also provides emergency care placements for children as required. The OHS and Emergency OHS will always seek to prevent children from having to access emergency care unnecessarily. The service will link the child and family into the local Social Work Department for immediate follow-up on the next working day.

There were 2,186 referrals to the National Out-of-Hours Service in 2019 with 635 children placed by the OHS in 2019; 4,025 nights' accommodation were also supplied by the National Out-of-Hours Service in 2019.



⁷ It is acknowledged that at the time of writing this report, significant progress was achieved in 2019; however, there is a significant programme of development to be achieved in relation to the NCCIS.

International Social Services (ISS)

In 2019, with the appointment of a new Principal Social Worker to this service, the ISS relocated from Galway to Dublin and co-located with the Team for Separated Children Seeking Asylum. The service processed 197 referrals in 2019, with 102 from Tusla to other countries, 95 from other countries, and 112 applications processed under Brussels II Regulations and the Hague Convention. The service dealt with a further 100 queries from Tusla Social Work Departments and from other countries.

In collaboration with the Latvian Embassy and the DCYA, the service arranged a two-day educational field visit by officials from the Riga Orphans' Court in March 2019. Along with this, the service participated in the meeting of ISS casework co-ordinators in Berlin in April 2019 and participated in the European Judicial Network meeting in Bucharest in May 2019.

2.2. Alternative Care & Adoption

Children in Care and Foster Care Services

Children in Care and Foster Care Services have a responsibility to provide for the protection and care of children who, for various reasons, cannot live with their parents/guardians. Tusla's children in care and fostering service ensures children and young people's needs are met in their foster homes. This is done by the allocation of social workers and other Tusla professionals to support children and foster carers, through care planning and review processes, and by providing training and support to foster carers.

In October 2019, Tusla – Child and Family Agency undertook a national public information campaign to recruit more foster carers to Tusla with the aim of dispelling the myths associated with foster care eligibility among the general public, and position Tusla as Ireland's go-to fostering service. This was the first recruitment initiative since the establishment of the Agency in 2014.



October 11th–18th – Tusla National Fostering Week kicks off at an event in the Mansion House to promote fostering recruitment across Ireland

Tusla National Fostering Week in October 2019, carried the tagline, *You Could Be My Perfect Foster Carer*. The campaign sought to create maximum publicity and visibility for Tusla fostering recruitment needs. The goal was to persuade as many people as possible to make contact with Tusla about becoming a foster carer. Tusla was seeking all types of foster carers to foster children who cannot live at home with their own family for a particular reason. Tusla works with foster carers who are in a heterosexual or same-sex relationship, are of any ethnic/religious background, who own a home/rent, who are employed/unemployed, single/married, and with parents who both work.

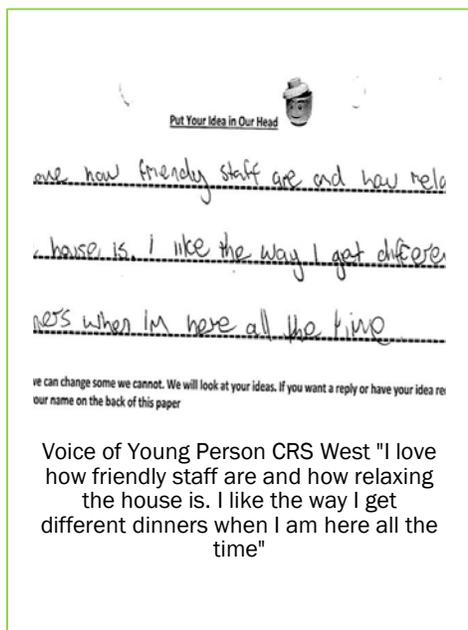
The campaign was very successful and was supported by a large number of external stakeholders, partner bodies, and members of the Houses of the Oireachtas. Interviews with foster carers were aired extensively on radio stations across the country and the campaign received widespread media coverage in both national and regional publications. Tusla National Fostering Week led to over 400 enquiries from potential foster carers.

Children's Residential Services (CRS)



June 5th – The inaugural National Children's Residential Services Symposium provides a unique forum to discuss and learn about the topic of transitioning out of special care for young people

Children's Residential Services (CRS) was established as a national service in 2015. Our Statement of Purpose is that "Children are placed in residential care in order to provide a safe, nurturing environment for them when they cannot live at home or in an alternative family environment such as foster care. Residential care aims to provide a physically, emotionally and psychologically safe space, in a planned way, in which children and young people can heal, develop and move forward in their lives." Our aim is to care for and to nurture young people so they can achieve their full potential and become self-sufficient, socially aware, independent young adults.



There are varying placement types within mainstream residential centres depending upon the needs of the young person, the location of the centre and the other young people who are residing in the centre. Residential care can be provided by a statutory, voluntary or private provider.

Special care is short-term, stabilising and safe care in a secure therapeutic environment. The aim of the special care intervention is to provide an individualised programme of support and skilled therapeutic intervention which will enable the child/young person to stabilise and then move to a less secure placement based on assessed needs.

Young people in care also have access to additional supports such as GPs, speech and language therapists, physiotherapists, psychologists and others.

CRS currently employs approximately 1,000 staff and has a total of 46 owned and operated centres nationwide (includes six special care centres). CRS provides a broad range of services within these centres including mainstream residential care, special care, respite, preparation for leaving care, teen and baby, and separated children seeking asylum (SCSA).

Children’s Residential Services achievements during 2019 included:

- World Cup 2019 in Poland for young people in care;
- Rosebrook and Ballydowd achieved the Investing in Children Membership Award™ for the second time;
- Rosebrook also received a HIQA report with no action plan;
- Willow View was the first centre nationally not to receive a HIQA action plan;
- Moyle Crescent CRC, DML, received an Investing in Children Award for a garden project completed in summer 2019. The garden project was completed by the young people and staff in the centre. The project involved creating a design for the back garden with new plants, flower beds, herbs, a football goal and seating area;
- Extensive training completed to establish WellTree Outcomes Framework across CRS centres;
- Establishment of one regional referral pathway as of September 2019 for placement in statutory residential centres;
- Increased capacity in separated child seeking asylum (SCSA) centres.



Ballydowd Special Care Unit Achieves Investing in Children Membership Award

Ballydowd is a special care unit that provides stability in a secured therapeutic environment for young people aged 12–17 years. The care provided in Ballydowd assists the young person to enhance their self-esteem and focus on their strengths, and also provides the young person with capacity for constructive choice, resilience and individual responsibility.

In April, Ballydowd Special Care Unit received the prestigious Investing in Children Membership Award™. The award recognises and celebrates the participatory and inclusive practices within Ballydowd, and its demonstrated commitment to engaging in dialogue with young people, leading to real change.

To achieve the Investing in Children Membership Award™, Ballydowd was required to demonstrate an inclusive approach to dialogue, and that young people are invited to contribute. However, dialogue should not be seen as an end in itself and must lead to change. Some of the changes that have taken place in Ballydowd include increasing freedoms within the facility for the young people, changes to how pocket money was handled, access to kitchen areas, a large number of new activities and entertainment choices, participation in menu creation, and freedom to individualise and decorate bedrooms to the young person's taste. All Investing in Children Membership reports are read and fully endorsed by the children and young people involved in the process.

Seven Young People from Special Care are the First to Achieve Gaisce Awards



In October, seven young people from special care were each awarded with a Bronze Gaisce – The President’s Award, and are the first ever young people in special care to do so. The young people were based in Ballydowd Special Care Unit in Dublin, and Coovagh House Special Care Unit in Limerick.

Gaisce – The President’s Award is a direct challenge from the President of Ireland, Michael D. Higgins, to all young people to dream big and realise their potential. The young people in Ballydowd and Coovagh House special care units took up the challenge with enthusiasm, completing their Gaisce challenges in each of the four categories of community involvement, personal skill, physical recreation and adventure journey.

Some of the activities undertaken by the young people included:

- Fundraising for homeless charities through organising and baking for bake sales
- Bicycle repair and maintenance for the units
- Working with local animal welfare organisations to walk, feed and care for dogs
- The development of life skills to prepare to return to the community after care
- Gardening and landscaping skill-building
- Healthy eating, nutrition and culinary skill-building
- Music production and singing
- A host of physical activities, water sports and hiking.

Congratulating the Gaisce Bronze Awardees, **President of Ireland, Michael D. Higgins** said: *“I commend all of these young people for undertaking their Gaisce Award. The roads which led each of these Awardees towards this achievement are individual and unique ones, reminding us of the immense potential that lies within all of us no matter what our circumstances are. Today is a wonderful day when you, your families, and all those who have been part of your journey to Gaisce Bronze can and should feel immensely proud.”*

Adoption Services



June 19th – The newly expanded post-adoption support service is launched in association with Barnardos

Adoption services aim to provide children with eligible and suitable families through adoption and provide information, counselling and support for members of birth families who have been separated through adoption and historical care arrangements. Adoption services also facilitate contacts through information and tracing where all parties consent. In addition to this a number of achievements were realised in 2019, including:

- Completion of the scoping exercise requested by the Minister. A total of 1,044 records were reviewed by social work staff between December and April 2019 and presented to the independent reviewer;
- Social work staff continue to inform the 151 persons affected by illegal birth registration for their birth status, even finding people in other countries. Staff travelled as far as Australia to advise these people in person of illegal birth registration;
- Adoption services commissioned an expansion of the post-adoption therapeutic support services for children. The service is now national, with new offices in Cork and Galway in addition to the Dublin office, and includes children adopted from care;
- Adoption continued to commission a dedicated counselling service for those affected by illegal birth registration. This included one-to-one sessions and group sessions;
- The recruitment in March 2019 of a dedicated Freedom of Information(FOI)/Data Protection (DP) Officer assisted in bringing a personal service to those seeking their birth information;
- A series of briefing sessions to all Tusla social workers by Adoption and Policy were conducted in Q4 2019 regarding the introduction of Permanency and concurrent planning for children in care. Just under 500 staff

attended. The role of adoption services in this initiative was to educate social workers on the provision of the Adoption Amendment Act 2017 and implications for social work practice in terms of adoption from foster care. These information sessions supported the introduction of permanency in the Irish child protection and welfare services and were part of the wider work being undertaken to help ensure that, where adoption is in the best interest of the child, any such application is made in good time.

In 2019, 194 applications for assessment as adoptive parent(s) were received, with the most common application being for step-parent adoption, accounting for almost half (48%; 94) of all applications. 179 children were referred for adoption with the majority being for step-parent adoption (61%; 109). 152 adoption assessments were presented to local adoption committees. 2,332 enquiries for an information and tracing service were received, resulting in 804 applications for an information and tracing service. At the end of 2019, 619 applicants were awaiting an information and tracing service, a 21% (161) reduction on 2018.

Aftercare Services

Aftercare services are provided by Tusla to eligible young people in preparation for leaving care, and to support and assist the young person in making a successful transition to independent adult life in the community. In 2019 dedicated aftercare service teams were established in each area with local implementation structures also put in place, which was an achievement of the commitment made in **Business Plan 2019** under **Strategic Objective 4**.

At the end of 2019, 2,744 young persons/young adults were in receipt of aftercare services, with 82% (2,265) having an aftercare plan in place. The total number of referrals for aftercare services for the year 2019 was 714, with 99% of these referrals being eligible for an assessment of need.

In 2019 the agreed standardised Aftercare Service Delivery Model was rolled out and operationalised nationally along with full implementation and roll-out of the revised National Aftercare Policy with associated best-practice guidance documentation.

Capital Assistance Scheme (CAS) accommodation for care leavers continues to be rolled out as a preventative housing mechanism allocated before a care leaver becomes homeless so that the experience of homelessness can be prevented. Care leavers suitable for CAS are those with complex needs such as mental health difficulties, disability or addiction, or are young parents who are at risk of homelessness but have the potential to live independently without any supports in the future. The first care leaver took up tenancy in early 2019. There are 70 properties now fully acquired with 45 care leavers accommodated by 31st December 2019.

Engagement with Department of Rural and Community Development commenced with approval and support of DCYA. Three key objectives were established (two for 2019 and one for 2020) regarding areas in which the Social Inclusion and Community Activation Programme (SICAP) can work in collaboration with Tusla Aftercare Managers in terms of supports for an identified care leaver cohort of young people/young adults 15–25 years who are not in education, training or employment in preparation for the labour market.

Work on the development of an Accommodation Framework for Care Leavers continued in 2019. One element of this development was to support the submission of a business case for commissioning services for young adults with complex needs from 2020 to 2023 and define a model of care and accommodation for all young adults in aftercare with complex needs, particularly the young adults who do not access the existing range of Tusla accommodation and care.

Therapy Services

The purpose of Tusla therapeutic services is to respond to children and families who have therapeutic needs that are not provided for by other state agencies. In particular, children in foster care and residential care may have therapeutic needs relating to trauma and attachment that require therapeutic service delivery that is integrated alongside social work and care teams. In 2019, regional therapy services were established and a stepped project plan for the establishment of adequate services at local and regional levels was achieved, which was a commitment under **Strategic Objective 1 of Business Plan 2019**.

Separated Children Services (SCS)

Separated Children Services provides care, family reunification and aftercare support to separated children seeking asylum with an equity of care principle to all unaccompanied minors who are in receipt of the services.

2019 saw a significant number of achievements for this service, including:

- The SCSA team was supported and resourced to meet requirements under the Irish Refugee Protection Programme (IRPP);
- Participated in a pro bono project with the Irish Refugee Council and the Immigrant Council of Ireland;
- All social workers were trained in November 2019 on the Tusla/SCSA-specific Child Protection Risk Assessment for the purposes of age assessment in relation to implementation of the Child Care Act 1991 as amended;
- Facilitated international family access visits in both Germany and Albania;
- A Social Work Team Leader participated in a conference with Missing Children Europe (in Belgium) in December 2019;
- Facilitated Dublin transfers to other EU member states and also partnered children coming into Ireland via Dublin 3 network and protocols;
- Family reunifications, despite lack of resources, have shown very positive outcomes for both our children in care and aftercare clients;
- A great many of our children in care are going onto third-level education;
- One young person in our service earned a bronze medal for Ireland at the European Games in Portugal in the summer of 2019;
- Social worker and aftercare worker turnover was 0%;
- 98% of aftercare clients were engaged in some form of education/training;
- All young persons referred to aftercare service had aftercare plans in place;
- SCSA aftercare metrics were recorded and reported nationally;
- SCSA were represented in national aftercare strategies;
- Successful family reunifications took place for young people who have been separated from their families;
- The first successful CAS property for SCSA sibling group was established.

2.3. Family Support Services



May 22nd – Celebrating positive parenting at the fourth National Parenting Conference

Family Support is a style of work and a wide range of activities that strengthen positive informal social networks through community-based programmes and services. The main focus of these services is on early intervention aiming to promote and protect the health, well-being and rights of all children, young people and their families. At the same time, particular attention is given to those who are vulnerable or at risk.

Prevention, Partnership and Family Support Programme (PPFS)

The purpose of the Prevention, Partnership and Family Support Programme is to support children, young people, parents and families in accessing preventative and support services while enabling their participation in decisions which affect their lives. It aims to prevent risks to children and young people arising or escalating through building sustainable services within Tusla and partner organisations to perform preventative and early intervention work. The programme addresses Tusla's statutory requirement under the Child and Family Agency Act to provide 'preventative family support services aimed at promoting the welfare of children'. PPFS works to build connectivity by engaging with Tusla and external services across the continuum of care.

A number of actions set out in **Business Plan 2019** under **Strategic Objectives 1, 3 and 4** were successfully completed. These actions included:

- Publication, dissemination and implementation of the National Child and Youth Participation Strategy 2019–2023;
- Publishing and implementation of the National Parenting Commissioning Framework (NPCF);
- Further enhancement, support and development of the role of Parent Support Champions (PSC);
- Further implementation of Meitheal and development of MOUs (Memorandums of Understanding) with key statutory partners;
- Implementation of Creative Community Alternatives (CCA) commissioning plans for 2019;
- Alignment of the Area-Based Childhood (ABC) programme within Tusla;
- Outcomes for Children Data and Information Hub rolled out across Tusla and partner agencies;
- Development of the quality framework for CFSNs completed;
- Collaboration with the DCYA and other partners to support the implementation of the First 5 Strategy.

Key components of Tusla’s Prevention, Partnership and Family Support (PPFS) programme are its Child and Family Support Networks (CFSNs) and Meitheal, the Tusla-led early intervention national practice model. The CFSNs work to support the integration of all services that play a role in the lives of children and families in a given area. In 2019, there were 115 CFSNs in Ireland which worked across the continuum of care at local level, in partnership with families, to ensure that there is no wrong door for them when accessing help. The CFSNs facilitate the coordination of the use of Meitheal. The incremental build towards a full service delivery framework for PPFS is continuing to ensure consistent service provision across the country.



December 4th – The PPFS National Conference 2019 takes place in Kilkenny for practitioners and partners, working to ensure there is ‘no wrong door’ for families when it comes to family support

Meitheal, the Tusla-led early intervention national practice model, is an evidence-based model that aims to ensure that the needs and strengths of children and their families are effectively identified, understood and responded to in a timely way so that children and families get the help and support needed to improve children's outcomes and to realise their rights, bringing together a team around the child to deliver preventative support. In 2019, 2,330 Meitheal processes were requested and 1,654 closed.

Parenting Support

Strengthening and developing parenting supports and services and ensuring that these supports and services are a priority for Tusla and partners. PPFs has provided a strategic framework and guidance on parenting. A key element of the Parenting Support workstream is supporting the implementation of the government's First 5 Strategy and aligning the with the work of the DCYA Parenting Support Policy Unit. Parenting Support initiatives include:

- The promotion of 50 Key Messages for practitioners;
- Parenting24seven website for parents;
- 35 Parental Participation Seed Funding projects;
- Parenting Support Champions: there were 133 in 2019.

Building a culture of participation that gives a voice and space to children and their families in all aspects of Tusla's work is a key objective of PPFs. There is a strong commitment to actively encourage the participation of children and young people in decisions that affect their lives, which is having a positive impact on children and families that is evidenced right across the system. In 2019 37 Child and Youth Participation Seed Funding projects were carried out at local level, 75 Investing in Children Membership Awards were received and over 2,000 staff were trained in participatory practice.

Child and Youth Participation Strategy 2019–2023 and Yearbook for 2019

In June, the Agency officially launched its new Child and Youth Participation Strategy for 2019–2023 with a launch event in Dublin. The participation of children and young people is fundamental to a child-centred, rights-based approach to working with children and young people. Tusla is committed to involving children and young people in decision making. The Child and Youth Participation Strategy 2019–2023 sets out how Tusla plans to support, nurture and celebrate a culture of participatory practice in both Tusla and Tusla-funded services.



June 20th – Tusla officially launches its new Child and Youth Participation Strategy, 2019–2023

The creation of the Child and Youth Participation Strategy saw Tusla undertaking a consultation process that involved over 300 Tusla staff, funded agencies and young people, nationally. Tusla also engaged and consulted with a wide range of stakeholders to forge a better understanding of the challenges and requirements involved in further embedding participatory practice within the Agency.

Tusla also officially launched the Child and Youth Participation Yearbook, 2019. From 2016 to 2018, Tusla, with the support of Atlantic Philanthropies, made seed funding available to develop Child and Youth Participation initiatives nationally. It was essential for any initiative to receive funding that the ideas had to come from young people, and during this period 45 projects were chosen nationally for seed funding. The Child and Youth Participation Yearbook for 2019 provides a snapshot of the 45 seed funding projects – what they set out to do at the beginning of their journey and what they have managed to achieve so far in a relatively short space of time.

Tusla National Child and Family Support Week

The second annual Tusla National Child and Family Support Week took place in May, and provided an opportunity for Tusla to highlight and create awareness of the range of supports that are available to parents, children and families from Tusla and Tusla-funded services.



May 13th–20th – Dublin South West/Kildare/West Wicklow celebrate the UN International Day of Families at one of the 160 events that took place across Ireland during Tusla National Child and Family Support Week

Family support services are there for all children, families and individuals who need help. Tusla provides extensive family support services as part of its PPFS programme to ensure that the needs and strengths of children and families are effectively identified, understood and responded to.

The main focus of these services is on early intervention, aiming to promote and protect the health, well-being and rights of all children, young people and their families. At the same time particular attention is given to those who are vulnerable or at risk. In addition to the range of family support services provided directly by Tusla, Tusla funds an additional 332 local services across Ireland.

Nationwide, there were over 160 individual events and information sessions held as part of Tusla National Child and Family Support Week to create visibility and awareness, and provide information to members of the public about the range of family supports that are available to them. The events were very well received and engaged with, and they generated significant media coverage across the country and on social media. Feedback from members of the public was overwhelmingly positive, and many people were surprised to find out the extent of the supports that Tusla provides and funds within their community.

Changing Futures

In March, Tusla launched a new child-friendly website, ChangingFutures.ie, to help young people to better understand the work that Tusla does. The website was unveiled at the Printworks in Dublin Castle at an event that was attended by over 100 children, young people and staff from Tusla and Tusla-funded organisations. Minister for Children and Youth Affairs, Dr Katherine Zappone, was also in attendance.



March 4th – The young creators of ChangingFutures.ie officially launch the website in Dublin Castle

Changing Futures is a uniquely youth-driven project, created and developed entirely by young people – including the name, logo, look, design and content. Born out of the Dublin South East/Wicklow Child and Youth Participation Project, it then grew into a national project. Beginning in 2016, an Agenda Day™ was facilitated by six young adults with lived experience of Tusla and its funded services. From here, the concept of a website specifically for young people containing accessible information about Tusla services was developed.

Young people were involved at every stage of the website development. Students from the Institute of Art, Design and Technology (IADT) in Dun Laoghaire assisted in developing the website's design and media elements. Website builders Piquant also helped to bring the site to life.

ChangingFutures.ie was only possible due to the immense creativity, dedication, passion and innovation embodied by this group of young people. The young people involved in this project are a testament to the young people that have engaged with Tusla.

2.4. Children's Services Regulation

The work of Children's Services Regulation (CSR) plays an important role in promoting and safeguarding the quality of services for children. CSR provides parents and the public with assurances that these services are registered, inspected and monitored in accordance with the relevant legislative and regulatory requirements. The strategic development of CSR in 2019 indicated a number of significant developments in regulatory legislative requirements. This includes the commencement of a regulatory strategy to ensure integration and alignment across all regulatory functions to drive ongoing service improvement and performance management. A summary of the key achievements across the five areas of Children's Services Regulation are presented below:

Early Years Inspectorate

Tusla's Early Years Inspectorate is responsible for inspecting pre-schools, play groups, day nurseries, crèches, day-care and similar services which cater for children aged 0–6 years. The role of the inspectorate is to promote and monitor the safety and quality of care and support of the child in early years provision in accordance with the regulations. The benefit of regulation in early years services including safeguarding children against harmful practice, ensuring a minimum set of standards are achieved, supporting the translation of quality standards into practice, providing parents with an assurance that services are of a consistent quality and setting the benchmarks against which service providers can develop, enhance and maintain services for children.

The Early Years Inspectorate saw in 2019 the successful development and implementation of a robust and clearly defined process, structure and system to facilitate the re-registration of all relevant early years services. The inspectorate also continued the implementation of the Quality and Regulatory Framework (QRF) establishing a clearly defined structure for inspection and ensuring widespread understanding of the framework and related requirements.

Alongside this, other achievements of the Early Years Inspectorate, including those identified under **Strategic Objective 2** of **Business Plan 2019**, were:

- Conducted research on the regulation of childminders in other jurisdictions to inform future direction in regulating childminders;
- Developed a communications protocol with DCYA in relation to services or persons proposed to be removed from the national register;
- Developed and implemented a defined process and centralised system to facilitate the re-registration of all relevant services in accordance with the early years regulations;
- Successfully completed of the re-registration of all early years services that were required to re-register their service by the statutory deadline of 31st December 2019;
- Commenced implementation of the QRF across the early years sector, establishing and ensuring widespread understanding of the framework and related requirements;
- Undertook consultation with parents whose children attend early years services to ascertain parents' expectations and requirements of the inspectorate.

Children's Services Regulation – School Age Services

In 2019 CRS – School Age Services developed and implemented a robust and clearly defined process, structure and system facilitating the registration of all relevant services in accordance with the new school age services regulations. A total of 390 school age services were registered, 336 of these were stand-alone school age services and 54 were combined

services.⁸ This CRS team implemented a non-inspection-based registration programme for school age childcare services which was a commitment under **Strategic Objective 2 of Business Plan 2019**.

Children’s Services Regulation – Alternative Care Inspection and Monitoring Service (ACIMS)

In 2019, the ACIMS introduced a new themed inspection system providing improved transparency and understanding to non-statutory children’s residential centre providers on their responsibilities. This service also developed an inspection model to reflect the national standards for children’s residential centres published by the Health Information and Quality Authority (HIQA) in 2018. The team completed six audits of non-statutory private foster care agencies. Audits in respect of six private foster care agencies were also completed.

In respect of non-statutory residential centres, 130 centres were registered with 128 inspections of these centres carried out.

Children’s Services Regulation – Alternative Education Registration and Assessment

In 2019, the Alternative Education Registration and Assessment team strengthened the process for registering independent schools in line with existing legislative proposals and successfully completed recruitment of additional Alternative Education Assessment Officers, which were commitments under **Strategic Objective 2 of Business Plan 2019**.

The service also strengthened the governance and systems underpinning the Alternative Education team by developing an inspection support framework under Section 14 of the Education (Welfare) Act 2000 to assist in the assessment of the minimum education guidance. The registration process for the independent schools sector was also strengthened to ensure it was in line with existing legislative provisions. The recruitment of additional Alternative Education Assessment Officers expanded the external assessment panel.

Alternative Education Registration and Assessment home education saw 1,495 children on register with 617 new applications received. In 2019 301 assessments were carried out with 183 children being removed from the register and 20 children refused registration; seven appeals were received in relation to this.

Child Safeguarding Statement Compliance Unit

The Child Safeguarding Statement Compliance Unit implemented a series of initiatives to support and drive compliance with the Child Safeguarding Statement requirements and developed a five-year plan for the Children First Register of Non-Compliance (Corporate Plan 2.5.1). By the end of 2019, 715 statements were received with 685 of these achieving compliance and the remaining 30 working towards compliance; 57 enforcement notices in relation to compliance were issued.

2.5. Tusla Education Support Service (TESS)

Tusla Education Support Service (TESS) is a national service that holds the statutory responsibility for ensuring that all children attend school or are otherwise in receipt of a certain minimum education. It comprises the statutory Educational Welfare Services and the non-statutory Home School Community Liaison Scheme and School Completion Programme services, which are predominantly based in schools with Delivering Equality of Opportunity in Schools (DEIS) status.

⁸ A combined service is a school age service in the same location as an existing registered early years service.



November 5th – TESS, Tusla Educational Support Service, launches at an event in the Mansion House in Dublin. The event also sees the launch of the National School Attendance Matters Campaign, involving almost 2,000 schools across Ireland

Business Plan 2019 noted the commitment of Educational Welfare Services (EWS) to rebrand the service to highlight the integrated supports available through its three service strands – Education Welfare Service; Home School Community Liaison Scheme and the School Completion Programme. The three services work with children, young people, parents, schools and community family-support services to improve attendance, participation and retention.

EWS was rebranded as TESS (Tusla Education Support Service). Over 150 children, young people, parents, schools and staff were engaged in the rebrand process to ensure the new name and look resonated with its users and reflected the supportive services it provides. The launch of the rebrand was held in the Mansion House on Dawson Street which saw over 400 professionals, schools, parents and children come together to launch the new name and celebrate the services TESS provides.

In addition, TESS ran a National School Attendance Matters Campaign throughout the month of November to encourage and promote the importance of regular school attendance with children, young people, parents and schools. Over 1,900 schools signed up to the campaign and ran attendance initiatives in their schools throughout the month.



**Seirbhís Tacaíochta
Oideachais Tusla**
Tusla Education Support Service

- Continued delivery of continuing professional development (CPD) programme to upskill staff to meet presenting needs.

2019 saw TESS achieve a number of additional **Business Plan 2019** actions under **Strategic Objectives 5 and 6**, including:

- The continued support of DEIS schools through the upskilling of HSCL Coordinators in place in these schools;
- Planned actions to manage the service demand for the Tusla statutory TESS service implemented;
- School Completion Programme intake framework implemented nationally;

In addition, 30,000 parents were supported by Home School Liaison Coordinators, 6,100 students were worked with by the statutory Educational Welfare Officers and 26,000 target students were supported by the School Completion Programme.

2.6. Domestic, Sexual and Gender Based Violence (DSGBV)

The role of DSGBV Services is to lead a coordinated approach to the care and protection of victims of domestic, sexual and gender based violence, including adult victims and survivors of these forms of violence, in addition to children and families. In undertaking this remit, the Agency commissions almost 60 specialist service provider organisations in the community and voluntary sector to deliver support services to victims and survivors of domestic, sexual and gender based violence. Of these organisations:

- 22 provided emergency refuge or safe home accommodation in addition to other community-based supports to women and children who were victims of domestic violence;
- 21 provided community-based services to women, children and men who were victims of domestic violence;
- 16 provided community-based services to women, men and older children who were victims of sexual violence.

The 22 emergency accommodation provider organisations provided a total of 155 family units of accommodation, of which 145 units were in emergency refuges and ten were emergency safe homes.

Rathmines Women's Refuge, which normally provides nine units of accommodation to women and families, remained temporarily out of use as a refuge but had alternative use, through a partnership with the Dublin Regional Homeless Executive during the year, to provide accommodation for homeless women, maintaining an average occupancy rate of 23 women per night. A decision to move from internal to external commissioning of the refuge, transferring it to the community and voluntary sector, was made by Tusla in late 2019.

In 2019 DSGBV services achieved the completion of a number of **Business Plan 2019** actions under **Strategic Objective 1**, which included the following:

- With key stakeholders, progressing the provision of refuge and/or other emergency accommodation provision nationally, along with continued implementation of outreach and community-based services for victims of domestic violence identified through needs analysis processes (including provision for children, minority ethnic and LGBTI+ communities);
- Publication of annual activity data reports for 2016, 2017 in Q1 2019 and for 2018 by Q2, with analysis of total resources available to DSGBV sector organisations;
- The visibility and accessibility of National Domestic Violence and Sexual Violence Helpline services enhanced;
- Improved access to services for victims/survivors of sexual violence by extending services to areas of under-provision, with a focus on responsiveness to needs and prevention;
- Strategic planning for DSGBV services progressed.

In addition to the above there were a significant number of developments, including:

Funding: Funding for DSGBV services was increased overall by 6.6% to just over €25.3 million in 2019, to help meet Ireland's obligations under the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention), which was ratified in March 2019. This incorporated a 10% increase across the 16 sexual violence services.

PQs: There was continued extensive external interest in the area of DSGBV service provision, with more than 90 external Parliamentary Questions, representations and media queries.

Commissioning Developments: Reports were presented to Tusla in 2019 in relation to two sexual violence needs analyses which were initiated in 2018, for border counties (Donegal, Sligo, Leitrim, Cavan, Monaghan and Louth) and for the midland counties of Roscommon, Longford, Westmeath, Meath, Laois and Offaly. Recommendations contained in the reports will form the basis of implementation planning in 2020, and DSGBV actions have been included in several of the participating CYPSC Children and Young People's Plans for 2020 onwards.

Meanwhile implementation planning continued in West Cork, with further independent scoping work being conducted in conjunction with a number of funded agencies, to explore the initiation of a dispersed model of sexual violence counselling for service users in the West Cork area. This will influence similar future planning in other areas where populations are dispersed or hard to reach for other reasons.

Research into the provision of sexual violence services to young people within Rape Crisis Centres was commissioned by Tusla, undertaken by DCU and concluded with a research report in December 2019. A public launch of the findings is planned for 2020.

Tusla initiated a strategic review of domestic violence accommodation provision in order to develop a commissioning plan for future provision of these services to address needs of service users and to address Ireland's obligations under the Istanbul Convention with regard to provision of refuge spaces. The review has a national focus but also includes specific consideration of the greater Dublin area. The review is being carried out in a collaborative way with key stakeholders, including cross-governmental engagement and participation from service users.

A comprehensive literature review examining the Irish legal and policy context and international practice was completed in Q4 2019. The stakeholder engagement for the domestic violence accommodation review commenced in December 2019. A report will be published in 2020.

There were also significant developments in frontline services in 2019, including:

Refuge service developments: A new refuge with accommodation for five families was opened by Saoirse Women's Refuge in Rathcoole, Co. Dublin, in Q4 2019. Progress continued on the redeveloped refuge facility run by Cope Galway.

Domestic Violence Outreach Developments: During 2019 there was further development of outreach services. These services focus on community-based support for victims to achieve and maintain safety and improve geographical access to services. Additional developments have been progressed in the following areas: Co. Galway; Co. Carlow; East/North Co. Cork; Co. Wicklow; Co. Dublin (Fingal/Balbriggan), resulting in an additional 11 outreach workers in place by the end of 2019. Additionally, a commissioning process began to establish outreach in Dun Laoghaire/Rathdown.

Services for Children in 2019: A national coordinator role for childhood domestic violence programmes, which was established with Barnardos in 2018, continued to support development of evidence-informed responses to children who experience domestic violence. A community of practice for this area was established following workshops in Q3 2019.

Healing Programmes for Children: Activity in this area has focused on three strands: delivery of programmes; activation and preparation in areas which had not previously had programmes in place (e.g. establishment of interagency working groups); and training (65 professionals trained and a waiting list seeking further training). The following areas had at least one recovery (TLC Kidz) programme in 2019: North Tipperary, Carlow, Waterford, South Tipperary, Wexford, Limerick/Clare – with preparatory work underway in Kildare, Meath, Kerry, Kilkenny, Louth, Dublin, Laois, Athlone and Galway. Additional funding was accessed through Social Innovation Fund Ireland to match a portion of the Tusla funding to this programme, which has allowed for the engagement of part-time coordinators in three areas.

Support to Children in Refuge: By the end of 2019 all refuges had at least one dedicated children's support worker and there were two community-based children's support workers dealing with children experiencing domestic violence.

Sexual Violence Services Developments: There was a significant increase in demand for sexual violence support services in 2019. The impact of high-profile rape cases and the #MeToo movement were seen to have been significant factors in the rise in demand. Additional resources of 10% were provided to all rape crisis support/sexual violence services to increase counselling provision and to extend outreach services, with the overall purpose of addressing waiting lists/waiting times and increasing access to services.

Additional counselling capacity was made available (in some cases through outreach) in Dublin, Tipperary, Athlone, Tullamore, Kilkenny, Cork, Carlow, Kildare, Limerick, Donegal, Monaghan and Mayo. Further developments in young-people-specific counselling were introduced in Galway and Wexford. A Sexual Assault Treatment Unit (SATU) coordinator was appointed in Waterford. Initial roll-outs for the development of support groups for sexual violence survivors were established in a number of services.

Traveller and Roma Services: The DSGBV services team continued to work with Pavee Point, the Traveller and Roma support organisation, on a pilot initiative to develop targeted responses to domestic violence for the Traveller community. The project was fully established in four areas in 2019, with a Traveller Domestic Violence Worker appointed within Traveller Primary Health Care teams in Carlow, Wicklow, Fingal and Cork. An advisory group was set up to support ongoing learning and capacity-building and to inform direction around domestic and sexual violence supports for Traveller and Roma communities. A conference to engage directly with the Traveller and Roma community about responses to domestic violence and sexual violence was held in Q3 2019, with over 80 participants from these communities attending. Tusla support continued for the Roma Women’s project, delivered through the Ferns Diocesan Youth Service.

Manuela Project: The EU-funded Manuela Project, an evidence-informed sexual violence prevention programme, focusing on sexual consent, for which Tusla is the lead agency, in collaboration with the rape crisis/sexual violence sector, continued to roll out in 2019. By the end of the year 2000 young people aged 15–17 years in 58 schools had participated in it. The project evaluation remained on target for completion in 2020, with the emergence of promising findings and learning. The project is due to complete its current phase in March 2020, when the current EU funding stream ceases. Tusla DSGBV services has been proactively looking at resourcing to extend the project for a further phase to allow the trial of an amended version of the programme that takes on board learning from Phase 1. Tusla engaged with the SPHE curriculum review that was undertaken in 2019 to ensure that learning from the Manuela Project can usefully inform sustainable preventative work with young people.

3. Supporting Service Delivery

The following section outlines the work and achievements of the support services, which include Commissioning, Human Resources, Finance, Legal, ICT, Corporate Services (Health and Safety, Data Protection, Workforce Learning and Development), Communications, Strategy & Business Planning, Programme Management and Policy and Research.

3.1. Commissioning

Commissioning ensures that the total resources available to children and families are applied to improving quality and outcomes in the most efficient, effective, equitable, proportionate and sustainable way.

In 2019, the roll-out of Tusla's Commissioning Strategy 2019–2023 contributed to further development of key areas, including the online commissioning portal. The Commissioning Unit also launched a Commissioning Toolkit that works as both a reference and training tool to take commissioners through the whole commissioning cycle. The online portal now encompasses a Children First component, a funded service complaints area, cloning abilities reducing time constraints and duplicate entries, the ability to e-sign (electronic signing) and a governance documentation upload facility. The Commissioning Unit recruited 17 Community Family Support Workers based in Family Resource Centres (FRCs) and aligned with Tusla area services.



March 21st – Feedback and collaboration at the Tusla Commissioning Plan stakeholder consultation event at Wood Quay Venue in Dublin

In 2019, an additional €1.5m funding was distributed by the Commissioning Unit to the National Family and Community Services Resource Centre Programme and €580,000 was distributed to 22 FRCs to assist their development and to meet children's needs. The unit also continued to fund €100,000 towards the HSE–Tusla–FRC Mental Health Project, which improved the capacity of communities to meet the needs of people experiencing mental health difficulties. Families and children also had access to low-cost counselling in 85 FRCs and 146 voluntary organisations nationwide.

The Commissioning Unit achieved the completion of **Business Plan 2019** actions under **Strategic Objectives 1, 3 and 4**, which included the following:

- Report completed on the overall account of funding available to FRCs.
- Continued monitoring meetings and compliance of funded organisations ensured that there is documented evidence that centres are compliant with governance, financial and service delivery requirements, and that optimal outcomes and value for money were achieved.
- All areas completed commissioning training and have a commissioning plan in place.
- Procurement of capacity-building support for the community- and Tusla-funded voluntary organisations completed.
- All Section 56 organisations are using the IT commissioning portal.
- Continued promotion of the DCYA/Tusla *Better Outcomes* National Data Hub Project, under the Quality and Capacity Building Initiative (QCBI), and use of the statistical data repository.
- A comprehensive implementation plan established, consisting of definitive and measurable communications workstreams and sub-workstreams.

Children and Young People's Services Committees (CYPSC)

Children and Young People's Services Committees are a key structure identified by government to plan and coordinate services for children and young people in every county in Ireland. The overall purpose is to improve outcomes for children and young people through local and national interagency working.

In 2019, 27 Children and Young People's Services Committees covering every county in Ireland, supported by one dedicated CYPSC Coordinator, operated at full implementation. This network is supported by the National CYPSC Office located within the Tusla Commissioning Unit.



October 17th – Professor Anne O’Gara, Deputy Chairperson, Tusla, officially launches the Dublin CYPSC Directory. The first of its kind, the Dublin CYPSC Directory provides details and contact information for over 5,000 child, youth and family services in the Dublin area

A new CYPSC video was launched to support the development of a greater awareness and understanding of the CYPSC national model of interagency working and to support greater engagement in CYPSC by agencies, organisations and government departments.

Through detailed action plans, CYPSC realised the coordination and delivery of collaborative, evidence-informed actions for children and young people in their county aged 0 to 24 years across the themes of health, education, safety, economic security and participation, with partners from the statutory, community and voluntary sectors.

The DCYA launched CYPSC: Shared Vision Next Steps 2019–2024. The national coordinator for CYPSC and two local CYPSC coordinators were members of the DCYA task group to develop and finalise this implementation resource. CYPSC also initiated 142 Healthy Ireland programmes and 33 Community Mental Health projects.

CYPSC also achieved the completion of **Business Plan 2019** actions under **Strategic Objective 1**, which included the following:

- Quality improvement of CYPSC plans continued throughout 2019 with 13 (48%) CYPSC Children and Young People's Plans (CYPP) reviewed in 2019 and 10 (37%) CYPSC CYPP successfully completed by the end of the year;
- CYPSC approaches to the planning and coordination of parenting supports at local level were consolidated, with 50% of CYPSC planning and coordinating parenting support at local level. Additionally, 17 (63%) CYPSC have incorporated Tusla’s PFFS steering committee as a CYPSC subgroup, as guided by DCYA.

3.2. Human Resources

Tusla Human Resource Directorate consists of multiple functions and teams working together at both national and regional level to provide support to managers and employees alike within Tusla – Child and Family Agency.

Our Corporate Business Support services support all Tusla HR departments regionally on national policies and procedures, ensuring consistency of approach and governance in line with human resources best practice.

Recruitment and Talent Management services undertake to deliver safe recruitment and selection practices to meet the resourcing needs of the Agency. We engage proactively with third-level institutions to strengthen the relationship with current students and enhance the placement process between them and Tusla.

In 2019, Tusla Recruit far exceeded their recruitment target of 489, with a total figure of 780 appointments, as at 31st December.

The poster features the Tusla logo at the top left, with the text 'An Ghníomhaireacht um Leanaí agus an Teaghlach Child and Family Agency' to its right. The main title 'Social Work Recruitment Open Day' is centered in large white font. Below this, it states 'Tusla has opportunities for:' followed by 'EXPERIENCED AND GRADUATE SOCIAL WORKERS NATIONWIDE' in bold yellow text. A white box on the right lists benefits: 'Permanent contracts of employment', 'Salary scale €40,619 to €59,053', 'Opportunities for Continuous Professional Development', and '29 days paid holidays per year'. At the bottom, it says 'For more information and to register, visit tusla.ie'.

June 14th – Tusla HQ in Dublin hosts the first Tusla Social Work Recruitment Open Day

Most notably, 2019 marked a considerable increase in net gain of social workers in comparison with previous years, which is attributed to increases in recruitment outputs and decreases in turnover. Social work increased by 139 whole-time equivalents (wte) since the beginning of 2014, with 97 wte in 2019 alone.

In 2019, Recruitment and Talent Management undertook analysis of agency staff usage and initiated a comprehensive conversion programme for frontline core grades to provide stability and continuity for the families and children within our service, continuity of employment for the agency staff, while also managing our cost base. This initiative is scheduled to complete by end of Q1 2020.

The Employee Health, Wellbeing and Employee Assistance Programme provides the necessary systems and processes to enable and support all staff to reach and maintain their full potential in the workplace and thus deliver a high quality of service.

The Occupational Health service for Tusla was established in March 2019, with an access policy developed to allow improved turnaround times on referrals, improved pre-employment screening turnaround time for new starters, and an improved pre-employment screening process to assess fitness for work.

The goal of the 2019 Employee Wellbeing Strategy, called Healthy Workplaces 2019, is to build and maintain a workplace environment and culture that supports healthy lifestyle choices. In 2019 this strategy received a nomination for a Wellbeing Award. We received a Gold Award for the 'Active at Work' programme through engaging with over 700 staff.

In 2019 the Employee and Industrial Relations team continued to support line managers and employee relations within Tusla, whilst maintaining positive relationships with our staff partners through regular and continued engagement.

In 2019 the Strategic Workforce Planning Implementation Plan 2019/2020, which set out the key activities and actions which will be undertaken in 2019 and 2020, was further developed. This formally implemented workforce planning processes into the Agency.

The plan sought to ensure that the Agency has the right people with the right skills in the right place at the right time. It describes the Agency's intent to transition over time from a short-term operational approach to a mature approach, delivering truly strategic workforce planning in the coming years.

The plan outlines priorities to ensure that the Agency attracts and retains a capable, efficient and effective workforce. In 2019 workforce planning led and developed seven areas of focus through seven portfolios, which included portfolios for Recruitment, Supply, Retentions, Capability, Organisational Design, Workforce Planning process, and Governance.

In conjunction with our internal focus, the Agency will continue to work collaboratively with other public-sector agencies, detailed within the plan, to develop innovative workforce initiatives to build capacity.

Under the Supply portfolio, HR continued to have ongoing engagement with third-level providers and the Social Work Education Group to formally advocate increasing the supply of social workers to maintain and increase graduate levels through various initiatives. In addition, Tusla piloted bursary scheme.

Under the Governance portfolio of the Strategic Workforce Plan, two governance fora were established with agreed roles, responsibilities and protocols, with the reporting groups relating to retention, recruitment and third-level liaison. Metrics to measure the progress on the Strategic Workforce Plan and report format for the Workforce Steering Group were agreed.

Voice of Young Person: CRS
DNE:

"the best thing that ever
happened to me was
moving in here, this is my
home"

"I have never felt listened to
like I do now"

Human Resources services achieved the completion of **Business Plan 2019** actions under **Strategic Objective 6**, in addition to the above, including the following:

- Development and establishment of Tusla Occupational Health services in March 2019;
- Development of the Equality Diversity and Inclusion service, with vision Charter for Equality, Diversity and Inclusion within the Agency launched on World Day for Cultural Diversity, May 2019;
- Successful negotiation and implementation of the Out-of-Hours Service for foster carers with our staff partners;
- Further improvement of operational processes to identify opportunities for simplification and standardisation from an end customer/user perspective;
- Enhancement and further development of HR data and management information to support and drive operational decisions;
- Continued participation in the National Strategic Framework for Health and Social Care Workforce Planning to inform and support internal decisions regarding resource deployment.

Voices of Young People CRS
West:

“staff are very nice; I can talk to them if I have a problem’

“The staff help you when you are upset and help you to find a way to sort it”

“I feel safe”

3.3. Finance

Financial services support the Agency in providing its services effectively, efficiently and within the allocated funding, and are responsible for managing the accounting, treasury and financial reporting operations of the Agency. Finance reports on the financial expenditure and cash position of the Agency to both internal and external stakeholders. Through business partnering, Finance supports the performance management of the Agency and the business planning process, develops and manages internal controls designed to mitigate risks, and oversees the implementation of the financial governance requirements of the Agency.

Financial services achieved the completion of **Business Plan 2019** actions under **Strategic Objective 6**, including:

- Continued development of ICT processes and procedures for reporting, monitoring and risk management;
- An analysis and assessment of business and customer requirements/activities across all categories of expenditure and areas including customer need;
- Centralisation of cross-function savings ensuring that strategic analysis provides better value for money and redirection of savings to other services;
- Development of project scopes for relevant ICT systems and issuance of respective procurement requests for quotations (RFQs);
- Development of the Finance Strategy 2019–2021;
- Provision of financial analysis for selected assessments.

3.4. Estates

Tusla Estates supports core activities by managing the delivery of the annual Capital programme, as well as those of Property Management, Fire Safety and Infrastructural Risk services.

In 2019 Tusla Estates presented an Estates strategy, ‘A vision for Tusla Estates’, a seven-year strategy which recognises that an expanding workforce, a changing ethos, and a large proportion of buildings which are unfit for purpose have

combined to create something of an accommodation crisis for Tusla, which in turn has created an urgent need to develop a strategy to confront this challenge. The resulting Tusla Estates strategy will seek to address these issues by proposing an ambitious building procurement programme involving direct capital provision and leasehold acquisitions, as well as an effective delivery model. The intention is that these measures will in time result in the transformation of the physical environment in which Tusla delivers its services, by achieving a consistently well-utilised, high-quality and well-managed estate.

It is intended through the implementation of this strategy that comfortable, sustainable and safe buildings that serve and accommodate the public and staff in a relaxed, welcoming, nurturing and caring environment will be provided. It also aims to deliver physical infrastructure that meets current statutory requirements and standards, and to optimise, and if necessary rationalise, the use of Tusla buildings so that limited resources are used in the most efficient and effective way.

3.5. Legal

Tusla Legal Services provides specialist legal services and support to Tusla services in all areas of child care law and corporate advice. Legal Services also monitors and reviews the area of legal costs generally and in particular the fees of Tusla's member firms, the Agency's counsels fees and GAL expenses in order to reduce the Agency's legal costs. A legal training programme is provided by Legal Services to staff nationally in various areas of law that are relevant to their workload. This training is provided on a continuous basis throughout the country.

Legal Services achieved the completion of a number of **Business Plan 2019** actions under **Strategic Objectives 5 and 6** which included:

- The continued development and implementation of the Legal Knowledge Management System within Tusla;
- The implementation and provision of a client-focused and service-tailored national legal training programme to approximately 500 staff;
- The review and analysis of legal costs due for discharge;
- The achievement of legal cost savings through full implementation and adherence to procurement processes and contracting with Tusla member firms, the negotiation of all orders for costs obtained against Tusla and the review of counsel fees protocol, and amendment of fees where required.

In addition to these achievements, and through the work of Tusla Legal Services, the following outcomes and achievements were also realised:

- There was a positive outcome with a Workplace Relations Commission (WRC) equality case which was heard in June 2019, the adjudication decision issued in October 2019. This was a discrimination case where a separated father alleged that the Child and Family Agency had discriminated against him with regards to communication about his child on the basis of gender and family status. The adjudicator's conclusion was, 'On a most careful consideration I could not see any substantial evidence that would sustain a case of Discrimination on Gender or Marital/Family status grounds.'
- Tusla Legal made considerable progress in seeking to obtain citizenship rights for children in care. We have increased our provision of advice and representation in relation to immigration cases, currently approximately 40 cases. While applications for naturalisation remain a difficulty, with the Irish Naturalisation and Immigration Service (INIS) refusing to process applications signed by social workers, we have seen increased speed in replies from INIS in relation to applications for permission to remain.
- Following on from the recruitment of a Knowledge Management Officer in 2018 who established a knowledge management system within the Legal Directorate which is assisting in faster response times for providing legal

advices and allows for more detailed and comprehensive advices. Where required, the following knowledge management tools have been introduced to assist staff with legal queries:

- **Launch of Helpdesk on Jitbit:** Tusla Legal moved its helpdesk from operating simply on Outlook to the same software used by the IT helpdesk system – Jitbit. This move provided the legal office with more oversight of the queries receive and with KPIs on a number of areas.
- **Launch of Legal Newsletter:** The new quarterly Agency-wide newsletter, launched in 2019, has received some great feedback on its first issue and has made the legal office more accessible and identifiable to the wider staff of the Agency while at the same time providing important updates which might otherwise be missed.
- There has been a significant increase in wardship applications being taken by the Child and Family Agency from commencement to finish, and these have been managed successfully within the legal office. The significant rise in applications is because the social workers in conjunction with the court-appointed Guardian Ad Litem have become aware of the necessity to protect a minor who is ageing out and cannot look after themselves or their affairs. It is a very welcome development as it ensures the continued protection of a vulnerable child who is predominantly in the care of the Child and Family Agency; this is generally brought about on foot of an application by the Child and Family Agency and on notice to the Health Service Executive.
- The legal office streamlined the Section 20 report request process in 2019 to deal with all Section 20 report requests nationwide. Each court office in Ireland was advised to email the legal helpdesk with the request for any area in the country and a database was created to track and monitor Section 20 activity. This streamlining of the process allows for little errors occurring whereby the request is not received and the court deadline is not adhered to.

3.6. ICT

2019 saw a €9m investment in ICT Services with over 50 ICT projects being delivered. ICT services are delivered through a number of units which support the following aspects of ICT:

Applications: Sourcing and developing innovative applications that support the work of Tusla and assist staff in maximising the use of technology to work efficiently and effectively;

Infrastructure: Developing and maintaining a technical infrastructure that is secure, highly available, fit for use, and which provides users with the devices and connectivity required to enable them to readily access the systems and information they require;

Service Delivery: Enabling Tusla ICT to become self-sufficient in the delivery of ICT services to users. The unit has established a quality-driven function providing the following services: ICT request fulfilment, helpdesk support, change management, incident management and problem management.

Strategy & Design: Focusing on business relationship management, strategy, service improvement, policy and compliance, portfolio management, security and risk management.

ICT Services achieved the completion of a number of **Business Plan 2019** actions under **Strategic Objective 6**, which included:

- Extension of the Tusla portal to support school age services registration, school age childminder service, early years inspection registration;
- Continued support of the development of the National Childcare Information System;
- Continued implementation of solutions to replace the current paper-based internal processes in existence across Tusla with end-to-end digital alternatives;
- Development and implementation of Phase 1 of a case management solution to support the management of retrospective referrals and residential services;
- Development of an e-archive infrastructure to support the digitisation and storage of historical childcare records;

- Development and progression of the implementation of a data management plan;
- Adoption of the Build to Share information management systems;
- Progression of Tusla’s role in the overall enhancement of management of data across the public service in line with the vision of a national data infrastructure, the Open Data initiative and the public service ICT strategy Data as Enabler pillar;
- Establishment and management of the incident- and problem-management functions in line with best practice to ensure that, should an event occur, normal service operations are restored as quickly as possible with minimal business impact;
- Provision of ongoing support to plan and coordinate ICT service elements for new offices and relocations;
- Publication of service delivery metrics on a monthly basis for distribution to business stakeholders and the Tusla Executive;
- Completion of service reviews with customers to seek to provide continuous service improvement;
- Build and operationalisation of Tusla data centre in Brunel, including on-premise server and storage environment, perimeter security environment, on-premise security environment, on-premise identity environment;
- Build and operationalisation of Tusla Disaster Recovery and Infrastructure Business Continuity sites and services;
- Continued migration of Tusla systems and data from Health Service Executive (HSE) domains to the new Tusla management environment;
- Commence migration of Tusla user accounts and email from HSE domains to the new Tusla management environment;
- Implementation of device management systems to monitor, control, secure and configure servers, mobile devices and laptop/desktop devices covering updates, control, auditing and antivirus;
- Engagement between the ICT Directorate and social work teams, including key social work programmes and initiatives;
- Regional implementation of all new ICT systems;
- Continued management and administration of ICT financial processes and governance of ICT budget;
- Continued management and operation of the Tusla ICT Project Office in providing a structured and supportive approach for new project requests, as well as coordination and oversight;
- Planning of the Tusla ICT Strategy 2020 –2022.

The achievement of these actions has resulted a significant number of outputs, including:

- The enablement of over 3,800 staff with laptops, smartphones and MiFis;
- 51 objectives being established under the Tusla Data Strategy 2019–2022;
- Four new Tusla data sites being published;
- 536 datasets published as open data;
- 20 new ICT systems provisioned in 2019;
- 29 of 32 objectives in the ICT Strategy 2017–2019 being successfully delivered;
- An ICT audit of over 200 sites;
- 11,227 NCCIS support calls being managed in 2019;
- Six new offices connected to the network and fitted out with ICT equipment;
- The enhancement of the ICT helpdesk to cover the majority of ICT support requests;
- Over 20,000 reporters and providers using the portal to engage digitally with Tusla;
- Over 40,000 referrals, registrations, applications or other types of submission made online to Tusla in 2019.

3.7. Corporate Services

Tusla Corporate Services serve a vital role in overseeing and delivering a number of critical support functions, including Health and Safety, Workforce Learning and Development, Data Protection and Freedom of Information. In 2019 Corporate Services and the Office of the Chief Executive delivered a range of initiatives across these functions as follows:

Data Protection (Including FOI)

In 2019 Tusla continued to implement significant data protection measures to further enhance its existing organisational controls to protect its personal data. These enhancements have been implemented via a dedicated GDPR programme of work. This programme continued its work in 2019 delivering a wide range of critical data protection enablers to ensure Tusla progressively maintained compliance with the GDPR. Tusla will continue to embed its data protection operating model throughout 2020 and 2021 and the Agency is deeply committed to protecting the sensitive data of the families and children it works with.

In the performance of its statutory functions, Tusla handles significant volumes of sensitive personal data in both paper and electronic form. Given the nature and volume of data collected, stored and processed, it is vital that Tusla protects this data and reaches compliance with all relevant legislation, including the Data Protection Act 2018; the General Data Protection Regulation (GDPR); and the Freedom of Information Act 2014.

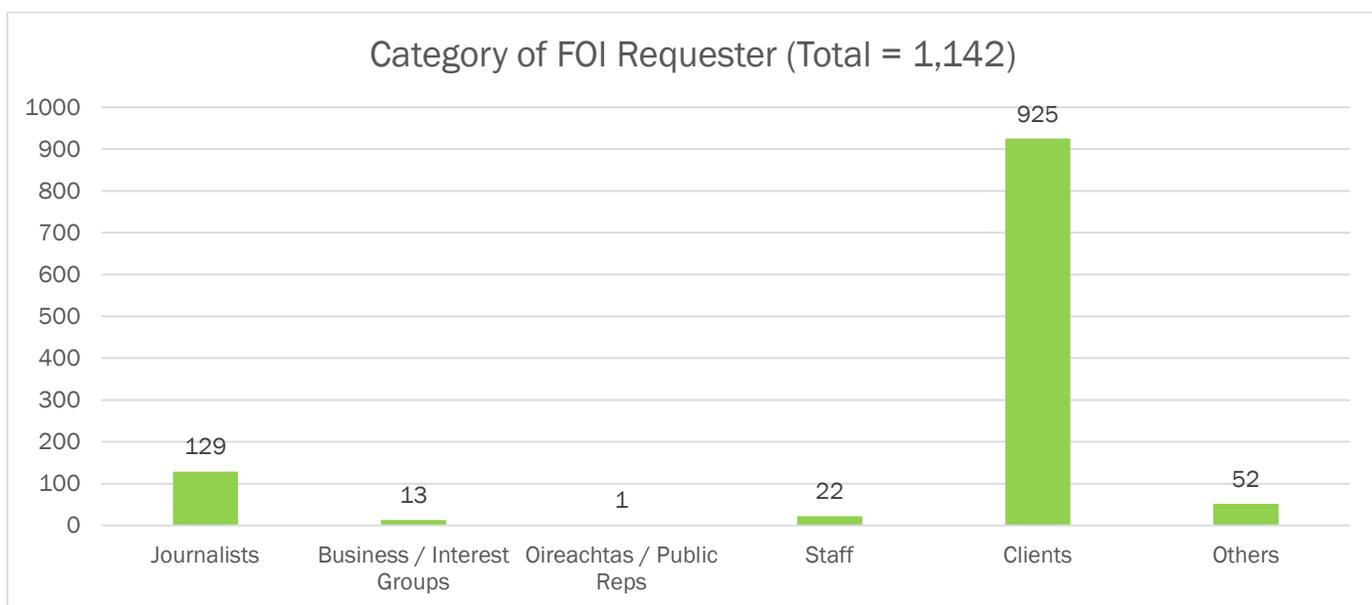
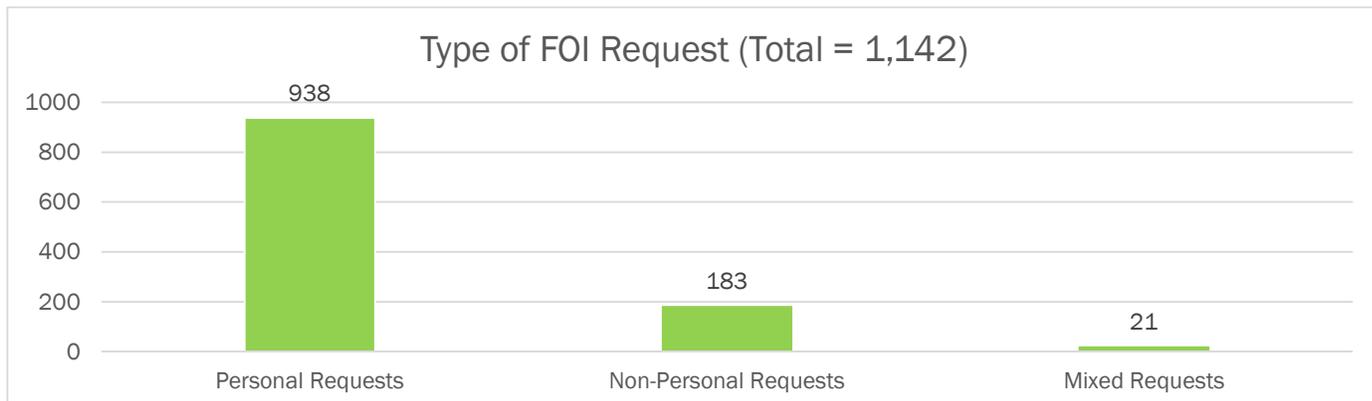
Tusla's Data Protection Unit leads the transformation of data protection capability in Tusla, and provides day-to-day operational support Tusla for its compliance activities (e.g. breach management, responding to data subject access requests, managing corporate FOI requests).

The unit's main focus is on enabling and mobilising broader service units/functional areas to maximise compliance with relevant data protection and FOI regulations.

The Data Protection Unit achievements in 2019 included:

- Recruitment of a permanent Data Protection Officer (DPO) and a number of other technical specialist roles to assist Tusla with its compliance activities, including the planned recruitment of a network of privacy officers who will be focused on driving data protection compliance in each local Tusla office;
- Ongoing regulatory engagement with the Data Protection Commission (DPC) and the Office of the Information Commission (OIC) to provide a continued demonstration of commitment from the Agency towards its regulatory obligations.
- Process improvements made to core business processes and standard operating procedures have been further refined (e.g. for breach management or subject access requests).
- Support provided to the Agency for a number of high-priority compliance activities, such as the completion of Brexit Impacted Data Sharing Agreements and Data Protection Impact Assessments for high-risk activities;
- Staff training and awareness activities, with a dedicated GDPR+ training programme and resource hub to assist staff with understanding their statutory obligations and provide resources to support them in their compliance activities;
- Commencement of Phase 2 of the GDPR+ Programme, which has transitioned from a 'Design and Mobilisation' phase to an 'Embedding' phase. This strategic programme is focused on the refinement of and enhancements to data protection systems and procedures.

In 2019, a total of 1142 FOI requests were received, detailed as follows:



A total number of 284 subject access requests were received in 2019. The number of personal data breaches recorded in 2019 was 130. Tusla investigates each data breach and ensures that immediate remedial action is taken and that the rights of individuals are protected.

Health and Safety

The National Health and Safety (H&S) Department provides expert advice and support on all matters of health and safety management relevant to the Agency and to the establishing and overseeing of the implementation of a robust safety management system in accordance with the Safety, Health and Welfare at Work Act 2005 and associated regulations.

In 2019 the Health and Safety Department's achievements included:

- An eLearning Module launched in March 2019 to raise H&S awareness amongst Tusla employees with 3,808 eLearning module courses completed;
- H&S site-specific safety statements developed, assisting line managers to implement a H&S management system locally;
- Safety Management System plan drafted and presented to the Senior Management/Senior Leadership Team for approval;
- Organised and rolled out regional and local H&S team briefings;
- Fire safety briefing sessions delivered by the Health & Safety team throughout Fire Safety Week in October 2019 to raise awareness around fire safety in the workplace;
- Organised and rolled out Driver Safety Week in conjunction with the Road Safety Authority (RSA) in July 2019 with eight driver safety briefing sessions delivered by RSA Road Safety Officers and two RSA shuttlebus events at Nexus, Blanchardstown and Tullamore.

This work in 2019 has progressed the achievement of the Health and Safety Department commitment under **Strategic Objective 6** in **Business Plan 2019** to raise awareness around health and safety in Tusla.

Workforce Learning and Development (WLD)

Workforce Learning and Development (WLD) provides leadership for the development of a learning culture within the Agency by contributing to strategic developments within Tusla and supporting the participation of staff in a broad range of applied learning and development activities.

In 2019, WLD achieved a number of actions including:

- The delivery of wide range of standardised and bespoke training interventions across all regions;
- Increased usage of online training with the development of Tusla programmes to support Health and Safety, Complaints Management, Caseload Management and Hidden Harm (an interagency initiative with HSE);
- Transition to online bookings of classroom training.
- Delivery of 619 learning events with attendance of over 9,000 persons;
- Streamlining of NCCIS training within the department;
- With a WLD Manager assigned to Signs of Safety, the recruitment of further Learning and Development staff was completed, allowing for increased internal capacity to deliver training and support implementation;
- Advanced and targeted training provided to staff involved in court cases, e.g. Early Years Inspectorate;
- Establishment of a Digital Learning team to project-manage the development of digital learning approaches by WLD;
- Ongoing support provided to embedding of PPFs practice within Tusla and with partner agencies;
- Learning and Development support provided to a range of projects, e.g. CASP, Permanency Planning, Out-of-Hours Service, Assessment Consultation and Therapy Services (ACTS), Multiple Adverse Childhood Experiences Service (MACES) and Tusla-Gardai joint protocol.

The following table details the number of online training completions and classroom trainings in 2019:

Training Module	Total
	Completions
Caseload Management	88
CF in Action	618
Complaints Handling in Tusla	2903
Health and Safety Awareness for Tusla Staff	3959
Implementing Children First	867
Introduction to Children First (2017)	943
Introduction to PPFS	237
Total January to December 2019	9615
Classroom Training Attendances 2019	
Courses run	Total Attendance
619	9037

3.8. Communications

The role of Communications is to support and promote greater awareness of the entire range of Tusla services, internally and externally. Communications is also responsible for promoting the extensive role that Tusla and its partners play in the delivery of those services, and the positive experiences of many service users. It achieves this through proactive engagement with external stakeholders and partners (e.g. the public, DCYA, other government departments, statutory agencies and all commissioned service providers), and through internal communications, ensuring stakeholders and staff are fully informed of key initiatives in a consistent and timely manner. The Communications function seeks to ensure consistent and informative messaging, to develop and expand media relations, and to improve public confidence through greater awareness and branding.

In 2019, the Communications team was involved in over 40 projects across the Agency, including leading, managing and delivering all aspects of the integration and rebrand of Tusla's Educational Welfare Service to 'TESS' (Tusla Education Support Service).

During the course of the year, the Communications team managed over 500 media queries.

The Communications team delivered two national public awareness campaigns in 2019 for Tusla services: the second annual Tusla PPFS (Prevention, Partnership and Family Support) National Child and Family Support Week took place in May, and the Agency's first fostering public awareness and recruitment campaign, Tusla National Fostering Week, took place in October.

The Communications team closely supported the planning and development of regional engagement activities with TDs, senators and local public representatives. The first two regional engagements took place in the South and West regions in 2019. In the last quarter of the year, an Oireachtas open day was held to promote further engagement with public representatives.

The Tusla website had new content delivered across 670 webpages to support Tusla services. The website was viewed over four million times in 2019.

Over 230 internal newscasts were issued during 2019 to keep Tusla staff up to date.

The Communications team provided technical support for the development of the Changing Futures website, which was created entirely by young people who have used Tusla services to help and inform other young people through child- and young-person-friendly content.

Overall results in 2019 show that the communications team has further developed tools and techniques to facilitate consistent work practices, to ensure that communications across the Agency are consistent with Tusla values. A much stronger emphasis was placed on augmenting local and regional-level presence of the proactive work being done by Tusla around the country, in every community.

3.9. Strategy & Business Planning

The Strategy & Business Planning Unit (SPU), responsible for providing strategic planning support, systems and processes for the development and management of the triennial corporate and annual planning cycles, achieved the completion of a number of Business Plan actions under **Strategic Objective 5** which included:

- The production of the 2020 Estimates proposal;
- The production of Business Plan 2020;
- The provision of quarterly updates to the Board and DCYA to monitor the implementation of Business Plan 2019;
- The incorporation of all relevant programmes including the transformation programme and the development and mainstreaming programmes into the Business Plan.

In addition to this, the SPU implemented the use of an IT solution to monitor the progression of Business Plan actions and provided more succinct reporting to the Executive, Board and DYCA. The unit also carried out a due diligence to assume responsibility for the development of the Annual Report from the QA Directorate. Approval was also received to progress the development of Corporate Plan 2021–2023 ‘in house’ and utilising project management methodology the unit will progress this development in 2020.

3.10. Programme Management Office (PMO)

The PMO is the centralised, coordinating PM function within Tusla that provides a focal point for the field of programme and project management as well as a business process improvement service. The PMO achieved the completion of a number of **Business Plan 2019** actions under **Strategic Objective 1**, including:

- The compilation of a comprehensive Tusla-wide Programme and Project Register;
- The matching of all programmes and projects to Business Plan actions through the SPU;
- The production of monthly reports showing key milestones, risk and issues and dependencies, allowing for prioritisation;
- The extension of the Project Management training course (through engagement with Dublin Business School) with 24 staff achieving the Advanced Diploma in Project Management;
- The delivery of Lean White Belt training to 283 staff;
- The development and delivery of Lean Yellow Belt training to 26 staff.

Having completed two full years of operation, 2019 saw the consolidation of the PMO within Tusla and, with the completion of a number of strategically significant projects, a greater awareness of the role and benefits of a PMO. Examples of effective joint working included the EWS rebrand as TESS, the launch of the Barnahus initiative, the development of the Workforce Plan, planning for Brexit and support for CASP implementation.

2019 also saw a greater focus on building project management capability across Tusla through the PMO's training activities with business improvement as their focus.

3.11. Policy and Research

The Policy and Research Office provides a specialist advisory function to the CEO and senior management team to inform long-term strategic planning and the development of key policy actions to achieve the organisation's strategic objectives in the areas of Child Protection and Welfare Policy, Alternative Care, Family Support and Social Inclusion and National Garda Liaison. In addition, it manages and coordinates all research activity across Tusla. The Policy and Research Office achieved the completion of a number of Business Plan actions under **Strategic Objectives 3, 4 and 5** which included the following:

- Continued promotion and support of a safe care and learning environment within residential care through the utilisation of the National Research Office (NRO)/Significant Event Notification (SEN) team analysis and SEN incidents and young person profile;
- Provision of information with regard to the delivery of Tusla services to minority ethnic groups including children from the Traveller and Roma communities, through the exploration and identification of ethnic identifiers;
- Further development of the work plan to support Tusla's 24 Research and Information Mentors;
- In conjunction with the DPO and Tusla legal services, further development of a joint Data Sharing Protocol between Tusla and An Garda Síochána (AGS) and completion of a joint review between AGS and Tusla to optimise joint training;
- Supporting Tusla, the DCYA and Minister on the decision-making and implementation processes arising out of the NUIG report on the feasibility of conducting a longitudinal study on children in care or children leaving care within the Irish context.

In addition to the above, the following achievements were realised under the following policy and research areas.

Policy

Child Protection and Welfare Policy and Interagency Working

The Policy Manager led out on the development and publication of Child Protection and Welfare Handbook 2 in 2019, for the use of frontline social workers, their line managers and other professionals. This handbook is the culmination of extensive collaboration between Policy and operational staff. Child Protection Policy also led out on and supported the development of number of practice guidelines and procedures in 2019 that included Joint Child Sexual Exploitation Guidelines with AGS, guidance on case closure, and a review of case transfer policy. Child Protection Policy led out on the completion of the multi-agency interdisciplinary working group who worked diligently to finalise the Interagency Agreement outlining the joint working approach to child sexual abuse services through the Barnahus model. This Interagency Agreement was integral to the establishment of the pilot Barnahus launched in September 2019. Work was also completed on the Child Abuse Substantiation Procedure and Guide.

Alternative Care Policy and Interagency Working

The Policy manager, jointly with Operations, led out on the development of the Pathways to Permanency Handbook and Permanency Policy, which involved extensive national consultation with approximately 500 operational staff in relation to handbook and policy. They also led and supported the development and approval of a suite of policies for special care and a consultation process to support same. The Agency also finalised its policy position in respect of an adoption maintenance allowance. In terms of interagency working, Alternative Care Policy worked with EPIC to approve and circulate materials developed by Children's Fora, including a calendar, information leaflet and children in care dictionary. A toolkit for developing Children's Fora was also published in conjunction with Operations.

Family Support and Social Inclusion

This policy function was established at the latter end of 2019 and since then it has been focused on leading national working groups for family homelessness and establishing ethnic data collection. The Child Migration Action Plan review was also completed.

National Joint Tusla Garda Liaison

In 2019, work was completed on the Joint Tusla Garda Protocol for Specialist Interviewing of Children. An initial review of the operation of the Tusla/AGS senior local management liaison forums under Children First was also completed.

Research

Published Research

In 2019 the following research was published:

Exploring Ethnic Data Collection for the Child and Family Agency. Since publication a working group has been established led by the Policy Manager for Family Support and Social Inclusion to progress recommendations.

A Review on the Availability and Comparability of Statistics on Child Protection and Welfare, including Children in Care, collated by Tusla: Child and Family Agency with statistics published in other jurisdictions. In December 2019, the DCYA held a seminar where Professor John Canavan shared the findings of the research. Both reports have been published and are available on www.tusla.ie/research.

The Feasibility of Conducting a Longitudinal Study on Children in Care or Children Leaving Care within the Irish Context. Agreement was subsequently reached on a joint approach between Tusla and DCYA to progress the findings of the report.

Research and Information Mentor Strategy 2018–2020:

This year was a year of consolidation and ongoing support by the National Research Office (NRO) with their assigned Research and Information Mentor, regional events, and a National Network Day in October 2019. This included presentations by Dr Niamh Flanagan from NUI Maynooth and Dr Desmond O'Mahony from the Economic Social Research Institute (ESRI). The National Network Day also provided mentors with an opportunity to share their learning. A thematic report and a progress report were produced, highlighting the activities, benefits and future plans for the strategy.

Development of an Independent Research Ethics Committee (REC)

An action of the Corporate Plan 2018–2020 was to establish an independent Research Ethics Committee for the Agency by the end of 2018. As this project was delayed, it was agreed in 2019 that the National Research Office would establish a project planning group with PMO support to establish an independent REC for the Agency by 2020. In 2019 the National Policy Oversight Committee (NPOC) approved the REC standard operating procedure and REC standard application form; HR supported the external advertisement of an independent REC Chairperson; and consideration was given as to how members of the public could be recruited onto the REC using a Public Patient Involvement (PPI) approach.

Policy Development within the NROs: As part of the policy development function with the NRO, the following policies, procedures and guidelines (PPGs) were approved and developed:

- Research Ethics Committee Standard Operating Procedure
- Research Ethics Standard Application Form
- Research Dissemination Policy and Procedure
- Open Science Reference Paper and summary report
- Guidance for Child and Family Agency staff on determining when research ethical approval is required (developed; for approval in 2020).

Staff Survey: Preparation also began on the review of the first CPWS staff survey. Work was undertaken with NUI Galway to understand a range of staff feedback reports so that the second staff survey could respond to any new questions arising for staff. There was also agreement to circulate the survey to all staff groups in an effort to understand how whole-system implementation was impacting the organisation as a whole. The second staff survey, led out by CEO Bernard Gloster in October 2019, was responded to by over 1,400 staff, which is of great value to the organisation in terms of hearing the staff perspective and responding to their needs.

Child Research Study: A Child Research Study working group was established to oversee the development and implementation of an external small-scale research project with the following elements:

- A point-in-time capture of young people’s experiences of CPW services;
- A cohort of young people (10 years and over) who have experienced initial assessment and/or Child Protection Conferences (CPC) or are open cases to Child Protection and Welfare (CPW) in the last 12 months.
- Research questions that focus on their experience of service, participation in decision making and participation in safety planning.
 - Do children and young people understand why there is a need for a Tusla worker to be involved with them?
 - Do they know or understand what Tusla is worried about and why they are involved with the family?
- A reflection on the Signs of Safety (SOS) tools used by practitioners and experienced by the children will form part of the scope.

Evaluation of CPWS: A proposal to develop a logic model for the external evaluation of CPWS was initiated. Work will continue into 2020. To support the tendering process, advance notification went out to all academic institutions in Ireland and to two existing research panels in the Ombudsman for Children’s office and the DCYA.

3.12. Office of the Chief Executive Officer

The Office of the Chief Executive Officer (OCEO) is responsible for all the functions and activities of Tusla. In 2019, new CEO Bernard Gloster took up post and embarked on a significant programme of engagement with service users, staff and other key stakeholders. A system of performance conferences was also established, to be rolled out in Jan 2020. In addition to this, the OCEO also holds responsibility for the Parliamentary Affairs Division.

Parliamentary Affairs

Tusla’s Parliamentary Affairs Division (Tusla PAD) continued to manage the Agency’s interactions with DCYA and the Oireachtas by organising, developing and monitoring the efficient conduct of Tusla’s parliamentary affairs. This included coordinating responses to Parliamentary Questions, representations, oral day questions, topical issue debates, joint

committee and leader's questions, as well as maintaining records and preparing performance reports. Tusla established a dedicated email address with respect to parliamentary affairs: tuslapad@tusla.ie. As the work of Tusla PAD is deadline driven, all Parliamentary Questions and representations are acknowledged on receipt, with every effort made to issue responses within the required timeframes. All responses are quality assured by the Office of the Chief Executive.

A key challenge and achievement for Tusla PAD in 2019 was the introduction and implementation of a new electronic, paperless system to manage Parliamentary Questions (PQs). ePQ is one of the applications provided by the Office of the Government Chief Information Officer under the Build to Share programme. ePQ tracks, manages and responds to parliamentary questions through a user-friendly SharePoint interface. Government departments have been using ePQ for quite some time now but Tusla has been one of the first government agencies to implement the system. ePQ is part of the innovation and digitalisation programme being delivered under the Tusla ICT Strategy and ICT and Corporate Services were key supporters of the implementation project led out by Tusla PAD.

Implementing the ePQ system in Tusla was a significant project and a new way of working for Tusla managers. A successful pilot was conducted and training and guidance material provided to over 100 users. The project will continue into 2020 when it is anticipated ePQ will be successfully rolled out to the organisation in full.

PAD also worked with the Tusla Communications team to prepare and deliver a programme of public/political engagement with successful events in Cork, Galway and Dáil Eireann.

A breakdown of responses issued by Tusla PAD is listed below:

PQs/ Representations in 2019

Quarter	Parliamentary Questions	Representations	Total
Q1	96	82	178
Q2	76	96	172
Q3	79	116	195
Q4	125	123	248
Total	376	417	793

4. Tusla Board, Executive and Corporate Governance

Corporate Governance comprises the systems and procedures by which organisations are directed, controlled and managed. Tusla is committed to achieving the highest possible standards of corporate governance. The Agency, in pursuit of its governance objectives, has adopted the Code of Practice for the Governance of State Bodies (2016) and put procedures in place to seek to ensure compliance with the Code. The Code of Practice for the Governance of State Bodies 2016 sets out the standards of good practice in relation to Board leadership, effectiveness and accountability, and takes account of governance developments, public sector reform and stakeholder consultations. The Board is accountable for the proper management of the Agency and is strongly guided by the principles set out in the Code in meeting its responsibility to ensure that all activities meet the highest standard of corporate governance. The structure of this report broadly follows the key principles identified in the Code of Practice for the Governance of State Bodies 2016.

4.1. Leadership and Effectiveness

The Role of the Board

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

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

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

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

Board Composition and Structure

The Child and Family Agency Act 2013 makes provision for the appointment of a Chairperson, Deputy Chairperson and seven Ordinary Board Members. Board members are appointed by the Minister for Children and Youth Affairs, with the consent of the Minister of Public Expenditure and Reform. Board members are appointed for a term of office ranging from three to five years.

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

The Board is required to hold a minimum of 10 meetings per year, in accordance with the Child and Family Agency Act 2013; 12 meetings took place in 2019. A detailed report on the composition of the Board, its membership, committees,

schedule and attendance at Board and committee meetings in 2019 is contained within the Governance Statement and Board Members' Report within the Annual Financial Statements (**Part II**) of this report.

CEO and Executive Team

The Board delegates the day-to-day management, control and direction of the Agency to the CEO except for the specific functions it reserves to itself. Oversight of decisions, which are delegated by the Board, is retained through a robust reporting framework involving the Board committee structure, CEO and Executive Team. In 2019 the Senior Management Team was expanded into the Senior Leadership Team to include Regional Directors. In September 2019 the Board appointed Bernard Gloster as the CEO.

Member of Executive	Role	Senior Management Team (SMT)	Senior Leadership Team (SLT)
Bernard Gloster	CEO (from 16 September 2019)	✓	✓
Jim Gibson	COO	✓	✓
Pat Smyth	Interim CEO (up to 16 September 2019)	✓	✓
Pat Smyth	Director of Finance	✓	✓
Eoin Sheridan	Interim Director of Finance (up to 16 September 2019)	✓	✓
Colette Walsh	Director of HR (resigned 7/10/2019)	✓	✓
Kim Hayes	Interim Director of HR (appointed as of 11/10/2019)	✓	✓
Brian Lee	Director of Quality & Assurance	✓	✓
Cormac Quinlan	Director of Transformation and Policy	✓	✓
Laura Slevin	Director of Corporate Services	✓	✓
Pamela Benson	Director of Legal Services	✓	✓
Fergus O'Cuanchain	Director of ICT	✓	✓
Alan Breen	Head of Communications		✓
Linda Creamer	Service Director, DNE		✓
Patricia Finlay	Service Director, DML		✓
Dermot Halpin	Service Director, South		✓
Aisling Gillen	Service Director, West		✓
Donal McCormack	Service Director, Residential Services		✓
Noel Kelly	Director, TESS		✓

Fiona McDonnell	National Service Director Children's Services Regulation		√
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Board Effectiveness

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

In 2019 the Board undertook a project to enhance the Board's planning and reporting schedule following a review in 2018/19, encompassing the following deliverables:

- Finalised Board Monthly Work Plan for 2020;
- Integration of Committee Work Plan and Meeting Schedule with Board Work Plan;
- Standardised reporting documentation, including Report Descriptors and Board Reporting Templates;
- Development of guidance document in relation to preparation of Board and committee papers.

In order to develop and maintain its effectiveness, Board members are provided with opportunities to enhance their understanding of the work of the Agency by meeting with Tusla service providers, site visits and invitations to Tusla conferences and events.

In 2019 the Board scheduled a meeting in the Midlands Region and invited local service providers to present on the services provided, challenges and achievements. A site visit was arranged for members of the Service and Quality Committee to Ballydowd Special Care Unit to allow a greater awareness and understanding of Tusla's residential services. Members of the Board attended the Child Youth Participation Programme Conference held in Athlone in April 2019 and the National Signs of Safety Gathering held in Athlone in November 2019.

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

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

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

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

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

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

Tusla has established and maintains procedures for the making of protected disclosures and procedures for dealing with such disclosures. In accordance with Section 22 of the Protected Disclosures Act 2014 Tusla will publish an annual report on the number of protected disclosures received in the previous year and resulting actions.

4.2. Accountability

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

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

Tusla's Code of Governance

The Agency is required under Section 50 of the Child and Family Agency Act 2013 to prepare and submit a Code of Governance to the Minister for Children and Youth Affairs for approval. The Child and Family Agency Act 2013 forms the basis of Tusla's Code of Governance. The work and responsibilities of the Board, Chairperson and CEO are set out in Tusla's Code of Governance, which also contains matters specifically reserved by the Board for decision.

The Board reviews the terms of reference of each of the Board sub-committees on an annual basis, approves the Agency's Standards of Integrity and Code of Conduct and reviews its guiding principles having regard to its statutory functions when developing the Agency's Corporate Plan. The Board reviews adherence to its Code of Governance through ensuring clear lines of responsibility, compliance with Board standing orders and reporting requirements. Tusla's Code of Governance is currently under review.

Oversight Agreement

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

The Oversight Agreement is required to reflect:

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

The current oversight agreement between Tusla and DCYA was approved in June 2019 and will be reviewed at least every three years.

Financial and Business Reporting

In accordance with the Child and Family Agency Act 2013, the Board is required each year to prepare and adopt an Annual Report in relation to the performance of the Agency's functions and approve the Annual Financial Statements (AFS). The Board consider the Annual Financial Statements to be a true and fair view of the Agency's financial performance and its financial position at the end of 2019. The Board members' responsibilities regarding the financial statements are set out in the AFS 2019.

The Annual Financial Statements and Annual Report for 2019 have been drafted in compliance with the Code of the practice for the Governance of State Bodies 2016. The 2019 Annual Report is the sixth Annual Report published by the Agency and the second published under the Corporate Plan 2018–2020.

Board Evaluation of Performance against 2019 Business Plan

The 2019 Business Plan was prepared in accordance with the requirements of Section 46 of the Child and Family Agency Act 2013, and in response to the Performance Statement 2019, issued by the Minister for Children and Youth Affairs to the Chair of the Board.

The Business Plan 2019 sets out an account of what was to be achieved in the year to meet the overall strategic objectives of the 2018 – 2020 Corporate Plan. An update on the implementation of Business Plan 2019 was provided to the Board on a quarterly basis which is detailed under the Business Plan section of this report.

Statement on Internal Controls

The Board acknowledges its responsibility for ensuring that an effective system of internal control is maintained and operated. In 2019 the Board, through the authority delegated to the Audit and Risk Committee, reviewed the effectiveness of Tusla's system of internal control. As required by the Code of Practice for the Governance of State Bodies 2016, the Chair of the Board makes a statement on behalf of the Board to demonstrate the arrangements for implementing a system of governance and financial controls.

Risk Management

Risk management continues to be a key area of focus for the Board, Service and Quality Committee and the Audit and Risk Committee. The Board will keep under review the work of the Service and Quality Committee and the Audit and Risk Committee in 2020 in relation to risk management and their respective responsibilities. A summary of the Corporate Risks and Controls is provided in **Appendix 1 (Part 1)** of this report.

Focus for 2020

In 2020, the Board focus will be on organisational structural reform, development of the Corporate Plan 2021–2023 and continuing implementation of the GDPR Programme.

4.4. Quality and Risk Systems

Ensuring good governance is critical to the effective operation of Tusla in the delivery of high-quality services to families and children. Therefore, the Agency is committed to a robust and systematic approach to quality assurance, information management and risk management that supports robust oversight and internal governance measures across the organisation. This is achieved through the work of the QA Directorate, which is responsible for promoting continuous improvement and effective risk management in services for children and families by:

- Objectively assessing, monitoring and reporting on the quality and safety of services;

- Tracking and driving the reduction of identified risks;
- Providing systems, information and tools that support service improvement.

In 2019, the QA Directorate made progress in developing and enhancing the Agency's quality and risk systems as follows:

Protected Disclosures and Oversight Reporting

In 2019 the Protected Disclosures and Oversight Team, who are concerned with all aspects of protected disclosures, including receipt, preliminary evaluation, investigation, reporting, management of witnesses, terms of reference, and maintenance of relevant policies, procedures and practice, along with tracking recommendations of reports of oversight bodies, such as the Health Information and Quality Authority, the Ombudsman for Children and others, achieved completion of a number of actions committed to in **Business Plan 2019** under **Strategic Objectives 4 and 5**. The completion of these actions resulted in:

- The co-ordination of the Tusla response to the action plan arising from the HIQA investigation into the management of allegations of child sexual abuse against adults of concern by the Child and Family Agency (Tusla) 2018;
- The implementation of a process for central control and oversight of actions (arising from Ombudsman, HIQA, internal QA, etc.)

In addition to this, the team also achieved approval of the revised policy for tracking of national recommendations and implemented an IT system to support implementation of this policy, with 13 trackers going live on this IT system by the end of December 2019. Disclosures were also successfully handled under the Protection Disclosure Policy. One protected disclosure investigation was initiated in 2019, with four other investigations in progress. An audit by the Comptroller and Auditor General (C&AG) in 2019 also resulted in no comments on report for the first time.

Risk and Incident Management

The purpose of the Risk and Incident Management team is to implement and maintain risk and incident management systems within the Agency. The team aims to ensure Tusla is aware of the nature of its risks, their status and how they are being managed. The team's achievements in 2019 included:

- Increased awareness of National Incident Management System (NIMS);
- Phase 1 complete of electronic risk register project with ICT;
Recommendations from National Review Panel (NRP) reports 2011–2018 reviewed and closed off on Tusla National Action Tracker;
- 1,070 incidents reported on NIMS with improvement in number of claims previously reported as incidents (CPRIs) on the NIMS from Level E ($\leq 50\%$) to Level D ($\leq 40\%$);
- 200 staff attended information sessions on Tusla risk management policy;
- 64 staff and policy makers attended two NRP learning events held – one national and one regional.

In 2019 there was an increased awareness of risk and incident management and an increased focus on learning from reviews of serious incidents and child deaths.

Practice Assurance and Performance Systems (PAPS)

In 2019, the PAPS team achieved its primary goal, through the completion of a full programme of practice audits and monitoring visits. These audits, augmented by the delivery of a full suite of performance and activity reports, were critical in providing an independent, internal and objective overview of the overall adequacy and effectiveness of improvements to practice in accordance with the objectives of the Child Protection and Welfare Strategy and Corporate Plan, as well as the Agency's overall governance framework and risk and incident policies. The findings and recommendations from these practice audits are used by operational managers to improve practice, risk management and governance within their respective service areas and to provide assurance to the Tusla Board and Chief Executive in relation to measurable quality improvements to services.

A National Practice Audit Charter, which clearly articulates the mission, scope and role of the National Practice Assurance and Service Monitoring (PASM) Team to review and audit all of Tusla's operational services, was developed in 2019 and a 2019 Audit Plan was formulated, outlining a full programme of thematic practice audits to be undertaken by the PASM Team.

The completion of 111 practice audits and monitoring visits across Tusla's child protection and welfare services, foster care services and children's residential and special care services was achieved in 2019. The PASM Team also undertook three major national audits in relation to the demographic profile of children on the Child Protection Notification System (CPNS) the operation of the child protection service in Reception and Integration Agency centres, and the national implementation of Signs of Safety practice tools. The implementation of a new quarterly audit and HIQA six-monthly summary reporting format for the Tusla Board provided a high-level overview of key themes arising from both the PASM programme of audits and completed HIQA inspections and judgements.

The full programme of practice audits completed by the PASM Team, in line with 2019 Audit Plan, are as follows:

- Child protection and welfare services – 42 practice audits
- Foster care services – 21 practice audits
- Children's residential and special care services – 48 monitoring visits
- Total number of practice audits and monitoring visits for 2019 – 111

The PASM team also completed a further three additional national audits, as follows:

- An examination in the variations in the numbers of children listed on the CPNS by Tusla area, and representations of children according to ethnicity;
- Review of the operation of Tusla's child protection and welfare service in the context of referrals received regarding children resident in Reception and Integration Agency accommodation centres;
- Follow-up to the 2018 quantitative baseline audit of the implementation of Signs of Safety practice tools.

The Performance Reporting and Information Team completed development work on a Service Performance and Improvement Framework by Q2 2019, in line with the requirements of the 2019 Tusla Business Plan. It also completed and published all monthly and quarterly required performance and activity reports on schedule in 2019.

The recruitment of a new Audit Methodologies Manager, to support the PASM Team, was completed in November 2019.

The Performance Reporting and Information Team began the online publication – utilising an open data format – of the Agency's performance and activity data, via the new Tusla Data Hub. This team also completed development work on a new Service Performance Improvement System, which will be used to underpin the new Performance Conference System to be introduced by the CEO in 2020.

Finally, the Standards and Outcomes Function led on the development of a proposal for a new Outcomes Framework for Tusla services and the publication of the 2018 Tusla Annual Report.

Appendices

Appendix 1: Summary of corporate risks and controls

Strategic Objective	Risk Category	Key Risk	Controls and Planned Actions
<p>Corporate Services: To ensure Corporate Services (estates, finance, governance, HR, ICT, legal) are effective in supporting the delivery of Tusla services</p>	<p>Physical</p>	<p>There is a risk to the safety, health and welfare of staff, service users, members of the public and others impacted by the Agency’s activities due to a lack of a compliance with existing health and safety legal requirements and the lack of a comprehensive safety management system.</p>	<p>Controls</p> <ul style="list-style-type: none"> • Requirement for all sites to have an up-to-date site-specific Safety Statement and associated Risk Assessment • Health and safety risks required to be documented and tracked through area and regional Risk Registers • National Health and Safety Department established to provide advice and support to services nationally • Centralised process for the tracking of actions associated with local site inspections from regulatory authorities • National Health and Safety Steering Committee in place • Advising on national and local building risks by the National Health and Safety Department to Tusla Estates on a continuous basis • Increased management and staff awareness of health and safety requirements by ongoing engagement of Regional Health and Safety Advisors with all services nationally • Launch of eLearning module for health and safety awareness for all employees <p>Planned Actions</p> <ul style="list-style-type: none"> • Subject to approval by the SMT, the proposed National Health and Safety Management system is planned for launch • Development of a national strategy for the management of work related violence, aggression and harassment • Development of Health and Safety Policy Programme to address national policy deficits dealing with occupational risk • Development of further (eLearning) health and training modules (line manager module planned for delivery)

<p>Integrated Supports and Services: To implement integrated Agency-wide approaches to all Tusla supports and services, with clear responsive pathways to achieve better outcomes</p>	<p>Service User Experience</p>	<p>There is a risk to the continuity of service delivery for the cohort of young people who require special care services due to the lack of availability of placements as a result of a lack of onward placements for those young people currently in special care. A complexity which may be contributing to the current difficulties is the lack of regulation of the GAL service and capacity issues.</p>	<p>Controls</p> <ul style="list-style-type: none"> ● Active engagement with the DYCA and HR in relation to qualification requirements and recruitment needs ● Ongoing recruitment and rolling job advertisements to fill vacancies ● CPL actively recruiting on behalf of special care service ● Engaging with National Ops re provision and management of onward placements <p>Planned Actions</p> <ul style="list-style-type: none"> ● The outcome of the judicial review will inform future actions that may be required ● SCU plan in development for a step-down unit from special care
<p>Relationships Collaboration and Communication: To develop collaborative relationships, participative practices and effective communications with all key stakeholders to provide a co-ordinated approach to the delivery of services</p>	<p>Compliance and Reputational</p>	<p>There is a risk of reduced public confidence in the Agency due to adverse findings from statutory investigations, inspections and serious incident reviews within Tusla services and associated negative media attention.</p>	<p>Controls</p> <ul style="list-style-type: none"> ● Prompt and effective communication with all internal and external stakeholders ● Continuous monitoring of threats to reputation with individual crisis communication plans ● Prompt and effective communication with all internal and external stakeholders ● Crisis Communication Strategy in place ● Area and regional governance forums in place <p>Planned Actions</p> <ul style="list-style-type: none"> ● Conduct crisis simulation with SMT ● Conduct nationwide internal engagement workshops ● The building in of consideration for potential reputational damage into major strategic and business planning decisions ● Building capacity within the Comms Team ● Internal briefing campaigns held with all staff
<p>Corporate Services: To ensure Corporate Services (estates, finance, governance, HR, ICT, legal) are effective in supporting</p>	<p>Physical</p>	<p>There is a risk of failing to meet statutory obligations and codes of practice for governance due to insufficient organisational and technical measures to support the</p>	<p>Controls</p> <ul style="list-style-type: none"> ● Administrative supports in place with third parties, where possible ● Training and awareness ● Independent reviews conducted with actionable recommendations ● Tusla policies regularly reviewed to ensure continued adequacy of compliance ● Limited Subject Matter Experts in place

<p>the delivery of Tusla services</p>		<p>necessary processes to ensure compliance.</p>	<ul style="list-style-type: none"> ● Programme of work commenced to assist service and functional units with developing and implementing organisational and technical measures to support DP, FOI and PAD compliance ● Operating models for DP, FOI and PAD developed and resourced ● Request for Tender prepared and submitted by Interim DPO for Phase 2 GDPR+ Programme <p>Planned Actions</p> <ul style="list-style-type: none"> ● Recruitment of DPO at level compliant with GDPR ● Approval for requested resources as identified in operating model submitted: DPO; and RFT ● Risk-based phased implementation of DP, FOI and PAD organisational and technical measures by service and function to support compliance
<p>Integrated Supports and Services: To implement integrated Agency-wide approaches to all Tusla supports and services, with clear responsive pathways to achieve better outcomes</p>	<p>Physical</p>	<p>There is a risk to the safety, well-being and welfare of children due to insufficient capacity/resources to meet existing levels of service demand for CPW.</p>	<p>Controls</p> <ul style="list-style-type: none"> ● Children with immediate risk of harm are prioritised ● Tusla Recruit established and new staff for the service have been appointed ● Regular performance monitoring at all levels ● Additional budget allocation for staffing from DCYA ● PPGs in place to support and guide practice ● Engagement with universities in ROI and NI regarding new graduates underway ● Service Improvement Plans in place ● Implementation of Child Protection and Welfare Strategy <p>Planned Actions</p> <ul style="list-style-type: none"> ● Workforce planning process has begun with PWC through HR which will incorporate the above (ongoing) ● Liaison with third-level institutions re. bursaries etc. ● An Unallocated Cases Project team being established. Terms of reference are being developed. Regional Service Director has been appointed as chair by the COO ● Additional resources have been requested through the estimates process for 2019
<p>Corporate Services: To ensure Corporate</p>	<p>Operational</p>	<p>There is a risk to operational service delivery and meeting identified social</p>	<p>Controls</p> <ul style="list-style-type: none"> ● Recruitment plan in place for social work vacancies

<p>Services (estates, finance, governance, HR, ICT, legal) are effective in supporting the delivery of Tusla services</p>		<p>work recruitment (as per Business Plan 2017) due to social work attrition rates and the limited number of available professionally qualified social workers.</p>	<ul style="list-style-type: none"> ● Review of social work panel ● National Transfer Policy ● Continued implementation of Tusla’s continuing professional development strategy <p>Planned Actions</p> <ul style="list-style-type: none"> ● Review of exit interview data to identify areas for improvement for SW retention ● Collaboration with Operations to develop an identified skill-set for multi-disciplinary teams in social work (Q1 2019) in line with Work Force Development, which is to be completed ● Develop a retention strategy and framework for implementation ● Liaison with third-level institutions re. bursaries etc. ● Attendance at National Strategic Framework for Workforce Planning for Health and Social Care (ongoing)
<p>Integrated Supports and Services: To implement integrated Agency-wide approaches to all Tusla supports and services, with clear responsive pathways to achieve better outcomes</p>	<p>Service User Experience</p>	<p>There is a risk to the safety, welfare and well-being of children in foster care, due to inadequate capacity/resources/systems to ensure compliance with national standards for safeguarding.</p>	<p>Controls</p> <ul style="list-style-type: none"> ● Regular performance monitoring at all levels ● Actions in place to ensure children without an allocated social worker can access a social work service, including statutory visits and child in care review and care plan ● PPGs in place to support and guide practice ● Foster care placements are subject to a number of safeguards including ongoing Garda vetting for foster carers and adult family members; regular visits to the household and inspections of fostering services by HIQA ● Working group established to develop the pre-approval model for foster care agencies <p>Planned Actions</p> <ul style="list-style-type: none"> ● Implementation of the Alternative Care Strategy ● Enhancement of the operational guidance for the management of serious concerns and allegations underway ● Pre-approval model to be developed for private foster care providers ● Tusla is extending its out-of-hours social work support to include 24-hour telephone support for foster carers

<p>Integrated Supports and Services: To implement integrated Agency-wide approaches to all Tusla supports and services, with clear responsive pathways to achieve better outcomes</p>	<p>Financial</p>	<p>If future funding for the Agency is not at expected levels it could impact on the effective delivery of proposed services which will result in deliverables outlined in the Corporate and Business Plans not being met.</p>	<p>Controls</p> <ul style="list-style-type: none"> ● The Business planning process for the forthcoming year to take into account the proposed funding, prior to being finalised <p>Planned Actions</p> <ul style="list-style-type: none"> ● Cost control action plan put in place for allocation of services within spend limits ● A prioritisation of services across the Agency will be required for agreement across Directorate
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TÚSLA

An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

Annual Financial Statements

For the Year Ending 31st December 2019

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Information

Board Address:	Child and Family Agency Floors 2-11 Brunel Building Heuston South Quarter Dublin 8	
Members of the Board:	Mr Pat Rabbitte – Chairperson	
	Ms Anne O’Gara – Deputy Chairperson	
	Mr Rory O’Ferrall	(Until 31 st Dec 2019)
	Mr Paul White	
	Ms Deirdre Kiely	
	Mr Sean Holland	
	Mr Liam Irwin	
	Ms Teresa Kilmartin	(Until 30 th May 2019)
	Ms Avril McDermott	
	Ms Patricia Doherty	(From 7 th Nov 2019)
	Mr Charles Watchorn	(From 1 st Jan 2020)
Chief Executive Officer (Interim):	Mr Pat Smyth	(to 16 th Sep 2019)
Chief Executive Officer	Mr Bernard Gloster	(From 16 th Sep 2019)
Banks:	Ulster Bank College Green Branch PO Box 145 33 College Green Dublin 2	
	Bank of Ireland Lower Baggot Street Dublin 2	
Solicitors:	Beauchamps Riverside Two Sir John Rogerson’s Quay Dublin 2	
Auditors:	The Comptroller and Auditor General 3A Mayor Street Upper Dublin 1	
Website:	www.tusla.ie	

Governance Statement and Board Members' Report

The Child and Family Agency (also referred to as the Agency) Board was established on 1st January 2014 with the formation of the Agency under the Child and Family Agency Act 2013. The functions of the Agency are outlined in Section 8 of the Child and Family Agency Act 2013. The Board is accountable to the Minister for Children and Youth Affairs for the performance of the Agency's functions and its own functions as the governing authority of the Agency. The Chairperson accounts on behalf of the Board to the Minister. The Chief Executive Officer (CEO) is responsible for leading the Agency in all of its day-to-day management decisions and for implementing the Agency's long and short term plans. The CEO acts as a direct liaison between the Board and management of the Agency and communicates to the Board on behalf of management.

Board Responsibilities

The Board of the Child and Family Agency is responsible for ensuring the Annual Financial Statements are in accordance with applicable law.

Section 51 of the Child and Family Agency Act 2013 requires the Child and Family Agency to prepare the accounts of the Agency in such form as the Minister for Children and Youth Affairs may direct and in accordance with accounting standards specified by the Minister.

In preparing the Annual Financial Statements, the Board is required to:

- Select suitable accounting policies and apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- Disclose and explain any material departures from applicable accounting standards; and
- Prepare the Annual Financial Statements on a going concern basis unless it is inappropriate to presume that the Child and Family Agency will continue in service.

The Board is responsible for ensuring that adequate accounting records are maintained which disclose, with reasonable accuracy at any time, the financial position of the Child and Family Agency and that the financial statements of the Agency properly reflect the Agency's state of affairs. The Board is also responsible for the maintenance and integrity of the Agency's corporate and financial information on the Agency's website.

The Board is responsible for safeguarding the assets of the Child and Family Agency and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities. The Board approves the Annual Plan and Budget and monitors performance against it.

The Board, considers that the financial statements of the Child and Family Agency properly present the state of the Agency's affairs at 31st December 2019, and its financial position for the year. The Board is responsible for ensuring that effective systems of internal control are instituted and implemented including financial, risk-management, operational and compliance controls and these systems of internal control are reviewed annually by the Board. The Board is also responsible for establishing the Agency's overall strategic direction, ensuring that it operates within the limits of its statutory authority and sets corporate targets recommended by the CEO.

The work and responsibilities of the Board are set out in the Standing Orders, Delegations of Authority and matters specifically reserved for Board decision.

Board Composition and Structure

The Agency Board consists of a Chairperson, a Deputy Chairperson and seven ordinary members appointed by the Minister for Children and Youth Affairs. The Chairperson and Deputy Chairperson were appointed for a period of five years. Members who were appointed by the Minister to be ordinary members of the Board hold office for either three, four or five years. As required by the Code of Practice for the Governance of State Bodies a Board effectiveness review was carried out in 2019 and is set out in the annual report.

The Board is supported in its assurance and oversight of the organisation by its committee structure. The committees assist in the discharge of the Board's responsibilities by giving more detailed consideration to operational, financial and governance issues and reporting to the Board on any decisions or recommendations

The Board in accordance with good practice and in line with the Code of Practice for the Governance of State Bodies 2016 commissioned an external evaluation in 2018. The Board, as part of its effectiveness review, engaged in a detailed evaluation of the operation and responsibilities of its standing committees. The Board reconfigured its committee structure and implemented a new committee structure in May 2019.

New committees established:

- Audit and Risk Committee (ARC)
- Organisation Development Committee (ODC)
- Service and Quality Committee (SQC)

The purpose of the reconfiguration was to enhance the workings of the committees allowing the Board to spend a greater proportion of its time on strategic decision-making, whilst being supported in its assurance and oversight of the Agency.

The scope of the Audit Committee was expanded to include risk management and was renamed the Audit and Risk Committee.

The scope of the Quality Assurance & Risk Committee was refined and renamed the Service and Quality Committee.

The Organisational Development, Remuneration and Succession Committee and the Governance Committee were combined to form the Organisational Development Committee.

In certain circumstances where specialist functions are required the Board will establish special committees with their own scope and terms of reference.

The table below details the appointment period for current members and members who served in 2019.

Member	Role	Appointment Period
Pat Rabbitte	Chairperson	1 st Jan 2019 to 31 st Dec 2023
Anne O’Gara	Deputy Chairperson	25 th Sep 2018 to 24 th Sept 2023
Rory O’Ferrall	Ordinary Member (Chairperson of the Audit Committee, then Chairperson of the Audit and Risk Committee [TOR of restructured committee agreed at Board meeting 30 th May 2019])	1 st Jan 2014 to 31 st Dec 2019
Deirdre Kiely	Ordinary Member	1 st Jan 2017 to 31 st Dec 2021
Paul White	Ordinary Member (Chairperson of the Governance Committee, then Chairperson of the Organisational Development Committee [TOR of restructured committee agreed at Board meeting 30 th May 2019])	3 rd Feb 2016 to 2 nd Feb 2021
Sean Holland	Ordinary Member (Chairperson of the Quality Assurance & Service Committee, then Chairperson of the Service and Quality Committee [TOR of restructured committee agreed at Board meeting 30 th May 2019])	16 th April 2018 to 15 th April 2023
Teresa Kilmartin	Ordinary Member (Chairperson of the Organisational Development, Remuneration and Succession Committee until 30 th May 2019)	16 th April 2018 to 30 th May 2019
Liam Irwin	Ordinary Member	16 th April 2018 to 15 th April 2023
Avril McDermott	Ordinary Member	13 th June 2018 to 12 th June 2023
Patricia Doherty	Ordinary Member	7 th Nov 2019 to 6 th Nov 2024
Charles Watchorn	Ordinary Member	1 st Jan 2020 to 31 st Dec 2024

The Board is required to hold a minimum of 10 Board meetings per year in accordance with the Child and Family Agency Act 2013. In 2019 the Board met on 12 occasions. Minutes of all Board and committee meetings are recorded. Copies of the Board minutes are available on the Agency website www.tusla.ie

Standing items considered by the Board include:

- Declaration of interests;
- Reports from Board committees;
- Management accounts;
- Corporate performance reports;
- Reviews of the risk management framework;
- New and revised policies;
- Reserved matters;
- CEO’s report on operational matters;
- Project updates; and
- Risk Register.

There is ongoing financial and operational reporting to the Board throughout the year. Board papers are sent electronically to each Board member in advance of meetings to allow time to review and consider matters for discussion and decision.

Decisions are made after all appropriate information has been made available to Board members and following due consideration of risks identified through the risk management process.

The Board has a formal schedule of matters reserved for its decision, including:

- Annual Budgets and Corporate Plan
- Annual Reports and Financial Statements
- Contracts and capital projects of a specific value
- All acquisitions and disposal of assets

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

Audit Committee / Audit and Risk Committee

In 2019 the number of meetings held: were as follows:

Committee	Meetings
Audit Committee	3
Audit and Risk Committee	4

The composition of the Audit Committee and Audit and Risk Committee for the year ended 31st December 2019 remained the same and includes three Board members and one external member. The CEO and other members of the Executive attended where necessary.

Representatives of the Comptroller and Auditor General, the Agency's external auditor, attended meetings as required and had direct access to the Audit Committee Chairperson at all times. In accordance with best practice, the committee met with the National Director of Internal Audit and the Comptroller and Auditor General in the absence of management.

The role of the Audit Committee was to report on the effectiveness of internal financial controls and on the progress made in implementing recommendations from internal and external audits and on other financial related matters.

In May 2019 the Board expanded the scope of the Audit Committee and renamed it the Audit and Risk Committee. The purpose of the committee is to assist the Board in fulfilling its responsibilities in relation to the Annual Financial Statements and the system of internal control, to consider and make recommendations to the Board in relation to risk appetite, risk strategy, risk management policies and procedures, and to advise the Board on the effectiveness of internal controls, governance and risk management.

The Audit Committee/Audit and Risk Committee focused on the following matters in 2019:

- Internal control – assisted the Board in fulfilling its responsibilities in ensuring the appropriateness and completeness of the system of internal control, reviewing the manner and framework in which management ensures and monitors the adequacy of the nature, extent and effectiveness of internal control systems, including accounting control systems, thereby maintaining an effective system to review the Agency's statement on internal control systems prior to endorsement by the Board;
- External audit and financial reporting

- Internal audit – reviewed and approved the annual Internal Audit Plan and received and considered reports from the Internal Auditor and management responses;
- Compliance, Protected Disclosures, Fraud – reviewed the Agency’s fraud awareness policy, reviewed the arrangements by which staff may raise concerns and received reports regarding concerns raised; and
- Risk management – Reviewed the Agency’s Corporate Risk Register and monitored new and emerging risks, received and considered reports from the Chief Risk Officer.

Quality Assurance and Risk Committee/Service and Quality Committee

In 2019 the number of meetings held: were as follows:

Committee	Number of Meetings
Quality Assurance and Risk Committee	1
Service and Quality Committee	4

The composition of the Service and Quality Committee/Quality Assurance and Risk Committee for the year ended 31st December 2019 included three Board members and one external member.

The Service and Quality Committee/Quality Assurance and Risk Committee reported in relation to the design and operation of the risk management system and focused principally on quality assurance and service delivery.

In May 2019 the Board refined the scope of the Quality Assurance and Risk Committee and renamed it the Service and Quality Committee. The purpose of the Service and Quality Committee is to assist the Board in fulfilling its responsibilities in relation to formulating a strategy for Child Protection and Welfare, for quality assurance and service delivery risk matters (including the outcome of investigations into the services of Tusla and bodies totally or partially funded by Tusla) and to advise the Board on the effectiveness of the Quality Assurance function.

Service and Quality Committee/Quality Assurance and Risk Committee focussed on the following matters in 2019:

- Reports from the National Director of Quality Assurance on the findings of reviews performed by the Quality Assurance Division, any themes emerging and the implications for the overall risk profile of Tusla;
- Reports from the Chief Operations Officer providing service improvement reports and significant operational responses to the findings of reviews from the Quality Assurance Division;
- Monitoring the effectiveness of the Quality Assurance Division;
- Monitoring the completion by management of actions arising from recommendations made on foot of investigations and/or inspections, either internal or external, into service delivery and standards within Tusla or any body totally or partially funded by Tusla;
- Reviewing commissioned arrangements and performance against agreed service level agreements and/or service standards required;
- Reporting any significant findings or risk issues identified to the Board;
- Reviewing and considering practice risks and how these are being identified, monitored, managed, mitigated and reported by management.

Organisational Development, Remuneration and Succession Committee, Governance Committee/ Organisational Development Committee

In 2019 the number of meetings held were as follows:

Committee	Meeting
Organisational Development, Remuneration and Succession	0
Governance	2
Organisational Development	3

Organisational Development, Remuneration and Succession Committee (ODRS)

The role of the ODRS was to ensure that development of policy and strategy was aligned with the goals set out in the strategic plan; ensure that the communications function was effective and operated within the agreed corporate strategic framework; ensure Tusla's adherence to prevailing government policy in relation to pay and rewards.

The Board resolved to reduce its sub-committees from four to three following a Board workshop, externally facilitated in February 2019. The Organisational Development, Remuneration and Succession Committee did not hold any meetings in 2019.

Governance Committee

The purpose of the Governance Committee was to ensure that the Board fulfilled its legal and functional responsibilities.

The Committee comprised of two Board members and focused on the following matters in 2019:

- Reviewed the Agency's compliance with the Code of Practice for the Governance of State Bodies and relevant legislative requirements. Met with the DCYA's Governance Unit;
- Reviewed and considered the Oversight Agreement between Tusla and the DCYA and recommended to the Board for approval;
- Reviewed and agreed content of annual reports, other than the annual financial statements and statement on internal control before submission to the full Board.

Organisational Development Committee

The Board of Tusla established an Organisational Development Committee to consider and make recommendations to the Board in relation to strategic organisational issues, and in a number of specific areas, to approve arrangements where the Board has delegated these functions to the committee. The Organisational Development Committee comprises three Board members. The ODC operated with one vacancy which was filled in January 2020 with the appointment of a Board member.

The committee focused on the following matters in 2019:

- Reviewed compliance with the Code of Practice for the Governance of State Bodies 2016;
- Reviewed HR Performance Data Reports;
- Reviewed Tusla's Data Management Strategy and received and considered reports on the National Childcare Information System;

- Considered Organisational Structure Reform and made recommendations to the Board.

A Schedule of memberships and attendance at the Agency's Board and Committees in 2019 is shown below

	Board	Audit Committee	Audit and Risk Committee	Quality Assurance and Service Committee	Service and Quality Committee	Organisational Development Committee	Governance Committee	Total Meetings Attended	Meetings Eligible to Attend 2019
	(12 Meetings)	(3 Meetings)	(4 Meetings)	(1 Meeting)	(4 Meetings)	(3 Meetings)	(2 Meetings)		
Pat Rabbitte	12							12	12
Anne O'Gara	12				4			16	16
Rory O'Ferrall	11	3	4					18	19
Paul White	10			1		3	2	16	18
Deirdre Kiely	10	2	4					16	19
Sean Holland	8			1	4			13	17
Liam Irwin	12		3		4			19	20
Teresa Kilmartin*	5							5	5
Avril McDermott	10	3				3	2	18	20
Patricia Doherty*	0								2
Bernadette Costello (Independent member)				1				1	4
Richard George (Independent Member)		3	4					7	7

* Board member part year only – appointment periods in previous table

The disclosures required for Board members' fees and expenses are contained in [NOTE 2](#) and [NOTE 3](#) of the Financial Statements.

Code of Practice for the Governance of State Bodies (Revised 2016)

The Code of Practice (2016) sets out additional reporting requirements for State Bodies in areas such as Travel and Subsistence, Consultancy, Severance/Termination Payments, Hospitality and Legal expenditure. The disclosures required by the Code are set out below or included as part of the Financial Statements.

(a) Travel and Subsistence

	2019	2018
	€'000	€'000
Domestic		
- Board	4	2
- Employees	13,343	11,771
Non-Domestic*		
- Board	-	-
- Employees	(271)*	(63)*
Total	13,076	11,710

Cash expenditure on Non-Domestic Travel in 2019 was €150k (2018 €49k)

* Negative figures presented in Non-Domestic Travel and Subsistence for 2019 and 2018 are due to the reversal of accruals. Travel and Subsistence payments in respect of Board members are those paid directly as well as costs outlaid by the Agency

(b) Professional Services Expenditure (by key area)

Professional Services include the cost of external advice to management and exclude outsourced 'business-as-usual' functions:

	2019	2018
	€'000	€'000
Strategic Planning, Organisational Reform & Restructure	435	395
Legal & Human Resources	44	196
ICT	17	69
Financial & Taxation	-	1
GDPR/Data Protection	-	61
Fostering	109	192
Other (Including Health, Social Care & Business)	399	320
Total	1,004	1,234

(c) Hospitality Expenditure

The Statement of Income and Expenditure Account includes the following hospitality expenditure:

	2019	2018
	€'000	€'000
Staff Hospitality	-	4
Client Hospitality	-	1
Total	-	5

(d) Legal Costs & Compensation

The table below provides a breakdown of amounts recognised as expenditure in the reporting period in relation to legal costs and settlements relating to contracts with third parties. This does not include expenditure incurred in relation to general legal advice received by the Agency:

	2019	2018
	€'000	€'000
Legal costs	1	19
Legal Settlements	166	70
Total	167	89

The total number of legal compensation (settlements) for the Agency during 2019 was 4.

(e) Severance/Termination Payments & Added Years for Pension Purposes

The total severance/termination payments expenditure for the Agency during 2019 was €28.5k (2018: €NIL). The Agency also granted no added years for pension purposes to staff members.

The Agency has adopted the Code of Practice for the Governance of State Bodies (2016) and has put procedures in place to seek to ensure compliance with the Code. The Agency was in substantial compliance with the Code of Practice for 2019.

Key Personnel Changes

The Board would like to express sincere thanks to all outgoing Board members for their dedication and valued contribution to the Agency since its inception on 1st January 2014. The Board would also like to welcome all newly appointed members in 2019 and 2020. The Board would like to thank Mr Pat Smyth who served as Interim Chief Executive Officer from 1st October 2018 to 16th September 2019 and welcome Mr Bernard Gloster who took up the position of Chief Executive Officer from 16th September 2019.



Pat Rabbitte

Chairperson

Date: 19th June 2020

Statement on Internal Control

Responsibility for the System of Internal Control

As Chairperson of the Child and Family Agency I make this statement to the Minister for Children and Youth Affairs on behalf of the Board that we acknowledge our responsibility for ensuring that an effective system of internal control is maintained and operated. Through this system the achievement of the Child and Family Agency's policies, aims and objectives are supported whilst safeguarding public funds and the Agency's assets.

This responsibility takes account of the requirements of the Code of Practice for the Governance of State Bodies (2016). The Board has acted in accordance with the responsibilities assigned by the Department of Children and Youth Affairs (DCYA). This Statement on Internal Control represents the position for the year ended 31st December 2019.

Purpose of the System of Internal Control

The CEO, Senior Management Team and the management structure at all levels of the Child and Family Agency are responsible to the Board for the implementation and maintenance of internal controls over their respective functions. This embedding of the system of internal control is designed to ensure that the Child and Family Agency is capable of responding to operational risks and that significant control issues, should they arise, are escalated promptly to an appropriate level of management. The system of internal control is designed to mitigate and identify risk rather than eliminate risk. The Agency's system can provide only reasonable and not absolute assurance that assets are safeguarded, transactions are properly authorised and recorded and that material errors or irregularities are either prevented or detected in a timely manner.

As required by the Department of Public Expenditure and Reform (DPER) Code of Practice for the Governance of State Bodies, under the aegis of the Department of Children and Youth Affairs and Section 13 (2) (d) of the Child and Family Agency Act 2013, I make this statement as Chairperson of the Child and Family Agency on behalf of the Board to demonstrate the Child and Family Agency's arrangements for implementing a system of governance and internal control that includes the following:

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

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

The Child and Family Agency continues to progress with key transformational programmes. The scale and complexity of these reforms will require a sustained investment of time and resources to deliver on the objectives of the Agency as set out in the Corporate Plan. The scope of the reform encompasses an organisation-wide transformation of existing services and business processes as well as the creation of new innovative methods of service delivery and the discontinuance of inherited processes which do not support the Agency's objectives.

Since establishment the Agency has been undergoing continuous improvements which have been outlined in our Corporate Plan and subsequent Business Plans produced annually at the start of each year resulting in improvements across our services including our procedures with respect to internal and external governance and controls. In 2019 the Agency continued to invest in additional resources to provide business support and improve the capacity of the Agency across a number of transformational programmes. The progress on the programmes in 2019 is as follows:

- The Agency's Information and Communication Technology (ICT) Directorate continued to progress a program of digital and data transformation throughout 2019. Key initiatives delivered in 2019 included the completion of a two-year mobile enablement project to equip all social work staff with laptops and smart phones; the Tusla online Portal was extended to now support the digitisation of Early Years Registrations, Funding Applications and Retrospective Referrals; the Tusla Data Hub was launched to provide public access to Tusla performance data and key metrics in an easy-to-use and visual format to help inform child and family related service planning and research; the Tusla Data Management Strategy 2019-2022 was launched and represents the first Data Strategy for child and family services in Ireland, the strategy aims to improve the management of data held by Tusla in a secure, holistic and consistent manner that serves the data and information needs of all Tusla stakeholders in delivering better outcomes for children, young people, families and communities. On the operational side, the Tusla ICT team managed over forty thousand support calls and delivered over fifty major projects in 2019. 2020 will see more improvements with a particular focus on enhancing the ICT equipment and services in regional offices, supporting data privacy and launching a new case management system to support the work of Tusla Education Support Service (TESS), Child Abuse Substantiation Procedure (CASp), Residential and Early Years services;
- The National Child Care Information System (NCCIS) was rolled out nationally in 2018. All 17 social work areas now access one integrated and up-to-date information system on child protection and welfare cases. The Agency has focussed significant resources and training to ensure that NCCIS is the primary system of record for all social work information in the areas of Duty Intake, Child Protection and Welfare and Children in Care as well as partial usage for Fostering and Aftercare. NCCIS holds vast quantities of information which will be controlled and organised to improve caseload management. The ongoing development of NCCIS is a key element of the Agency's Child Protection and Welfare Strategy, ICT Strategy and Data Management Strategy.
- Commissioning is the approach adopted by the Agency to ensure that grant-aided funding under Section 56-59 of the Child and Family Agency Act (2013) is distributed in a transparent, outcomes-focused, evidenced-informed and participatory way. The Agency is committed to using the total resources available for children and families in the most efficient, equitable, proportionate and sustainable way in order to improve outcomes for children and families. Tusla's Commissioning Strategy and toolkit were published in 2019. The strategy and toolkit outline a new approach to commissioning and key principles and priorities for the Agency. The strategy is relevant to all staff and all organisations in receipt of Section 56 -59 funding and seeks to have a national standardised approach to commissioning practice embedded organisationally from national, to regional, to local area level. The Commissioning Unit launched the Commissioning Portal with Guidance and communicated to all relevant staff in January 2019;
- During 2019 the Agency continued to implement the Child Protection and Welfare Strategy (CPWS) 2017-2022. In 2019 a range of programmes were completed on schedule to meet the learning and development needs of frontline staff. Key organisational projects for policy alignment were completed and practice implementation was audited to monitor the breadth of implementation of the new national approach to practice – Signs of Safety;
- A National Emergency Out-of-Hours Service was established in 2018 which saw the merging of the existing Cork and Dublin Services. Staffing levels have increased in this service. An Out-of-Hours Emergency Fostering Support line went live in November 2019 which is available to all Tusla Foster Carers;
- In 2019 a national training programme was implemented to support the implementation of the National Caseload Management Policy. The aim of the policy and toolkit is to provide a common approach nationally to allow the manageability of caseloads to be assessed on an ongoing basis as part of the process for the safe and effective management of cases, reflective practice, and support to staff. An online training programme

was also launched in July 2019 to ensure that new entrants to Tusla have immediate access to training on the application and use of the Caseload Management Policy and its toolkit;

- The Prevention, Partnership and Family Support (PPFS) Programme is a comprehensive programme of early intervention and preventative work which has been undertaken by Tusla, with the support of the UNESCO Child and Family Research Centre, NUI Galway. The PPFS Programme is embedding early intervention and prevention within the Agency. The aim of the programme is to prevent risks to children and young people arising or escalating through building sustainable intellectual capacity and manpower within Tusla and partner organisations to perform early intervention work;
- In conjunction with Health Business Service (HBS) Procurement and the Office of Government Procurement (OGP) eight Procurement contracts to the value of €2.6m excluding VAT were awarded in 2019 from a number of categories: Consultancy, Education and Training, Document Management and ICT.

Accountability

The Board continued to implement the Corporate Plan (2018-2020) as approved by the Minister for Children and Youth Affairs which sets out the Board's objectives over a three-year period with appropriate targets and key performance measures identified.

The Corporate Plan is formulated following a consultation process which takes into account the views of board members, management, staff, service users and takes into consideration external factors such as government policy and stakeholder needs. Each service area undertakes a number of operational activities that fulfil the Child and Family Agency's strategic objectives designed to satisfy the corporate aims. The Senior Management Team reviews performance against objectives and key performance measures on a quarterly basis and this is reported to the Board and the Department of Children and Youth Affairs. Performance against the Corporate Plan is also reported in the Annual Report at the end of each financial year.

The Child and Family Agency spends public funds on the provision of child and family services to the population of Ireland. The duties relating to expenditure incurred by the Child and Family Agency are stringent in terms of accountability and transparency in order to fulfil our responsibility for funding received from the Department of Children and Youth Affairs. These duties are set out in the Child and Family Agency Act 2013, the Public Spending Code and in the Public Financial Procedures of the Department of Public Expenditure and Reform.

The Agency is reliant on the Health Service Executive (HSE) who provide services in the areas of payroll, human resources, pensions, estate management, ICT, procurement, internal audit, general ledger, banking arrangements, invoice processing and payments on behalf of the Agency, governed through a Memorandum of Understanding and relevant Service Level Agreements between the organisations.

This control system for these services was inherited on establishment of the Agency. The Agency is continually reviewing the operation of these controls internally with the HSE, Health Business Service (HBS) and with the assistance of Internal Audit. The Agency places reliance on these established and internally audited HSE managed processes and regulations to underpin its internal controls across these areas.

System of Internal Control

The system of internal control, which by its nature is dynamic, is continually developed, maintained and monitored in response to the requirements of the organisation. The following is a description of the key processes and procedures, designed to provide effective internal control, which are in place across the Child and Family Agency:

- There is a regular management reporting process and a framework of administrative procedures which includes segregation of duties, a system of delegation and accountability and a system for the authorisation

of expenditure;

- The Agency adopted on establishment the HSE National Financial Regulations, which are currently being re-drafted to better suit the needs of the Agency. The Financial Regulations form an integral part of the system of internal control and have been prepared to reflect current best practice. Compliance with Financial Regulations is mandatory for all staff throughout the Child and Family Agency;
- The Agency has put in place procedures designed to strengthen compliance with all pay and travel circulars issued by the Department of Public Expenditure and Reform. Any exceptions identified are addressed and are reported on an annual basis to the Minister for Children and Youth Affairs, in accordance with the Code of Practice for the Governance of State Bodies;
- As part of the Child and Family Agency’s annual review of the effectiveness of the system of internal controls, a survey was carried out for staff at Grade VIII (or equivalent) and above to complete a *Controls Assurance Statement*, confirming their compliance with policies and procedures and attesting to the existence and operation of controls which are in place in their area of responsibility, or identifying where exceptions or weaknesses exist. Where weaknesses are identified, they are addressed within the risk management process; and
- The Internal Audit function carries out a planned programme of Internal Audits on both Tusla-managed services and on agencies funded by Tusla. The output of this work in 2019 is reported separately in the statement on internal control (SIC). The Head of Internal Audit reports at each Audit and Risk Committee.

Capacity to Handle Risk

Risk management is the process by which risks are systematically identified, analysed, managed, recorded, monitored and reported upon. It is a fully integrated business activity comprising two key components: a) proactive risk identification and b) responsive risk management. The Agency recognises that risk management is inextricably linked to good governance and the delivery of safe and high-quality services. The Agency has developed risk-management processes which are subject to periodic review and it continues to develop enhanced processes for risk communication and reporting to the Board.

Maintaining and achieving the safety and well-being of children and families is the primary consideration in decision making for the Agency. Decisions often need to be made in conditions of uncertainty. Making decisions in conditions of uncertainty involves judgement, values and balance in appraising the different options available. The Agency recognises that it operates in a sensitive and challenging area. Risk and uncertainty are an unavoidable part of child protection and Tusla’s other statutory functions.

The Child and Family Agency’s Organisational Risk Management Policy and Procedure sets out our commitment to ensuring that risk management principles and practices form an integral part of our:

- Culture
- Governance and accountability arrangements
- Decision-making processes
- Strategic and operational planning
- Reporting, review, evaluation and improvement processes

Under the policy, staff and managers at all levels across the Agency have an individual and collective responsibility for identifying and managing risk in day-to-day decision making and planning. In order for risk management to become part of everyday practices, each staff member is required to recognise and accept this responsibility. The Child and Family Agency is committed to establishing and providing the necessary structures, processes, training and other supports required to implement this policy and procedure. In response to this the Agency increased resources to the risk management team in 2019.

Where risks are identified that have significant potential to impact on the overall strategic objectives of the Child and Family Agency they are recorded on the Agency’s National Corporate Risk Register. These corporate strategic objectives are detailed in the Agency’s Corporate Plan 2018-2020 and are as follows:

- To implement integrated Agency-wide approaches to all Tusla supports and services, with clear responsive pathways to achieve better outcomes;
- To regulate services consistently and proportionately using Quality and Regulatory Frameworks to ensure compliance and drive improvement and services for children;
- To ensure Tusla provided and commissioned services are safe, well-led, evidence-informed, outcomes focused and measurable;
- To develop collaborative relationships, participative practices and effective communications with all key stakeholders to provide a coordinated approach to the delivery of services;
- To support and inform government policy and legislation through the development and coordination of Tusla policies, strategies, programmes and frameworks;
- To ensure corporate services (estates, finance, governance, HR, ICT, legal) are effective in supporting the delivery of Tusla services.

The national corporate risk register identifies risks against these strategic objectives and details the controls and actions in place to manage them. It is also a mechanism to provide assurance and evidence to the Board that risk is being identified, assessed and managed and that a range of control measures and action plans are in place to mitigate the risks identified.

There are risk registers at various different levels within the Child and Family Agency in order that they can be managed at the most appropriate level of responsibility as illustrated below.

Diagram of the different levels of risk reporting and monitoring within the Child and Family Agency



Risk Management Policy; Figure 1: Overview of Risk Accountability and Responsibility within Tusla

The Audit and Risk Committee is responsible for the overall Risk Management Strategy of the Agency and work with the Service and Quality Committee in ensuring oversight of key risks.

In response to the inherent risk and uncertainty in the delivery of services relating to child protection and Tusla’s other statutory functions, there are regular reports on the status of the corporate risks submitted to the Audit and Risk

Committee and to the Service and Quality Committee which are comprehensive, forward-looking and focus on the risks warranting the most attention by the Board's risk oversight process.

Further oversight of the corporate risks is regularly undertaken with the national corporate risk register being provided to the Department of Children and Youth Affairs on a quarterly basis as well as to the Comptroller and Auditor General as part of their audit process.

In addition to this, HIQA by request, are provided with the national corporate risk register on a frequent basis.

Also, both the Executive and Board meet regularly with the Department of Children and Youth Affairs where the matters of risks and actions taken to address these risks are discussed and agreed.

In summary the Corporate Risk Register, which identifies risk owners, includes the following risk focus:

- Child protection capacity/processes and systems response in a timely manner to children at risk;
- That all processes and systems underpinning children and family policy and services are evidence-informed and fit for purpose;
- That safe systems of work to support the safety, health and welfare of staff, service users and members of the public are in place and operational;
- A workforce that is fit for purpose and responsive to meeting service demand; and
- An organisation fit for purpose to deliver our strategic intent.

A March 2020 report by Internal Audit on the Agency's National Corporate Risk Management Framework provided a Limited Assurance audit opinion and identified 14 audit recommendations for implementation by Tusla to address weaknesses within the governance, risk management and control framework. Management has accepted the recommendations and a detailed action plan has been agreed. The Audit and Risk Committee will monitor the implementation of the recommendations.

Ongoing Monitoring and Review

The monitoring and review of the effectiveness of the system of internal control is performed by the work of:

- The Audit and Risk Committee
- The Senior Managers of the Child and Family Agency
- National Internal Audit Division
- Quality Assurance Directorate
- Commissioning Unit
- Financial Compliance Unit.

Senior management of the Agency have responsibility for the development and maintenance of the management control framework. The Senior Management Team reviews the comments and recommendations contained within reports and management letters issued by the Comptroller and Auditor General, the Public Accounts Committee and Internal Audit. Actions are taken to implement audit recommendations which are then reviewed by the Audit and Risk Committee.

Annual Report and Financial Statements

The Child and Family Agency Annual Report and Annual Financial Statements are produced and published each year to give an overview to stakeholders of performance for the preceding year. It is a comprehensive report on the organisation's activity, achievements, challenges and financial performance as set out in its 2019 Business Plan. The Child and Family Agency's Annual Financial Statements are also subject to statutory audit by the Office of the Comptroller and Auditor General. Through these audited financial statements, the Child and Family Agency accounts for the use of the resources allocated from government. The Child and Family Agency Annual Report is a legal requirement under Section 13 of the Child and Family Agency Act 2013.

Capital Investment and Appraisal

In the decision-making process regarding the expenditure of capital funds, €14.4m in 2019 (2018 : €13.2m), the Child and Family Agency Senior Management Team followed the requirements of the Public Spending Code.

State Assets

During 2019 the Child and Family Agency did not dispose of State assets of a material value.

Fraud and Irregularities

The Agency has established a reporting process for notification of any alleged fraudulent incidents or irregularities. The parties which are notified of material fraudulent incidents as standard are:

- The Audit and Risk Committee
- The Comptroller and Auditor General
- The National Director of Internal Audit
- An Garda Síochána
- Other agencies (as required)

There are continuous updates provided to the Audit and Risk Committee on all reported matters as they are investigated. The Agency maintains a register of those reported matters and all alleged fraudulent incidents are thoroughly investigated. When the Agency uncovers an alleged fraud the relevant controls and processes are reviewed and, where necessary, are revised to mitigate the risk of recurrence.

Tax Compliance

During 2019 the Child and Family Agency discharged all known tax and PRSI liabilities on or before the dates prescribed by Revenue. The Agency is committed to full compliance with taxation laws.

Guardian Ad Litem

Guardians Ad Litem are appointed by the Court under Section 26 of the Child Care Act 1991. Most Guardians Ad Litem engage their own solicitors and counsel to represent them in Court. However, the fees for both the Guardian ad Litem and their legal team fall to be discharged by the Child and Family Agency, in compliance with Section 26.2 of the Child Care Act 1991.

As the Guardians Ad Litem are appointed by the Court the Agency can only implement limited financial controls and cannot apply a value for money control over these payments. While the Child and Family Agency has agreed a rate for professional hours with Guardians Ad Litem, the service is demand-led with the level of costs being dependent upon the number of professional hours billed for each case. This limits the Agency's control over the quantum of these payments.

The Department of Children and Youth Affairs has commenced a process of reform of Guardian Ad Litem services, which includes a proposed amendment to the legislation currently underpinning the service. In December 2017, government approved the establishment of a new Guardian Ad Litem Service within an executive office of the Department of Children and Youth Affairs. The Agency is committed to working closely with the Department as this new office is established.

Review of the Effectiveness of the System of Internal Control

The annual review of the effectiveness of the system of internal control in the Child and Family Agency is a process that supports me, as the Chairperson, in ascertaining that there is appropriate effective control within the Agency, this review was undertaken by the Board and formally reviewed at the May 2020 Board meeting. The systems in place have identified weaknesses in the Internal Controls and where these occur, management have put in place action plans to remediate these weaknesses. Having made this determination, I am then in a position to advise the Minister for Children and Youth Affairs and the Oireachtas whether there is effective control within the Agency.

In doing so, I have placed reliance on the procedures as outlined within this document and on the procedures outlined below:

- Annual Budget management process;
- Monthly Management Accounts and Performance Activity Reports;
- Annual Report and Annual Financial Statements;
- Internal Audit function to review, audit and report;
- Quality Assurance Directorate reports in relation to services that promote the development, welfare and protection of children and families;
- Reports from the Finance Compliance Unit in relation to Funded Bodies;
- Inspection reports from the Health Information and Quality Agency (HIQA);
- Reports from the National Review Panel;
- Recommendations from management letters of the Comptroller and Auditor General and audit risks identified within the 2019 audit programme of the Child and Family Agency's Annual Financial Statements;
- Terms of reference for the Child and Family Agency Board and its three committees;
- Protected Disclosures Policy;
- Corporate Plan for 2018-2020, setting the strategic direction of the Agency;
- Business Plan for 2019 submitted to the Department of Children and Youth Affairs;
- Separation of roles of Chairperson and Chief Executive Officer;
- Annual review of Board composition;
- Advice to Minister for Children and Youth Affairs on the competency of Board members;
- Terms of reference for Board members' responsibilities and obligations;
- Adequate support and briefings to Board members on the Child and Family Agency affairs;
- Code of Governance for the Child and Family Agency;
- Standards of Integrity and Codes of Conduct incorporated within the Code of Governance;
- Compliance by Agency Board members and staff at Grade VIII (or equivalent) and above with the Ethics Acts;
- A register of Board members' interests (maintained by the Board secretary); and
- Procedures designed to report to the Minister to ensure the Child and Family Agency complies with all Department of Public Expenditure and Reform regulations on fees paid to the Chairperson and members, and pay and travel expenditure for CEO and all other Child and Family Agency staff.

Summary of review findings for 2019

Summary findings on audits of financial controls in the Agency and funded agencies undertaken by Internal Audit

Internal Audit operates in accordance with the terms of reference approved by the Audit and Risk Committee. The Annual Internal Audit plan for 2019 was approved by the Audit Committee and focused upon areas identified from an analysis of the financial risks which are inherent to the Child and Family Agency. The 2019 Internal Audit reports were submitted to senior management, providing objective and independent assessment of the systems of internal control in operation across the Agency together with prioritised recommendations to strengthen controls and implement further improvements. Procedures are in place to ensure that the recommendations of Internal Audit are actioned. The National Director of Internal Audit reports to the Chairperson of the Audit and Risk Committee. Any instances of fraud or other irregularities, identified through management review or audit, are addressed by management and where appropriate An Garda Síochána are notified.

During 2019, Internal Audit reported on the results of 33 audits (12 in relation to Tusla areas and 21 in relation to Tusla

Funded Agencies) and six follow-up audits.

The top control issues identified by Internal Audit in Tusla and its funded agencies in 2019 were as follows:

12 Internal Audit Reports - TUSLA - Top Control Issues	Number of control issued Identified
Inadequate Travel & Subsistence controls	5
Weak bookkeeping processes/record keeping/Lack of oversight	5
Governance	2
Segregation of duties	2
Inappropriate Business Credit/Fuel Cards Control	2
Procedures not documented/Polices not in place/not updated regularly	2
Inappropriate sign off	1

21 Internal Audit Reports – Tusla Funded Agencies - Top Control Issues	Number of control issues Identified
Governance	20
Inadequate Fixed Asset controls	15
Inadequate Travel & Subsistence controls	14
Weak bookkeeping processes/record keeping/Lack of oversight	13
Inadequate Budget Management controls	13
Procedures not documented/Polices not in place/not updated regularly	8
Non-compliance with Procurement rules	8
Non-compliance with provisions set out in Service Arrangement	6
Garda Vetting	6

Of the 33 audits, Internal Audit assessed the control environments as follows:

Audit Opinions	Internal Audit Reports on TUSLA	%	Internal Audit Reports on TUSLA Funded Agencies	%	Total	Total %
Unsatisfactory	6	50%	2	10%	8	24%
Limited	5	42%	14	67%	19	58%
Adequate	1	8%	5	23%	6	18%
Total	12		21		33	

The internal audit opinion is based on the following ratings and their definitions:

Type of Overall Opinion Rating	Definition
Unsatisfactory	The system of governance, risk management and control has substantial weaknesses that need to be addressed urgently.
Limited	There are weaknesses within the governance, risk management and control framework which need to be addressed.
Adequate	Overall there is an adequate system of governance, risk management and control.

Based on the work of Internal Audit and the results of the individual internal audit engagements, the Annual Report of the National Director of Internal Audit provided an overall opinion of Limited Assurance for 2019 on the governance, risk management and controls processes within the Agency.

Tusla also has a standard process in place for monitoring, reviewing and escalating Internal Audit reports. The weaknesses identified through the Internal Audit reports above are actioned and managed in the relevant service area within Tusla and oversight of progress is monitored through a quarterly monitoring report which is presented to Audit and Risk Committee for review. The Internal Audit assessments of adequate, limited, unsatisfactory are used to prioritise the actions plans. Services are afforded a short period to develop an action plan to address the weakness identified. The findings of individual Internal Audit reports are shared throughout Tusla services to provide learning. Audit reports are reviewed by the Finance Department to identify any systemic weaknesses which are to be addressed in the overall service as well as in the specific location audited. Tusla has prioritised its Internal Audit plans to address known higher-risk areas. All Tusla Internal Audit reports are released under Freedom of Information.

Where an unsatisfactory report is received for a funded agency, Tusla senior management meets with the Chair and CEO of the funded agency to agree an action plan to address the weaknesses identified. The Commissioning Unit oversees this action plan and meets the funded agency on an ongoing basis to monitor and review the actions. The Agency takes into account the overall control environment in a funded agency when commissioning services.

Reports from HSE/HBS in relation to the operating effectiveness of key controls over shared services

The 2019 Statement on Internal Control for HSE identified weaknesses in Internal Controls in the areas of Financial Systems and ICT. Tusla receives Financial and ICT services from HSE.

Tusla has been provided with internal audit reports from HSE HBS and HSE ICT where controls over services to Tusla may be impacted. HSE HBS and HSE ICT have provided details of the weaknesses across these internal audits that may impact on Tusla's internal control systems. Actions have been agreed and are being monitored by HSE HBS and HSE ICT. Tusla places reliance on the monitoring and oversight provided by HSE over the relevant internal controls.

Quality Assurance of Agency Services

Quality assurance of Tusla services is achieved through a combination of internal quality audits as well and external assurance by agencies such as HIQA, the Ombudsman for Children and the National Review Panel. All inspection reports may be accessed from the relevant agency website. HIQA also publishes an Annual Overview Report on the Inspection and Regulation of Children's services.

<https://www.hiqa.ie/reports-and-publications/inspection-reports>

<https://www.oco.ie/>

<https://www.tusla.ie/national-review-panel/>

Action plans are agreed with management to remediate the weaknesses identified and progress against these actions is monitored by the Quality Assurance Directorate and the Service and Quality Committee.

The emphasis of the Quality Assurance process has been to highlight the critical importance of strong leadership and effective systems for governing and managing children's services.

In 2018, the Health Information and Quality Authority (HIQA) published its Statutory Investigation into how Tusla managed referrals relating to adults who might pose a risk of sexually abusing a child. The Expert Assurance Group (EAG) which was appointed by the Minister submitted its final report in September 2019 and stated that overall the

EAG was satisfied with the progress that had been made by Tusla across a range of reforms relating to the recommendations of the HIQA Report.

The process of Quality Assurance recognises that the Agency operates in a sensitive and challenging area. Risk and uncertainty are and will continue to be an unavoidable part of child protection and Tusla's other statutory functions.

Data Protection Commission (DPC)

The DPC has conducted three statutory inquiries following full disclosures of data breaches by Tusla in the period 2018/2019. Tusla has had extensive engagement with the DPC during these Inquiries and has voluntarily submitted extensive detailed remediation plans to address certain data protection issues identified during the Inquiries. Provisions under the General Data Protection Regulation (the 'GDPR') and the Data Protection Act 2018 allow the DPC to impose a corrective measure and/or administrative fines up to €1m on a public body as a result of inquiries. The DPC has made a final decision of unintentional infringement of Articles 32(1) and 33(1) of the GDPR in two investigations and has imposed administrative fines totalling €115k (see Note 25 to the financial statements for further information).

The DPC has recently issued its draft decision on the third statutory inquiry and has signalled its intention to impose two administrative fines based on its findings. These proposed fines are not provided for in the 2019 financial statements as they cannot be reliably estimated at this time.

Tusla has actively engaged with the DPC to support its inquiry processes and is fully committed to implementing the required changes which will enable compliance with data protection legislation.

Control Weaknesses Identified during 2019

Procurement

The Agency has procedures in place to ensure compliance with national and EU procurement rules and guidelines as set out by the Office of Government Procurement (OGP) when purchasing of goods and services.

As the largest public purchaser of children services in the State, the effectiveness of the internal control and risk management is important with internal auditors, the Office of the Comptroller and Auditor General and budget holders who play a critical role in safeguarding integrity in public procurement.

Public procurement is a high-risk activity because of the volume and regularity of purchases, and the complex nature of processes to procure services within the Agency. Strategic and operational risks, such as inefficiencies in the tendering process, delays in delivery or substandard contract performance, can also undermine the achievement of objectives.

In procuring for business requirements, the Agency is a customer of the (HSE) and avails of shared services from the Health Business Service (HBS) which provides an integrated approach to goods and services requirements on all non-pay procurement categories of expenditure and cooperates with the Office of Government Procurement's strategy to help deliver this.

The Agency has a significant reliance on HBS Procurement in assisting with putting valid contracts in place. HBS Procurement supports the Agency in defining business requirements and assists with procurement processes under their Spend Under Management programme. They focus on achieving efficiency, effectiveness and best value for money in terms of overall life-cycle and operate in a fair, open, transparent and non-discriminatory manner in the marketplace. The Agency strives to improve and utilise HSE's contracts where possible as part of the Memorandum of Understanding that is in place.

Since establishment of the Agency in 2014, improvements to manage risks and strengthen internal controls in line with guidelines can be demonstrated, for example:

- A small dedicated procurement function was set up to lead a strategy in conjunction with HSE and OGP, which seeks to further address specific procurement gaps;
- The Agency takes advantage and avails of the OGP's national contracts for goods and services which mainly relate to purchases under €25,000;
- The Agency reports on known instances of exceptions to procurement legislation where a valid tender competition didn't take place for goods and services greater than €25,000 (excl. VAT), which are reviewed by the Audit and Risk Committee and reported to the Office of the Comptroller and Auditor General;
- Visibility of contract activity and non-compliance is reported to budget holders for review;
- Staff with delegated authority for purchasing have been provided with comprehensive procurement training which enables them to comply with relevant rules and regulations and carry out their function;
- For procurements above certain levels, approval from the Senior Leadership Team is required.

Since 2014, procurement competitions for contracts totalling €269m (excl. VAT) have been completed which including those for Residential Services, Legal, Consulting and Agency Healthcare. Contracts awarded during 2019 totalled €2.6m. A number of procurement processes commenced during 2019 and including Private Residential placements (€96m annually), Private foster care placements (€23m annually) and Legal services (€15m annually). Other procurement processes which commenced in 2019 include Design & Print, Interpretation/Translation services and Investigations & Reviews. In addition to this, a number of working groups were set up to address the requirements of business support services which include security, cleaning, document management, etc.

Contracts with a threshold greater than €25,000 (excl. VAT), and where no procurement competition was undertaken, have been identified and have been reviewed by the Audit and Risk Committee for 2019.

Procurable Expenditure in 2019

In 2019, the amount of procurable expenditure outlaid by Tusla was €224.1m (Vat excl. €207.2m). The table below sets out the amount of Non-Compliant Expenditure within this outlay. During 2019 non-compliant contracts with a value of €7.1m were identified as exceptions to procurement regulations and are set out in the table below. These contracts are split between Business Support Services and Social, Health & Culture Services and the table shows the comparative position for amounts reported in 2018.

Category of Non-Compliant Expenditure	2019		2018	
	€'m	Number of Suppliers	€'m	Number of Suppliers
- Business Support Services	7.1	80	4.7	49
- Social, Health & Culture Services	0	0	0.7	11
Total	€7.1m	80	€5.4m	60
Procurable Expenditure	207.2			
As % of Procurable Expenditure	3.4%			

The following factors were identified as contributing to the known areas of exceptions to procurement compliance:

- Individual services sourced in local areas which, when aggregated at a national level, exceeds €25k in value. There is no real-time process available to the Agency to monitor such overruns;

- Procurement remains heavily dependent on self-reporting due to an underinvestment in ICT systems. This has led to gaps in information resulting in delays and difficulty identifying expenditures that require a procurement process and it has not been possible to manage procurement on a single platform in the Agency; and
- There is no facility to implement real-time controls and the Agency will continue to rely heavily on manual review processes to ensure compliance with procurement guidelines. This limits the capacity to monitor, on a timely basis, expenditure against value-limited contracts, as well as ensure that only approved contracts are used. In the absence of a real-time control process, responsibility for adherence to procurement rules falls to the budget holder at the relevant level in the organisation.

The following measures will regularise contracts and address the known areas of non-compliance for 2020:

- The Agency prioritises its limited resources to those parts of the procurement process that have the greatest risk from a compliance and value-for-money perspective until a fully resourced procurement function can be put in place. Key contracts including Private Residential Services, Private foster care Services and Legal Contracts are prioritised for 2020;
- In line with the Code of Practice for the Governance of Public State Bodies, 2016, Tusla implemented a three-year Corporate Procurement Plan (CPP) 2018–2020 in 2017, which aligns with the Agency's Corporate Plan 2018–2020 and is reviewed annually against Business Plans. A new Procurement Plan is being developed for the next three years in conjunction with HSE;
- There continues to be a strong reliance on HBS Procurement (HSE) in assisting with meeting the Agency's requirements due to the limited Agency resources;
- Procurement training for staff will continue, including access to procurement information on the Tusla Hub and communication through regular updates;
- The Agency has recognised and communicated that there is a very significant deficit in the digital and ICT platforms that would be expected in an organisation of Tusla's size to support the financial and procurements processes. With HSE, Tusla is now developing a new Integrated Financial Management System (IFMS), which will provide the enabling infrastructure to support the development of more digital and real-time controls necessary to create a significant change to the Procurement Control environment. In 2020 the Agency is engaged in the Planning Phase of the IFMS project and the implementation is expected to happen in Q4 2021. It will take a number of years for this new system to be fully implemented. In the interim, the monitoring and management of contracts within the Agency will continue to be manual.

The Agency acknowledges that there are issues with procurement processes and continue to monitor compliance and disclose information. Business requirements are complex where specifications are difficult to determine and will continue to take time to be addressed. There is a challenge in not being able to address all gaps until visibility, capacity and capabilities are in place to focus on those non-compliance contracts in order to demonstrate that value for money is being obtained and sustainable savings are directed into the most appropriate areas of the Agency.

The dedicated internal procurement function has had challenges in recruiting resources and has to rely heavily on HBS for support. Despite this lack of capacity, the function has embarked on a number of procurement processes during the year with the engagement of an external procurement specialist to assist in establishing good governance around procurement regulations.

Payroll Overpayments

On the establishment of the Agency in 2014 the existing receivable balance relating to payroll overpayments for former HSE Children and Family Services staff was €0.22m. This was transferred to the Agency and recognised as the opening balance for 2014 and has incrementally increased each year from 2014 onwards.

The Agency has identified weaknesses in the payroll process which contributed to the increase in the value of overpayments. This is due mainly to the process being manual and resource-intensive. The Agency has continued to implement changes to the manual processes to enhance controls and improve on the accuracy of payroll payments. These are interim solutions to address this matter whilst the Agency pursues an IT solution which will incorporate a Time & Attendance system and will further enhance the controls for sign-off on time returns which are required to process each employee's payroll.

At the end of 2019 the value of overpayments to be repaid was €1.066m. There has been a focus on controls to ensure that the factors underlying this weakness are addressed. Based on the 2019 information, there has been a reduction in the number of instances of payroll overpayments in 2019. The Agency continues to focus on mitigating actions to address overpayments occurring and ensuring repayment plans are in place where they do occur.

Payroll Overpayments	2019 €'000	2018 €'000
Opening Balance	1.054	1.002
New Overpayment	0.381	0.424
Overpayments Recouped	0.369	0.372
Closing Balance	1.066	1.054
No. of Instances of Overpayments	232	322

Governance and oversight on funding to community, voluntary and charitable organisations

The Agency incurred expenditure of €173.5m in relation to the funding of 749 individual community, voluntary and charitable organisations in 2019. Details are set out below.

Programme	Recipient	Value €m	Purpose
Child Welfare and Protection	Services provided under S56-S59 of the Act	€123.2	Child and family services Alternative care Care and protection for victims of domestic, sexual or gender-based violence To introduce innovative high prevention initiatives that are aimed at those children who are either on the edge of alternative care or currently in alternative care due to complex factors that may include neglect, parental separation, attachment issues, alcohol and/or drug misuse, mental health and economic disadvantage, with a view to keeping these children in their community To enhance interagency co-operation and to realise the national outcomes set out in <i>Better Outcomes, Brighter Futures: the national policy framework for children and young people 2014 - 2020</i>
School Completion Programme	Local School Completion Projects	€25.4	Promotion of school attendance, participation and retention
Family and Community Support	Family Resource Centres	€18.5	Combat disadvantage and improve functioning of the family unit
	Counselling and Support Services	€6.4	Counselling and support services including marriage and relationship counselling, child counselling, Rainbows peer support programme for children, bereavement counselling and support on the death of a family member

Control weaknesses relating to the monitoring and oversight of agencies in receipt of exchequer funding have been identified over the years by the Office of the Comptroller and Auditor General, Internal Audit and the Commissioning Unit. These weaknesses included (i) the late signing and submission of Service Level Agreements (SLAs) from grantees (ii) failure to review financial statements submitted by the grantees and (iii) the non-submission of certificates of compliance by auditors for agencies funded through the Counselling grant streams stating that the funds had been applied for the purposes as intended.

Funding provided to agencies is governed by SLAs which set out the resources provided and the outputs to be delivered. SLAs are signed off at the local service area to ensure services are provided to meet local needs. The monitoring procedures for individual agencies are specified in the relevant SLA. The requirements to submit financial reports and staffing returns and to hold monitoring meetings depend on the size of the funded agency.

Due to a legacy lack of investment in a centralised system and manual processes at local service level, it was not always possible for the Agency to have full visibility on when SLAs were signed.

A Financial Compliance Unit was set up in 2017 within the Finance Department which forms part of the governance and oversight of funded agencies. The Financial Compliance Unit provides additional assurance through independent support and guidance to managers who commission services from the funded agencies.

Throughout 2019 the Financial Compliance Unit continued to carry out desktop reviews of the financial statements of funded agencies focusing on the following common themes:

- Non-compliance with disclosure requirements as per DPER circular 13/2014;
- Restricted/Unrestricted reserves not identified;
- Segmented accounts information not provided;
- Abridged accounts only submitted; and
- Additional information where required.

To address the above, the Financial Compliance Unit produced desk top review reports which highlighted reporting deficiencies to the Tusla commissioners and the funded agencies to promote future compliance with reporting requirements. In conjunction with the Commissioning Unit, the Financial Compliance Unit presented at a workshop for Tusla commissioners on the findings from desktop review reports which included measures to improve financial governance. Based on the findings, a risk-based approach was taken to planning the annual audit programme of work on grant-aided agencies.

All Counselling grantees are now required to return a compliance statement annually. This control replaced the previous requirement for grantees' auditors to provide written confirmation that the funding was used for the purpose for which it was given.

Compliance statements are issued to all Tusla funded agencies after the financial year end in respect of funding for the previous year; in 2019, 94% (2018: 78%) were returned and reviewed by the Financial Compliance Unit. Of agencies in receipt of funding between €250k and €1m, 100% returned their compliance statements.

The Financial Compliance Unit also undertook a bespoke project with Benefacts to develop an analytics tool to assist in the monitoring of compliance of all agencies funded by Tusla. This project is ongoing and is supporting the development of the risk-based approach to desktop reviews.

The Financial Compliance Unit has continued to engage with the Charities Regulator throughout 2019 in respect of all changes to legislation, policies and reporting within the Charity sector to facilitate compliance and efficiencies of reporting by funded agencies.

As part of the annual internal audit programme, the Agency conducts audits on a number of funded agencies to assess current governance and control arrangements. The Agency funded 749 agencies in 2019; of the funded agencies 21 audits were commenced in 2019 (totalling €26.4m). Since 2016 a total of 72 audits were completed on funded agencies by internal audit, with the focus on a risk-based approach.

The audit of funded agencies includes a review of internal controls, financial procedures, management structure and oversight. The audits identify strengths/weaknesses and common issues that need to be addressed. The results of these audits inform the overall risk management and financial governance approach for funded agencies. Further audits are planned in 2020 as part of the internal audit programme. These Internal Audit reports provide recommended actions to be implemented by the funded agencies to improve controls

Commissioning, in the context of the Child and Family Agency, is the process to ensure that the total resources available to children and families are applied to improving outcomes in the most efficient, effective, equitable, proportionate and sustainable way.

To enhance governance and oversight of funded agencies, throughout 2018 Tusla's Commissioning Unit in conjunction with the Tusla ICT developed an online portal to manage contracting, approval of funding and interactions with Section 56 funded agencies which enables the upload of signed SLAs, published financial statements, tax clearance, insurance documents and any other required documentation.

The introduction of the online portal led to enhanced oversight and monitoring of documents required by the Agency to approve funding for services provided by these bodies. The online portal has provided the Agency with a consolidated overview of compliant and non-compliant funded agencies regarding all outstanding document submissions and services commissioned in each local service area across the country. Monitoring of the majority of the funded agencies within Tusla is directly managed through the Local Area offices and each funded agency has an assigned Tusla contact who can deal with any enquires locally and also undertake site-monitoring visits to ensure service delivery is aligned to the agreed schedule.

New guidance manuals for the portal and digital process were developed in 2019 to assist funded agencies and local commissioners. The Commissioning Unit has provided a number of supports to funded agencies and staff through briefings, presentation and training for the online portal. From 2020 modifications have been made to the online portal to capture key data regarding Children's First component, service complaints section, digital e-signature capability and the restructuring of SLA Part A and Part B. The Commissioning Unit is in the process of developing a reporting mechanism relating to funded services in regards to compliance and non-compliance of funded agencies to assist local Tusla commissioners.

In 2019 the Agency developed and published the Tusla Commissioning Strategy 2019– 2023 which outlines a framework for commissioning priorities and intentions over the next five-year period. The Tusla Commissioning toolkit was developed and published in 2019. This is a support tool primarily for local Tusla commissioners involved in local, regional or national commissioning and for senior managers to better understand and effectively support the new approach to commissioning. The toolkit provides funded agencies in the community and voluntary and private sectors with the necessary framework and understanding of the approach that Tusla is using to effectively commission services. The toolkit outlines the responsibilities of commissioners, the process for the commissioning and for the decommissioning of services.

A new operating model was finalised in 2018 which can be applied to organisations proportionate to their size and level of funding. This is referred to as the 'Good Governance Framework'. These are standards of governance that Tusla expects from our funded agencies. This has been operated on a 'comply or explain' basis for 2019. In conjunction with the work of the Financial Compliance Unit the audit plan was expanded to incorporate a higher number of community, voluntary and charitable organisations. All funded agencies receive a copy of audit findings and recommendations. A

review meeting form has been developed and is available on the website to ensure the recording of any matters relating to the SLA's with funded agencies.

Commissioning plans were completed by service areas in 2019. The commissioning plan provides a clear map of the services commissioned. Through the development of the commissioning plan each area reviews the services commissioned and aligns the services to meet the area's needs. As a direct result of this process a number of services have been decommissioned as they no longer meet the needs of the Area. The Areas have also commissioned new services as well as re-orientating existing services to address the local needs.

From the establishment of the Agency in 2014 key progress has been made in the following:

- The introduction of a new service contract for all core funding applicable from 2018, placing emphasis on compliance with the requirements of DPER Circular 13/2014 – Management of and Accountability for Grants from Exchequer Funds;
- A new operating model for governance, compliance and reporting was finalised which can be applied to organisations proportionate to their size and level of funding. This is referred to as the Good Governance Framework. This framework takes into account the Charities Governance Code and the Agency continues to closely monitor the roll-out of this code;
- An expansion to the current audit plan to incorporate a higher number of community, voluntary and charitable organisations. All funded agencies receive a copy of audit findings and recommendations;
- Design and implementation of an online portal to manage contracting and interactions with funded agencies;
- Progression of Area Commissioning Plans, which provides a clear map of the services required at local level and how these needs are addressed. Reviews of the services required have resulted in the decommissioning of certain services that no longer meets the needs of the Area, the introduction of new services, as well as re-orientating existing services to address the local need;
- The Agency has established the Financial Compliance Unit to provide additional assurance through a process of compliance statements, reviews of published financial statements, analytics, data gathering and the audit programme;
- The Agency established a Commissioning Unit. Commissioning, in the context of the Child and Family Agency, is the process to ensure that the total resources available to children and families are applied to improving outcomes in the most efficient, effective, equitable, proportionate and sustainable way;
- The Agency has a Commissioning Strategy 2019-2023 which outlines a framework for commissioning priorities and intentions for a five-year period;
- The Agency has developed a Commissioning Toolkit, which is a support tool for commissioners and Tusla management to understand and support the new approach to Commissioning; and
- Through internal audit, compliance and commissioning, voluntary agencies are now held to a higher standard in terms of compliance, governance and service quality.

Travel and Subsistence

A number of weaknesses were identified in relation to the internal controls over the travel and subsistence claims system in 2019 and previously. Management have put in place action plans to mitigate these specific weaknesses and progress on these will be overseen by the Audit and Risk Committee.

The overall travel and subsistence process is manual and this has created difficulties in implementing adequate controls in this area. To mitigate the systemic weakness caused by overreliance on manual interventions, approval is currently being sought from DPER for the development of an automated Travel and Subsistence system which will be necessary to significantly address the underlying control weaknesses.

Financial Management Systems

Tusla is dependent on the existing SAP system in the HSE for the provision of its Payment System, General Ledger, Payroll, Procurement and HR management systems. In addition, the systems for travel and subsistence, cash allowance payments, and payments to Grant Aided Agencies remain mainly manual systems. However, Tusla's financial processes are transacted on one company code in SAP.

The HSE's statement on internal control notes the lack of a single integrated financial and management system and documents the establishment of the Finance Reform Programme, of which Tusla is a partner organisation, to deliver a programme of change on a phased basis that incorporates People, Process and Technology. Tusla is expected to commence migration in 2021 to the new system under current Phase 1 deployment plans. Tusla is engaged in planning to ensure that it can capture maximum benefit from the implementation of the new system.

Information and Communication Technology (ICT)

Tusla obtains significant ICT services directly from HSE. These services incorporate hosting services, network management, security and computer management. The HSE has identified in its SIC that internal audits have identified weaknesses in relation to security controls and disaster recovery protocols, particularly in relation to older and legacy systems. In the main, the systems utilised by Tusla are more current and less impacted by legacy issues, but where Tusla is dependent on these systems, these weaknesses may have an implication for its internal controls. The HSE has indicated that it is committed to improving controls in respect of cybersecurity.

Risk Management

The Agency recognises that risk management is inextricably linked to good governance and the delivery of safe and high-quality services in the Agency and has put additional resources in place to support the management and delivery of the risk-management process. Actions to address weaknesses in the risk management framework are being progressed and overseen by management in 2020. The COVID-19 pandemic poses a risk to the completion of some of the actions in line with the set timeframes set for delivery.

Data Protection

Tusla recognises that public trust and confidence in the arrangements for protecting privacy and confidentiality are fundamental to the important work the Agency does in safeguarding children. Tusla views all data breach incidents very seriously and is committed to addressing the root causes of any systemic issues which have resulted in the occurrence of the data breaches and acknowledges that rectifications are required in order to prevent similar breaches occurring in the future. A dedicated programme of work has been put in place by Tusla to address the weaknesses in its systems and progress will be overseen by the Organisation Development Committee.

Tusla voluntarily reported all data breaches to the DPC and has had extensive engagement with the DPC during these Inquiries. The historical paper-based nature of record keeping within Tusla has contributed to the systemic issues underlying these breaches. This situation has improved since the introduction of the National Childcare Information System (NCCIS). However, though paper based systems are still in existence, but plans are in place to address this over the coming year. Significant efforts have been made, and are continuing to be made by Tusla to engage with the DPC and to improve Tusla's processes to enhance compliance with the relevant legislation. Detailed remediation plans to address the data protection issues underlying these breaches have been put in place. The Board has provided additional resources to support the work of the Data Protection Officer.

COVID-19 and Internal Controls

The COVID-19 emergency commenced in March 2020 and will continue for the foreseeable future to impact on the resources available within the Agency, in HBS/HSE and in funded agencies. Arising from COVID-19, the Agency established a Crisis Management Team (CMT) to seek to deal with the unprecedented number of issues emerging both within the Agency and in the funded agencies especially in the matter of provision of services that promote the development, welfare and protection of children and families. The CMT has a range of standing agenda items reflected in a dedicated CMT risk management register.

As resources become constrained the key focus remains on the provision of services to at-risk children and families.

The Board and the Agency acknowledge that in these challenging times, that due to resource constraints relevant to the Agency it is possible that the effective operation of key controls may become compromised during the Emergency period and the ability of the Agency to act on internal control recommendations arising from the Review of Effectiveness for 2019 in a timely manner may also be compromised. The degree to which controls and action plans may be compromised will depend, among other matters, on the length of the Emergency period and at this stage the Board is uncertain as to what that timeline might be, and consequently how internal controls and action plans might be impacted.

To date, the Agency has been advised of the following matters:

- (i) The substantial proportion of resources of the Internal Audit team that provides services to both the Agency and HSE has been re-deployed and the impact on the performance of the 2020 Internal Audit Plan is unknown;
- (ii) Certain resources within the Financial Compliance Unit have been redeployed and the impact on the work plan for 2020 is unknown;
- (iii) Certain Quality Assurance personnel have been redeployed and the overall impact on the work plan for 2020 is unknown;
- (iv) A number of funded agencies have indicated that they may come under financial pressure due to the reduction in fund raising activities and corporate and other donations which may impact on the effectiveness of their own systems of internal control for the period of the Emergency.

The Board will provide a full and complete analysis of the impact of COVID-19 on the internal control environment in 2020 when it presents its annual financial statements and statement on internal control for the year ending 31 December 2020

Conclusion

Tusla is an organisation undergoing significant change and its control systems still rely on many manual and legacy systems inherited at foundation in 2014. These systems are planned to be replaced on a phased basis, over the next three to five years. The issues with respect to non-compliance identified within the control environment referenced in this statement underline the need for specific and sustained focus on improvement and compliance at all levels of the organisation. The Agency recognises that there is a need for continued emphasis on and development of the control environment and a focus on the need to drive a single organisation-wide culture of compliance. The Agency plans to conduct a review of the assurance process in 2020 to ensure that it continues to meet best standards.

The Child and Family Agency control environment, risk management processes and assurance arrangements are improving and where there are outstanding recommendations from Internal Audit, Quality Assurance Directorate, Financial Compliance Unit, the Office of the Comptroller and Auditor General, HIQA and the Data Protection Commission, management action to meet these recommendations will be monitored by the Board and its committees

and will be reassessed in the 2020 review of the system of internal controls, taking into account the comments expressed in the preceding paragraphs with regard to COVID-19

Finally, I would like to thank my colleagues within the Child and Family Agency that helped us deliver a service which is accountable, consistent and transparent.



Pat Rabbitte

Chairperson

Date: 19th June 2020

Report of the Comptroller and Auditor General (Page 1)



Ard Reachtaire Cuntas agus Ciste Comptroller and Auditor General

Report for presentation to the Houses of the Oireachtas Child and Family Agency

Opinion on the financial statements

I have audited the financial statements of the Child and Family Agency for the year ended 31 December 2019 as required under the provisions of section 51 of the Child and Family Agency Act 2013. The financial statements comprise

- the statement of revenue income and expenditure
- the statement of capital income and expenditure
- the statement of financial position
- the statement of changes in reserves
- the statement of cash flows and
- the related notes, including a summary of significant accounting policies.

In my opinion, the financial statements

- properly present the state of the Child and Family Agency's affairs at 31 December 2019 and its income and expenditure for 2019
- have been properly prepared in accordance with the accounting standards specified by the Minister for Children and Youth Affairs as set out in the basis of preparation section of the accounting policies.

Basis of opinion

I conducted my audit of the financial statements in accordance with the International Standards on Auditing (ISAs) as promulgated by the International Organisation of Supreme Audit Institutions. My responsibilities under those standards are described in the appendix to this report. I am independent of the Child and Family Agency and have fulfilled my other ethical responsibilities in accordance with the standards.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Report on information other than the financial statements, and on other matters

The Child and Family Agency has presented certain other information together with the financial statements. This comprises the appendices to the financial statements, the annual report, the governance statement and Board members' report and the statement on internal control. My responsibilities to report in relation to such information, and on certain other matters upon which I report by exception, are described in the appendix to this report.

Non-compliant procurement

The statement on internal control discloses that in 2019 the Child and Family Agency continued to incur significant expenditure where the procedures followed did not comply with public procurement guidelines. The statement on internal control also sets out the steps taken or planned by the Agency to address the weaknesses that gave rise to this.

Fines by Data Protection Commission

Note 25 to the financial statements and the statement on internal control disclose that the Child and Family Agency incurred fines totalling €115,000 arising from two investigations undertaken by the Data Protection Commission into data breaches by the Agency. A final determination by the Commission in relation to a third investigation is awaited.

Seamus McCarthy
Comptroller and Auditor General

19 June 2020

Report of the Comptroller and Auditor General (Page 2)

Appendix to the report

Responsibilities of Board members

As detailed in the governance statement and Board members' report, the Board members are responsible for

- the preparation of financial statements in the form prescribed under section 51 of the Child and Family Agency Act 2013 and accounting standards specified by the Minister for Children and Youth Affairs
- ensuring the regularity of transactions
- assessing whether the use of the going concern basis of accounting is appropriate, and
- such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Responsibilities of the Comptroller and Auditor General

I am required under section 51 of the Child and Family Agency Act 2013 to audit the financial statements of the Child and Family Agency and to report thereon to the Houses of the Oireachtas.

My objective in carrying out the audit is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement due to fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with the ISAs, I exercise professional judgment and maintain professional scepticism throughout the audit. In doing so,

- I identify and assess the risks of material misstatement of the financial statements whether due to fraud or error; design and perform audit procedures responsive to those risks; and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- I obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal controls.
- I evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures.

- I conclude on the appropriateness of the use of the going concern basis of accounting and, based on the audit evidence obtained, on whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Child and Family Agency's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my report. However, future events or conditions may cause the Child and Family Agency to cease to continue as a going concern.

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

Information other than the financial statements

My opinion on the financial statements does not cover the other information presented with those statements, and I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, I am required under the ISAs to read the other information presented and, in doing so, consider whether the other information is materially inconsistent with the financial statements or with knowledge obtained during the audit, or if it otherwise appears to be materially misstated. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

Reporting on other matters

My audit is conducted by reference to the special considerations which attach to State bodies in relation to their management and operation. I report if I identify material matters relating to the manner in which public business has been conducted.

I seek to obtain evidence about the regularity of financial transactions in the course of audit. I report if I identify any material instance where public money has not been applied for the purposes intended or where transactions did not conform to the authorities governing them.

I also report by exception if, in my opinion,

- I have not received all the information and explanations I required for my audit, or
- the accounting records were not sufficient to permit the financial statements to be readily and properly audited, or
- the financial statements are not in agreement with the accounting records.

Financial Statements

Statement of Revenue Income and Expenditure for the Year Ended 31st December 2019

	NOTE	2019	2018
		€'000	€'000
Revenue Income			
Department of Children and Youth Affairs (Vote 40, Subhead A3)		794,879	740,378
Department of Children and Youth Affairs (Vote 40, Other Subheads)	4	19,117	7,373
Other Revenue	4	1,898	4,359
Total Revenue Income		815,894	752,110
Expenditure - Pay and Pensions			
Wages and Salaries	5	233,412	218,337
Employer PRSI	5	22,164	20,165
Pensions	5	9,815	8,709
Agency Pay	5	32,283	33,043
Total Pay and Pensions		297,674	280,254
Expenditure - Non-Pay			
Foster Care and After Care Allowances	7	119,649	119,589
Independent Placement Provision	7	130,099	112,137
Community, Voluntary and Charitable Organisations	7	173,520	163,342
Legal Expenses and Guardian Ad Litem Costs	7	34,423	29,560
General Child Care Services	7	17,771	15,626
Office and Administration	7	44,411	36,794
Total Non-Pay		519,873	477,048
Total Expenditure		817,547	757,302
Net Operating (Deficit) for the Year		(1,653)	(5,192)

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

The primary financial statements of the Child and Family Agency comprise the Statement of Revenue Income and Expenditure, Statement of Capital Income and Expenditure, Statement of Financial Position, Statement of Changes in Reserves and Statement of Cash Flows. [NOTES 1 - 27](#) form part of the financial statements.



Pat Rabbitte
Chairperson

Date: 19th June 2020



Bernard Gloster
Chief Executive Officer

Date: 19th June 2020

Statement of Capital Income and Expenditure for the Year Ended 31st December 2019

	NOTE	2019 €'000	2018 €'000
Capital Revenue			
Department of Children and Youth Affairs (Vote 40, Subhead A3)		13,594	13,939
		13,594	13,939
Expenditure			
Capital Expenditure on Child and Family Agency Capital Projects	15(b)	14,434	13,206
		14,434	13,206
Net Capital (Deficit)/Surplus for the Year		(840)	733

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

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Pat Rabbitte
Chairperson

Date: 19th June 2020



Bernard Gloster
Chief Executive Officer

Date: 19th June 2020

Statement of Financial Position as at 31st December 2019

	NOTE	2019	2018
		€'000	€'000
Non-current Assets			
Property, Plant and Equipment			
Property	8	66,327	68,656
Plant and Equipment	9	2,847	5,318
Total Non-current Assets		69,174	73,974
Current Assets			
Inventories	10	19	17
Trade and Other Receivables	11	7,476	8,830
Cash and Cash Equivalents	12	16,897	10,227
Total Current Assets		24,392	19,074
Current Liabilities			
Trade and Other Payables	13	(66,962)	(59,062)
Total Current Liabilities		(66,962)	(59,062)
Net Current Assets / (Liabilities)		(42,570)	(39,988)
Creditors (amounts falling due after more than one year)			
Restricted Contributions	14	(503)	(590)
Total Net Assets		26,101	33,396
Capitalisation Account		69,172	73,974
Capital Retained Reserves		62	902
Revenue Retained Reserves		(43,133)	(41,480)
Capital and Reserves		26,101	33,396

The primary financial statements of the Child and Family Agency comprise the Statement of Revenue Income and Expenditure, Statement of Capital Income and Expenditure, Statement of Financial Position, Statement of Changes in Reserves and Statement of Cash Flows. **NOTES 1 - 27** form part of the financial statements.



Pat Rabbitte
Chairperson

Date: 19th June 2020



Bernard Gloster
Chief Executive Officer

Date: 19th June 2020

Statement of Changes in Reserves for the Year Ended 31st December 2019

	Capitalisation Account €'000	Capital Reserves €'000	Revenue Reserves €'000	Total €'000
Balance at 1 st January 2018	73,215	169	(36,288)	37,096
Net(deficit) for the year	-	(733)	(5,192)	(4,459)
Additions to non-current assets in the year	3,959	-	-	3,959
Less: Net Book Value of non-current assets disposed in the year	(58)	-	-	(58)
Less: Depreciation charge in the year	(5,316)	-	-	(5,316)
Add: Revaluation as at 31 st December 2018	2,174	-	-	2,174
Balance at 31st December 2018	73,974	902	(41,480)	33,396
Balance at 1st January 2019	73,974	902	(41,480)	33,396
Net (deficit) for the year	-	(840)	(1,653)	(2,493)
Additions to non-current assets in the year	742	-	-	742
Less: Net Book Value of non-current assets disposed in the year	(146)	-	-	(146)
Less: Depreciation charge in the year	(5,398)	-	-	(5,398)
Balance at 31st December 2019	69,172	62	(43,133)	26,101

The primary financial statements of the Child and Family Agency comprise the Statement of Revenue Income and Expenditure, Statement of Capital Income and Expenditure, Statement of Financial Position, Statement of Changes in Reserves and Statement of Cash Flows. [NOTES 1 - 27](#) form part of the financial statements.



Pat Rabbitte
Chairperson

Date: 19th June 2020



Bernard Gloster
Chief Executive Officer

Date: 19th June 2020

Statement of Cash Flows for the Year Ended 31st December 2019

	2019	2018
	€'000	€'000
Cash Flows from Operating Activities		
Surplus/(Deficit) for the current year (Revenue & Capital Account)	(2,493)	(4,459)
<u>Adjustments For:</u>		
Purchase of property, plant and equipment	742	3,959
(Increase)/Decrease in Inventories	(2)	2
Decrease in Trade and other receivables	1,354	222
Increase in Trade and other payables	7,898	5,261
Net Cash Flow from Operating Activities	7,499	4,985
Cash Flows from Investing Activities		
Purchase of property, plant and equipment	(742)	(3,959)
Increase/(Decrease) in Restricted Contributions	(87)	(104)
Net Cash Flow from Investing Activities	(829)	(4,063)
Net Cash Flow from Financing Activities	-	-
Net Increase in Cash and Cash Equivalents in the period	6,670	922
Cash and Cash Equivalents at the beginning of the period	10,227	9,305
Cash and Cash Equivalents at the end of the period	16,897	10,227

The primary financial statements of the Child and Family Agency comprise the Statement of Revenue Income and Expenditure, Statement of Capital Income and Expenditure, Statement of Financial Position, Statement of Changes in Reserves and Statement of Cash Flows. [NOTES 1 - 27](#) form part of the financial statements.



Pat Rabbitte
Chairperson

Date: 19th June 2020



Bernard Gloster
Chief Executive Officer

Date: 19th June 2020

Notes to the Financial Statements

NOTE 1 Accounting Policies

The basis of accounting and significant accounting policies adopted by the Child and Family Agency are set out below. They have all been applied consistently throughout the year and for the preceding year.

(a) Statement of Compliance

The financial statements have been prepared in accordance with Financial Reporting Standard (FRS) 102, subject to exceptions specified by the Minister, which have been outlined below. The financial statements have also been prepared in accordance with the Revised Code of Practice for the Governance of State Bodies, 2016.

(b) Basis of Preparation

These financial statements have been prepared under the historical cost convention. The financial statements are in the form approved by the Minister for Children and Youth Affairs.

Under the Child and Family Agency Act 2013, the Minister for Children and Youth Affairs specifies the accounting standards to be followed by the Child and Family Agency. The Child and Family Agency has adopted FRS 102 in accordance with the accounting standards issued by the Financial Reporting Council as promulgated by Chartered Accountants Ireland, subject to the following exceptions specified by the Minister a derogation regarding these treatments under FRS 102 has been received from the Department of Children and Youth Affairs:

1. Depreciation is not charged to the Statement of Revenue Income and Expenditure, rather it is charged to a reserve account: the Capitalisation Account. Reserve accounting is not permitted under Generally Accepted Accounting Principles (GAAP). Under those principles, depreciation must be charged in the revenue income and expenditure account;
2. Grants received from the State to fund the purchase of non-current assets are recorded in a Statement of Capital Income and Expenditure. Under Generally Accepted Accounting Principles (GAAP), capital grants are recorded as deferred income and amortised over the useful life of the related non-current asset, in order to match the accounting treatment of the grant against the related depreciation charge on the non-current asset;
3. Pensions are accounted for on a pay-as-you-go basis. The provisions of FRS 102 (Section 28, Employee Benefits) are not applied and the liability for future pension benefits accrued in the year has not been recognised in the financial statements; and
4. The State Claims Agency has identified claims that relate to the Child and Family Agency from the overall liability held by the State Claims Agency relating to the HSE. As the budget for these claims remains with the HSE and the Child and Family Agency is not funded for these claims the associated liability has not been recognised in the financial statements. Details regarding the future liabilities of this scheme as at 31st December 2019 are set out in [NOTE 23](#).

(c) Going Concern

The Child and Family Agency continues to provide services in line with the requirements of the Act and assumed responsibilities that were previously provided by:

- Children and Family Services operated by the HSE;
- The Family Support Agency;
- The National Educational Welfare Board; and
- The School Completion Programme operated by the Department of Children and Youth Affairs.

The accounts have been prepared on a going concern basis.

(d) Community, Voluntary and Charitable Organisations

The Child and Family Agency funds a number of service providers and bodies for the provision of health and personal social services on its behalf, in accordance with the provisions of Section 56 – Section 59 of the Child and Family Agency Act 2013. Before entering into such an arrangement, the Agency determines the amount of funding that it proposes to make available in the financial year. This is dependent upon the Agency's budget and the quantum of service it expects to be provided for that funding from each individual entity. This information is set out in nationally standardised documentation which is required to be signed by both parties to the arrangement. This funding is charged in the year of account to the Statement of Revenue Income and Expenditure.

(e) Fostering Payments

Statutory payments are made to foster parents for children in their care up to the age of 18 years. Aftercare payments are also made for young people post 18 years of age who either remain in full-time education or training or in other cases where support is required after reaching 18 years. Fostering payments are recognised in the financial statements on an accrual basis.

(f) Independent Placement Provision

Payments are made to private organisations contracted for the provision of foster care and residential services for children up to the age of 18 years requiring a foster care or residential placement and for aftercare placements post 18. Placement provision payments are recognised in the financial statements on an accrual basis.

(g) Income Recognition

The Child and Family Agency is funded mainly by monies voted to the Department of Children and Youth Affairs (Vote 40, Subhead A3). The Department advances funds to the Agency up to the approved level of expenditure or actual expenditure whichever is the lesser. The amount of Subhead A3 income and other Subhead income is recognised as income being the cash amount advanced by the Department in the financial year. Where funding has been advanced by DCYA at year end to fund payables in week one of the following year, this income is recorded as deferred income at year end and taken to account as income in the following year. Income in respect of administration and non-capital services is accounted for in the Statement of Revenue Income and Expenditure. Income in respect of capital services is accounted for in the Statement of Capital Income and Expenditure.

Income from all other sources is recognised on an accrual basis.

(h) Statement of Capital Income and Expenditure

A Statement of Capital Income and Expenditure is maintained in accordance with the accounting standards laid down by the Minister for Children and Youth Affairs. Capital funding is provided in the Child and Family Agency for construction/purchase of major assets, capital maintenance and miscellaneous capital expenditure not capitalised on the Statement of Financial Position.

(i) Foreign Currencies

Transactions denominated in foreign currencies are translated into euro at the rates of exchange prevailing at the accounting date and are included in the income and expenditure account for the year. Any difference arising on translation between transaction dates and payment dates are charged to the Statement of Revenue Income and Expenditure.

(j) Leases

Rentals payable under operating leases are dealt with in the financial statements as they fall due. The Child and Family Agency is not permitted to enter into finance lease obligations under the Department of Public Expenditure and Reform Public Financial Procedures, without Board approval and prior sanction.

(k) Capital Grants

Capital grant funding is recorded in the Statement of Capital Income and Expenditure. In addition to capital grant funding, some minor capital expenditure is funded from revenue. The amount of this revenue funding expended in the year in respect of minor capital is charged in full in the Statement of Revenue Income and Expenditure in the year. This accounting treatment, which does not comply with FRS 102, is a consequence of the exceptions to FRS 102 specified by the Minister.

(l) Tangible Non-current Assets and Capitalisation Account

Tangible non-current assets comprise Land, Buildings, Equipment and Motor Vehicles. Tangible non-current assets are stated at historic cost less accumulated depreciation.

The Agency commenced a fixed asset revaluation programme in 2016 with the Valuation Office and the first phase of this process selected the highest valued buildings and the land portfolio. A material reduction in the value of these assets was determined and this was reflected in the 2016 financial statements following sanction by the Department of Children and Youth Affairs. The revalued assets had been transferred to the Agency from the HSE at their holding net book value on the 1st January 2014 under the Child and Family Agency Act 2013. Fixed assets with a total value of €76.3m were transferred on that date.

The Valuation Office has previously valued the buildings using depreciated replacement cost as per FRS 102 Revaluation Model 17.15B "Under the revaluation model, an item of property, plant and equipment whose fair value can be measured reliably shall be carried at a revalued amount, being its fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses. Revaluations shall be made with sufficient regularity to ensure that the carrying amount does not differ materially from that which would be determined using fair value at the end of the reporting period." Depreciated replacement cost is defined as the current cost of replacing an asset with its modern equivalent asset less any deductions for physical deterioration and all relevant forms of obsolescence and optimisation. As part of this method of valuation, the value of the land underlying the asset reflects the cost of a site suitable for the modern equivalent facility but not necessarily the actual site occupied by the existing asset. The assets not in use by the Agency are presumed to be available for disposal and have been valued by reference to the market value of comparable properties in each location.

There are no revaluations of assets recorded for 2019, as the revaluation processes was stalled due to COVID-19. The Agency will continue with this revaluation programme for 2020.

In accordance with the accounting standards prescribed by the Minister for Children and Youth Affairs, expenditure on non-current asset additions is charged to the Statement of Revenue Income and Expenditure or the Statement of Capital Income and Expenditure, depending on whether the asset is funded by capital or revenue. Capital funded assets and revenue funded assets are capitalised if the cost exceeds certain value thresholds: €2,000 for computer equipment and €7,000 for all other asset classes. Asset additions below these thresholds which are funded from revenue are accounted for in the Statement of Revenue Income and Expenditure in the year of purchase. Asset additions below this threshold funded from Capital are included in **NOTE 15(b)** under 'Expenditure on the Child and Family Agency projects not resulting in Non-current Asset additions'. A breakdown of asset additions by funding source is provided in **NOTE 15(a)** to the Accounts. Depreciation is not charged to the Statement of Income and Expenditure over the useful life of the asset. Instead, a reserve account, the Capitalisation Account, is the reciprocal entry to the Non-current Asset Account. Depreciation is charged to the Non-current Assets and Capitalisation Accounts over the useful economic life of the asset.

Depreciation is calculated to write-off the original/cost valuation of each tangible non-current asset in line with their useful remaining life at the following rates:

- Land: not depreciated;

- Buildings: depreciated at 2.5% per annum;
- Art Installations: not depreciated;
- Modular structures (i.e. prefabricated/temporary): depreciated at 10% per annum;
- Work in progress: not depreciated;
- Equipment – computers, printers, software and ICT systems: depreciated at 33.33% per annum;
- Equipment – other: depreciated at 10% per annum; and
- Motor vehicles: depreciated at 20% per annum.

On disposal of a non-current asset, both the non-current assets and capitalisation accounts are reduced by the net book value of the asset disposal. An analysis of the movement on the Capitalisation Account is provided in the Statement of Changes in Reserves.

(m) Inventories

The Child and Family Agency stock is valued at the lower of cost or net realisable value. Cost is the purchase cost on a first-in, first-out basis.

(n) Accounting for Bad and Doubtful Debts

Known bad debts are written off in the period in which they are identified. Specific provision is made for any amount which is considered doubtful and the Agency has provided for debts which are greater than two years old.

(o) Pensions

Eligible Child and Family Agency employees and eligible employees of voluntary health services providers are members of various defined benefit superannuation schemes. Pensions are paid to former employees by the Child and Family Agency. The Child and Family Agency scheme is funded by the State on a pay-as-you-go basis for this purpose. Pension payments under the schemes are charged to the income and expenditure account when paid (see [NOTE 5](#)).

Contributions from the Child and Family Agency employees who are members of the schemes are payable to the Department of Children and Youth Affairs.

Under the Public Services Pensions (Single Scheme and Other Provisions) Act 2012, all new entrants to pensionable public service employment on or after 1st January 2013 are members of the Single Scheme. For the current financial year the Child and Family Agency has 1,467 staff on the Single Scheme. Employee deductions under the Single Scheme are paid to Department of Public Expenditure and Reform.

No provision is made in respect of pension benefits earned by employees and payable in future years under the pension scheme. This continues to be the treatment adopted by the Child and Family Agency following the accounting specifications of the Minister.

(p) Additional Superannuation Contribution (ASC)

From 1 January 2019 onwards, members of public services defined benefit pension schemes pay an additional superannuation contribution (ASC) arising from the Public Stability Agreement (2018-2020) and the Public Pay and Pensions Act 2017. ASC has replaced the pension-related deduction (PRD) which ceased at the end of 2018. While PRD was a temporary emergency measure, ASC is a permanent contribution. ASC only applies to staff who are members of a public service pension scheme, or who are in receipt of an allowance in lieu of membership of a public service scheme, including staff of the Child and Family Agency funded service providers if applicable. ASC collected by service providers as well as ASC deducted from the Child and Family Agency staff is payable to the Department of Children and Youth Affairs (see [NOTE 5](#)).

(q) Employee Short Term Benefits

Short-term benefits such as holiday pay are recognised as an expense during the year, and benefits that are accrued at year-end are included in the payables figure in the Statement of Financial Position.

(r) Critical Accounting Estimates and Key Judgements

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported for assets and liabilities as at the statement of financial position date and the amounts reported for revenues and expenses during the year. However, the nature of estimation means that actual outcomes could differ from those estimates. There were no judgements required that had a significant effect on amounts recognised in the financial statements for 2019.

NOTE 2 Board Members' Fees

	2019	2018
	€	€
Fees Payable		
Pat Rabbitte	20,520	-
Norah Gibbons	n/a	20,520
Gary Joyce	n/a	4,999
Rory O'Ferrall	11,970	11,970
Paul White	11,970	11,970
Áine Hyland	n/a	266
Deirdre Kiely	11,970	11,970
Sean Holland	n/a*	n/a*
Liam Irwin	11,970	8,484
Teresa Kilmartin	4,966	8,484
Pat McLoughlin	n/a	1,995
Anne O'Gara	11,970	3,188
Avril McDermott	11,970	6,577
Patricia Doherty	1,789	-
Total Board Members' Fees	99,095	90,423

*Fees Waived

Child and Family Board members are paid in accordance with the Code of Practice for the Governance of State Bodies and in line with the revised rates as detailed in the Financial Emergency Measures in the Public Interest (No2) Act 2009.

NOTE 3 Board Members' Expenses

	2019	2018
	€	€
Travel & Subsistence Expenses		
Pat Rabbitte	1,456	-
Sean Holland	1,185	804
Pat McLoughlin	-	947
Avril McDermott	341	40
Liam Irwin	894	766
Anne O'Gara	547	-
Total Board Members' Expenses	4,423	2,557

Travel and Subsistence payments in respect of Board members are those paid directly as well as costs outlaid by the Agency

NOTE 4 Other Revenue Sources**(a) DCYA Vote 40, Non-A3 Subhead Income**

	2019	2018
	€'000	€'000
1. Subhead B4 – Early Years Pre-School Inspectorate	3,417	2,425
2. Subhead C5 – Children & Young People's Services Committees	1,700	1,428
3. Subhead C5 – Domestic, Sexual & Gender Based Violence	1,500	-
4. Subhead C5 – Family Resource Centres	1,419	-
5. Subhead B8 – Outcomes for Children/QCBI	713	2,310
6. Subhead B8 – School Completion Programme	1,536	-
7. Subhead B7 – Area Based Childhood Programme	8,832	1,210
Total Other Revenue	19,117	7,373

1. Funding of Early Years Pre-school Inspectors – Early Years is an overarching term that includes Pre-School Services. The Child and Family Agency is responsible for inspecting pre-schools, play groups, day nursery, crèches, day-care and similar services which cater for children aged 0-6 years.
2. Funding of Children and Young People's Services Committees (CYPSC) – CYPSC are a key structure identified by government to plan and co-ordinate services for children and young people in every county in Ireland.
3. Funding for Domestic, Sexual & Gender Based Violence (DSGVB) – Additional funding to support the development of enhanced domestic, sexual and gender based violence services, including continued implementation of the Council of Europe Convention on Preventing & Combating Violence against Women and Domestic Violence and the Second National Strategy on DSGVB (2016-2021).
4. Funding Family Resource Centre (FRC) – Additional funding to support and develop existing FRCs and ensure services provided are aligned with the strategic objective of the Agency.
5. Funding of Outcomes for Children/Quality and Capacity Building Initiative(QCBI) – QCBI addresses the need for departments and agencies to consistently engage with and utilise implementation infrastructures, the need to collaborate and coordinate on cross-sectoral priorities, utilising the structures, model and brand of *Better Outcomes, Brighter Futures*, and ensuring that children and young people have appropriate centrality of focus in policy development and implementation.

6. Funding for School Completion Programme (SCP) – Additional funding allocated to SCPs for training in evidenced based programmes and research.
7. Funding of the Area Based Childhood (ABC) Programme – ABC is a prevention and early intervention initiative targeting investment in effective services to improve the outcomes for children and families living in areas of disadvantage.

(b) Other Income

	2019	2018
	€'000	€'000
Atlantic Philanthropies NOTE 4 (c)	-	2,095
EU Income Special Projects	204	-
Secondment Income	831	1,038
Other Specific Project Funding Income	-	58
Early Years Income	302	258
Miscellaneous Income	561	910
Total Other Revenue	1,898	4,359

(c) Atlantic Philanthropies

In 2015 a partnership agreement was entered into between the Agency and the Galway University Foundation (the managing agent for the Atlantic Philanthropies grant). This agreement was concluded in 2019.

NOTE 5 Pay and Pensions

(a) CEO Remuneration

	2019	2018
	€'000	€'000
<u>CEO Remuneration</u>		
Chief Executive Officer (CEO) Remuneration (Mr Bernard Gloster) Gross Pay*	53	-
Interim Chief Executive Officer (CEO) Remuneration (Mr Pat Smyth) Gross Pay**	125	44
Chief Executive Officer (CEO) Remuneration (Mr Fred McBride) Gross Pay***	-	180
<u>CEO Travel & Subsistence</u>		
Chief Executive Officer (CEO) Travel Costs (Mr Bernard Gloster)*	5	-
Interim Chief Executive Officer (CEO) Travel Costs (Mr Pat Smyth)**	-	-
Chief Executive Officer (CEO) Travel Costs (Mr Fred McBride)***	-	7

The CEO is a member of the Agency's statutory pension scheme and the pension entitlements do not extend beyond the standard entitlements of the public sector scheme.

* Mr Bernard Gloster was appointed CEO on the 16th September 2019 for a period of five years and pay shown is for the period to 31st December 2019

**Mr Pat Smyth was appointed Interim CEO from 1st October 2018 to 16th September 2019

*** Mr Fred McBride was appointed as CEO up to 30th September 2018.

(b) Senior Key Management Personnel

Excluding the remuneration of the Chief Executive Officer(s) detailed in **NOTE 5 (a)**, the total remuneration for all senior key management personnel is €0.905m for the 2019 financial year (2018: €0.772m). Key management personnel in the Agency consist of the Board, CEO and members of the Senior Management Team reporting to the CEO.

	2019	2018
	€'000	€'000
Summary Analysis of Pay Cost		
Basic Pay	223,347	208,479
Holiday Pay Accrual	(804)	(855)
Allowances	1,598	1,139
Overtime	507	473
Night duty	1,502	1,322
Weekends	4,295	4,402
On-Call	1,562	1,397
Arrears	1,405	1,980
Wages and Salaries	233,412	218,337
Employer PRSI	22,164	20,165
Pensions*	9,815	8,709
Total Child and Family Agency Pay	265,391	247,211
Agency Pay	32,283	33,043
Total Pay and Pensions	297,674	280,254
	2019	2018
	€'000	€'000
*Analysis of Pensions		
Ongoing pension payments	5,644	4,385
Once-off lump sums and gratuity payments	3,974	4,324
Death Gratuities	197	-
	9,815	8,709

During 2019 €7.68m was deducted for Additional Superannuation Contribution, 2018 €9.46m was deducted for Pension Related Deductions from the Child and Family Agency's staff.

During 2019 €0.77m Additional Superannuation Contribution, 2018 €0.81m Pension Related Deductions were deducted from service providers and payable to the Department of Children and Youth Affairs and the Department of Public Expenditure and Reform.

Holiday Accrual has reduced in 2019 due to a reduction of annual leave carried for the leave year April 2019 to March 2020.

(c) Termination Benefits

	2019	2018
	€'000	€'000
Termination benefits charged to the I&E	28.5	-
	28.5	-

The termination benefits above relate to a settlement with one staff member during the reporting period and associated legal cost were €1.5k.

The Agency granted no added years for pension purposes to staff members.

NOTE 6 Employments

	2019	2018
The number of employees by Area of Operation was as follows in whole time equivalents (WTEs) at 31st December 2019:	WTE	WTE
Social Work	1,533	1,453
Social Care	1,141	1,150
Psychology and Counselling	28	29
Other Support Staff Inc. catering	50	53
Other Health Professionals	153	111
Nursing	6	6
Family Support	115	132
Educational and Welfare Officer	99	97
Admin Grade 3 to 7	798	683
Management Grade 8 and Above	200	179
Total Child and Family Agency employees	4,123	3,893

NB: The headcount of staff at 31st Dec 2019 was 4,586 staff and at 31st December 2018 was 4,341.

These values do not include agency staff.

Total number of Child and Family Agency staff remuneration in excess of €60k:

A breakdown of total employee remuneration (including salaries and other benefits) over €60,000, in increments of €10,000, is required under DPER circular 13/2014.

From	To	2019	2018
€60,000	- €69,999	632	562
€70,000	- €79,999	210	200
€80,000	- €89,999	98	76
€90,000	- €99,999	47	41
€100,000	- €109,999	18	18
€110,000	- €119,999	4	9
€120,000	- €129,999	-	-
€130,000	- €139,999	-	1
€140,000	- €149,999	1	1
€150,000	- €159,999	-	-
€160,000	- €169,999	-	1
€170,000	- €179,999	1	1
		1,011	910

NOTE 7 Non-Pay Expenditure

	2019	2018
	€'000	€'000
Fostering Care and After Care Allowances		
Statutory Foster Care Allowances	90,631	93,267
After Care Allowances	21,703	20,623
Other Care Allowances	7,315	5,699
	119,649	119,589
Independent Placement Provision		
Foster Care Provision	22,119	21,309
Unaccompanied Minors	4,465	4,465
Residential Provision	103,515	86,363
	130,099	112,137
Community, Voluntary and Charitable Organisations		
Section 56 – Section 59 Arrangements <i>(447 payees)</i>	(Appendix 1)	123,189
Schools Completion Programme <i>(107 payees)</i>	(Appendix 2)	25,442
Family Resource Centre <i>(123 payees)</i>	(Appendix 3)	18,535
Family Support Service Counselling <i>(289 payees)</i>	(Appendix 4)	6,354
		173,520
		163,342

NB: As some entities are funded through multiple streams, the total number of individual entities funded was 749.

	2019	2018
	€'000	€'000
Legal Expenses and Guardian Ad Litem Costs		
Child and Family Agency Legal Services	13,268	13,417
Guardian Ad Litem Costs*	8,350	8,443
Guardian Ad Litem Legal Fees*	6,163	6,210
	6,393	1,256
Third Party Legal Costs		
Other Legal Costs	249	234
	34,423	29,560

* Guardian Ad Litem and their legal representatives are appointed by the court service. Although the Guardian Ad Litem is independent of the parties to the court proceedings, their fees are discharged by the Child and Family Agency in accordance with the Child Care Act 1991.

	2019	2018
	€'000	€'000
General Childcare Services		
Medical Costs	811	842
Therapy/Psychology Costs	4,834	3,991
Transport Costs	1,247	1,231
Recreation Costs	632	590
Heat, Power and Light	1,545	1,428
Cleaning and Waste Disposal	1,688	1,402
Furniture, Crockery and Hardware	684	718
Bedding and Clothing	206	188
Security and Alarm Costs	1,605	1,339
Vehicle Costs	550	617
Catering and Provisions	1,966	1,801
Creative Community Alternatives (CCA)	1,508	848
Other Sundry Expenses	495	631
	17,771	15,626

	2019 €'000	2018 €'000
Office and Administration		
Rent and Rates	9,332	7,510
Maintenance	2,459	1,348
Lease Interest, Bank Interest and Charges	21	23
Prompt Payment Interest and Compensation	103	313
Administrative Fines*	115	-
Insurance	517	516
Audit Fees	95	86
Professional Services	4,919	3,614
Bad and Doubtful Debts	121	-
Education and Training	2,271	2,324
Travel and Subsistence	13,076	11,710
General Office Expenses	4,243	2,979
Printing, Postage and Stationery	2,067	1,928
Telecoms	2,537	2,312
Computers and Systems Maintenance	2,364	2,020
Memberships, Licences and Subscriptions	171	111
	44,411	36,794

*Administrative fines charged to Tusla from Data Protection Commission in 2019 for data breaches.

NOTE 8 Non-current Assets - Property

	Land €'000	Buildings €'000	Work in Progress €'000	Total €'000
Cost/Valuation				
At 1 st January 2019	6,024	73,217	-	79,241
Additions in the year	-	-	-	-
Transfers from Work in Progress	-	-	-	-
Revaluation (NOTE 1 (I))	-	-	-	-
Disposals	-	(146)	-	(146)
At 31st December 2019*	6,024	73,071	-	79,095
Depreciation				
At 1 st January 2019	-	(10,585)	-	(10,585)
Charge for the Year	-	(2,183)	-	(2,183)
At 31st December 2019	-	(12,768)	-	(12,768)
Net Book Values				
At 31st December 2019	6,024	60,303	-	66,327
At 31st December 2018	6,024	62,632	-	68,656

*The Agency commenced a fixed asset revaluation programme in 2016 with the Valuation Office and the first phase of this process selected the highest valued buildings and the land portfolio. All Land has been revalued. €54m of the Buildings remains to be revalued.

NOTE 9 Non-current Assets - Plant and Equipment

	Motor Vehicles €'000	Equipment €'000	Work In Progress €'000	Total €'000
Cost/Valuation				
At 1 st January 2019	2,877	8,600	-	11,477
Additions in the year	118	624	-	742
Transfers from Work in Progress	-	-	-	-
Disposals	-	-	-	-
At 31st December 2019	2,995	9,224	-	12,219
Depreciation				
At 1 st January 2019	(1,249)	(4,910)	-	(6,159)
Charge for the Year	(559)	(2,654)	-	(3,213)
At 31st December 2019	(1,808)	(7,564)	-	(9,372)
Net Book Values				
At 31st December 2019	1,187	1,660	-	2,847
At 31st December 2018	1,628	3,690	-	5,318

NOTE 10 Inventories

	2019 €'000	2018 €'000
Inventory of consumable items	19	17
	19	17

NOTE 11 Trade and Other Receivables

	2019 €'000	2018 €'000
Prepayments	2,983	3,224
Other Receivables		
Payroll Technical Adjustment	2,078	2,353
Superannuation and Pension Levy Income Accrual Account	874	1,788
Payroll Overpayments	1,066	1,054
Sundry Receivables	1,242	1,059
Guardian Ad Litem VAT Refunds	8	8
Gross Receivables	8,251	9,486
Less: Provision for Doubtful Debts	(775)	(656)
Total Receivables	7,476	8,830

NOTE 12 Cash and Cash Equivalents

	2019	2018
	€'000	€'000
Bank	16,879	10,208
Cash and Cash Equivalents	18	19
	16,897	10,227

NOTE 13 Trade and Other Payables

	2019	2018
	€'000	€'000
Trade Payables (Revenue Account)	6,141	6,804
Trade Payables (Capital Account)	159	44
Accruals Non-Pay (Revenue Account)	21,152	18,188
Accruals Foster Care and Foster Care Allowances	3,243	3,332
Accruals Independent Placement Provisions	2,797	5,750
Advance Funding from 2020 Allocation	6,853	-
Total Trade Payables	40,345	34,118

	2019	2018
	€'000	€'000
Accruals Pay	17,747	15,521
Holiday Pay Accrual	2,010	2,844
Taxes and Social Welfare	6,860	6,579
Total Other Payables	26,617	24,944
Total Trade and Other Payables	66,962	59,062

NOTE 14 Restricted Contributions (Philanthropic Funding, Donations and Bequests)**(a) Restricted Contributions - Income and Expenditure**

	2019	2018
	€'000	€'000
Opening Balance at 1st January	590	694
Income Received	909	2,294
Expenditure	(996)	(2,398)
Closing Balance at 31st December	503	590

Income and Expenditure Atlantic Philanthropies

In 2015 a partnership agreement was entered into between the Agency and the Galway University Foundation (the managing agent for the Atlantic Philanthropies grant). €7.84m has been granted to the Agency over a three- year period with the agreed objective “to transform child and family services in Ireland by embedding prevention and early intervention into the culture and operation of the new national family support system”. The amounts are restricted insofar as that they must be spent in accordance with the purposes for which the funding was granted.

NOTE 14 (a) includes €192k which is a balance brought forward received from Atlantic Philanthropies in 2018 expended in 2019.

	2019 €'000	2018 €'000
Opening Balance at 1st January	192	204
Income Received (Atlantic Philanthropies)	-	2,083
Expenditure (Atlantic Philanthropies) (Note 14 (b))	(113)	(2,095)
Funding Returned to Galway University Foundation	(79)	-
Closing Balance at 31st December	0	192

(b) Atlantic Philanthropies Expenditure

	2019 €'000	2018 €'000
Staff Costs	6	925
Office and Administration Costs	2	161
Operational Costs	105	1,009
Total Atlantic Philanthropies Expenditure	113	2,095

NOTE 15 Capital Expenditure

	2019 €'000	2018 €'000
(a) Additions to Non-current Assets in the Year		
Property	-	54
Plant and Equipment	742	3,905
	742	3,959
Funded from DCYA Capital Vote 40	713	3,660
Funded from DCYA Revenue Vote 40	29	299
	742	3,959

(b) Analysis of expenditure charged to Capital Income and Expenditure Account

Expenditure on the Child and Family Agency's own assets (Capitalised)	742	4,341
Expenditure on the Child and Family Agency's projects (Non Capitalised)	13,692	8,865
Total Expenditure on Child and Family Agency Projects charged to Capital	14,434	13,206
Total Capital Expenditure per Capital Income and Expenditure Account	14,434	13,206

NOTE 16 Pensions

Eligible staff employed in the Child and Family Agency are members of defined benefit superannuation schemes. The pensions paid to staff who retired since the establishment of the Agency are recognised in the Statement of Income and Expenditure in the year in which they become payable. In accordance with the derogation regarding Section 28 of FRS 102, no provision is made in the financial statements in respect of future pension benefit liabilities. Superannuation contributions from employees who are members of these schemes contribute to the Agency's Revenue recognised in the Statement of Income and Expenditure within the subheading 'Department of Children and Youth Affairs'. The pension charge to the Statement of Revenue Income and Expenditure for 2019 was €9.81m (2018 : €8.09m) which included payments in respect of one-off lump sums and gratuity payments on retirement of €4.17m (2018 : €4.32m).

NOTE 17 Capital Commitments

	2019	2018
	€'000	€'000
Future tangible non-current assets purchase commitments:		
Within one year	15,394	17,194
After one year but within five years	-	-
After five years	-	-
	15,394	17,194
Contracted for but not provided in the financial statements	12,344	2,880
Included in the Capital Plan but not contracted for	3,050	14,314
	15,394	17,194

NOTE 18 Properties

Properties were transferred to the Child and Family Agency on establishment at 1st January 2014 by a Deed of Agreement which has been signed by the Ministers for Health and for Children and Youth Affairs. The Child and Family Agency continues to work with the HSE to agree any further transfers.

	2019	2018
	No of	No of
	Properties	Properties
The Child and Family Agency estate comprises the following:		
Freehold Properties	109	81
Leasehold	139	110
	248	191

In addition to the above properties there are properties owned by HSE which are currently being utilised by the Agency for service provision. There are also a number of properties that are currently under review by the HSE and the Agency to determine those which should be transferred to the Child and Family Agency.

NOTE 19 Operating Leases

	2019		2018	
	Land and	Other	Land and	Other
	Buildings		Buildings	
	€'000	€'000	€'000	€'000
The Child and Family Agency had total commitments under non-cancellable operating leases as detailed below:				
Within one year	7,490	-	5,844	-
In the second to fifth years inclusive	13,047	-	13,469	-
In over five years	23,641	-	24,947	-
	44,178	-	44,260	-

Operating lease payments recognised as an expense in 2019 were €8.1m

NOTE 20 Taxation

The Child and Family Agency (CHY21524) is exempt to the following taxes:

- Section 207 and 208, Taxes Consolidation Act 1997 (Income Tax);
- Section 609, Taxes Consolidation Act 1997 (Capital Gains Tax);
- Section 266, Taxes Consolidation Act 1997 (Deposit Interest Retention Tax);
- Sections 76 and 78, Taxes Consolidation Act 1997 (Corporation Tax);
- Sections 17, 22 and 76 of the Capital Acquisitions Taxes Consolidations Act 2003 (Capital Acquisitions Tax);
- Section 82, Stamp Duty Consolidation Act 1999 (Stamp Duty); and
- Chapter 8A, Part 6, Taxes Consolidation Act 1997 (Dividend Withholding Tax).

These exemptions extend to the income and property of the Child and Family Agency.

In 2016 the Agency obtained advice from the Revenue Commissioners regarding the VAT status of Guardian Ad Litem invoices paid by the Agency in 2014 and 2015. The Revenue Commissioners confirmed that this service was exempt from VAT and advised of the steps to be taken by the Agency to recoup the VAT charged in these periods. The Agency has continued collecting these amounts owed from the relevant suppliers. The amount owing at 31st December 2019 is €8k, the Agency continues to pursue these debts.

NOTE 21 Insurance

The Child and Family Agency has insurance cover with a third-party provider for professional indemnity, property and other specific service related policies. As a delegated State Authority, the Agency's risks are delegated to the State Claims Agency this covers employers liability, public liability and motor cover. The State Claims Agency indemnifies a third party in respect of personal injury and third party property damage claims which are the result of the delegated State Authority's negligence.

NOTE 22 Compliance with Prompt Payment Legislation

During 2019, the Agency paid €27k (2018: €35k) to suppliers in relation to prompt payment interest. Interest was paid only in cases where payment was made 45 days after the invoice date as this was in accordance with the terms and conditions as specified on the Agency's Purchase Order document. The prompt payment legislation stipulates that interest must be paid to suppliers where payment is more than 30 days after the invoice date unless supplier contracts have specified longer credit terms. In addition, associated compensation was not paid but has been provided for by the Agency.

Revised regulations in relation to prompt payment, European Communities (Late Payment in Commercial Transactions) Regulations 2012 (SI No. 580/2012), came into effect in March 2013. This legislation provides for the payment of interest and compensation to suppliers in respect of late payment of invoices. Suppliers are not automatically paid prompt payment compensation in relation to late payment of invoices; however, suppliers may claim this compensation.

NOTE 23 State Claims Agency

The States Claims Agency identified the claims that relate to the Child and Family Agency from the overall liability held by the State Claims Agency relating to Tusla and the HSE. The outstanding liability relating to Tusla, estimated by the State Claims Agency as at 31st December 2019, was €59.2m (2018: €50.8m). In 2019 the budget for these claims has remained with the HSE and the 2019 finalised claims of €4.02m (2018: €2.36m) were settled by the HSE. The Child and Family Agency is not yet funded for claims processed by the State Claims Agency.

NOTE 24 Contingent Liabilities

The Child and Family Agency is currently dealing with litigation matters which may generate liabilities depending on the outcome of the legal proceedings. With regard to standard legal cases the Agency's insurance, which covers professional indemnity, property and other specific service-related policies, would be sufficient to cover the majority of costs. There is, however, an element of uncertainty due to indemnity limits and certain policy conditions. The Agency is not in a position to estimate any potential liabilities arising from these proceedings. The financial effects of any uninsured contingencies have not been provided for in the financial statements.

NOTE 25 Events after the Reporting Period Data Protection Commissioner

The DPC has conducted three statutory inquiries following full disclosures of data breaches by Tusla in 2018/2019. Tusla has had extensive engagement with the DPC during these Inquiries and has submitted extensive detailed remediation plans to address certain data protection issues identified during the Inquiries. Provisions under the General Data Protection Regulation (the "GDPR") and the Data Protection Act 2018 allow the DPC to impose a

corrective measure and/or administrative penalties up to €1m on a public body as a result of inquiries. The DPC has made a final decision of unintentional infringement of Articles 32(1) and 33(1) of the GDPR in two investigations and has imposed administrative fines totalling €115k which have been provided for at 31st December 2019.

The DPC has recently issued its draft decision on the third statutory inquiry and has signalled its intention to impose two administrative fines based on its findings. These proposed fines are not provided for in the 2019 financial statements as they cannot be reliably estimated at this time.

Tusla has actively engaged with the DPC to support its inquiry processes and is fully committed to implementing the required changes which will enable compliance with data protection legislation

COVID-19

COVID-19 emerged as a risk in early 2020. The financial impact of the threat at this point in 2020 is unknown as is the impact on the safe and effective operating of Tusla's services. Tusla's priority at this time is to ensure that it continues to provide services to the Ireland's most vulnerable children and families, whilst taking all necessary measures to reduce the spread of COVID-19.

The COVID-19 pandemic (COVID-19) in Ireland which commenced in Ireland in March 2020 and has continued in various iterations of restrictive measures up to the date of the approval of the financial statements has had an impact on the Agency and its operations, in common with other agencies and businesses.

The Board has considered the matter of reporting on key uncertainties that arise and these are summarised below. However, given the fundamental nature of the uncertainties posed by COVID-19 and the uncertainty over for how long restrictions will continue to apply into the future and how pervasive they will be. It is entirely possible that other uncertainties will arise that are not included below but will have a significant impact on the Agency and its future operations.

(i) Response to COVID-19

The COVID-19 Emergency has impacted and will continue to impact on the resources available within the Agency, to the HSE in the context of shared services provided to the Agency, and in funded agencies. These resources constraints arise at a time when, as a consequence of COVID-19 and public measures, the demand for services for at-risk children and families is increasing and the Agency acknowledges the potential for longer term consequences in the demand for services. Arising from COVID-19, the Board and the Agency established a Crisis Management Team (CMT) to seek to deal with the issues emerging both within the Agency and in the funded agencies especially in the matter of services to at-risk children and families. The CMT meets daily under the leadership of the CEO and has a range of standing agenda items reflected in a dedicated CMT risk-management register.

As resources become constrained the key focus remains on the provision of services to at risk children and families.

(ii) Going concern

The Board considers that, having regard to the essential nature of service provided by the Agency, that the Agency will continue to be funded by the Department of Children and Youth Affairs (DCYA) and the Exchequer for the foreseeable future and will manage its operations within the context of allocated resources. Hence the Board is of the opinion that the Agency will remain as a going concern.

(iii) Carrying amount of assets and liabilities as of the balance sheet date

The Board has reviewed the matter of all post balance sheet events, including COVID-19, and their impact on the carry amount of assets and liabilities as of the balance sheet date in the context of adjusting and non-adjusting events as required by FRS 102.

The Board has not identified any adjusting post balance sheet events arising to the carrying amount of assets and liabilities as a consequence of the Emergency. The Board has a policy of carrying Land and Buildings at valuation and hence does acknowledge that the valuation of Land and Buildings as of 31 December 2020 and future years may be impacted by COVID-19 and will report on such impact in the financial statements for the year ending 31 December 2020.

(iv) Impact of the COVID-19 Emergency on funded agencies that deliver services to at-risk children and families

The Board is cognisant that many of the agencies that are funded by the Agency to provide services to at risk children and families will be challenged by COVID-19 both as to their ability to remain as going concerns due to the challenge in fund raising activities and/or because they may have to significantly curtail operations to reflect available resources. The Agency may be challenged with formulating a response to these uncertainties in conjunction with the DCYA and the Exchequer.

(v) Challenges for the system of internal controls

The Board and the Agency acknowledge that in these challenging times it is possible that, due to resource constraints relevant to the Agency, it is possible that the effective operation of key controls may become compromised during the Emergency period and the ability of the Agency to act on internal control recommendations arising from the Review of Effectiveness for 2019 in a timely manner may also be compromised. The degree to which controls and action plans may be compromised will depend, among other things, on the length of the Emergency period and at this stage the Board is uncertain as to what that timeline might be and as a consequence how internal controls and action plans might be impacted.

To date, the Agency has been advised of the following matters:

- (a) The substantial proportion of resources of the Internal Audit team that provides services to both the Agency and HSE have been redeployed and the impact on the performance of the 2020 Internal Audit Plan is unknown;
- (b) Certain resources within the Financial Compliance Unit have been re-deployed and the impact on the work plan for 2020 is unknown;
- (c) Certain Quality Assurance personnel have been redeployed and the overall impact on the work plan for 2020 is unknown;
- (d) A number of funded agencies have indicated that they may come under financial pressure due to the reduction in fund raising activities, corporate and other donations which may impact on the effectiveness of their own systems of internal controls for the period of the Emergency.

The Board will provide a full and complete analysis of the impact of COVID-19 on the internal control environment in 2020 when it presents its annual financial statements and statement on internal control for the year ending 31st December 2020.

NOTE 26 Related Party Transactions

Services provided by the HSE

Since the creation of the Child and Family Agency, the HSE has provided some administrative services for the Agency in the areas of Finance, HR, Payroll, Procurement, Estates, FOI, banking arrangements, Internal Audit. These services are governed through a Memorandum of Understanding and subsidiary Service Level Agreements. The Agency paid an amount of €285k for payroll services in 2019, with no charge for the other administrative services. On creation of the Agency an amount of €7m was agreed to be paid to HSE annually for the provision of Psychology services and this amount was paid in 2019.

Other

In accordance with the Ethics in Public Office Acts 1995 and 2001 the Agency requires all staff Grade VIII and above (or equivalent) to complete an annual Ethics Return declaring any interests as specified which could materially influence them in the performance of the function of their position.

NOTE 27 Approval of Financial Statements

The financial statements were approved by the Board on 29th May 2020.

Appendices -Summary by Grant Type, Service and Region

	€'000 2019	€'000 2018
Regional Service Level Agreements	60,859	61,708
Domestic Sexual & Gender Based Violence (DSGBV)	23,856	22,418
Residential Services	21,297	20,712
Area Based Childhood Programme (ABC)	8,017	1,322
Creative Community Alternatives (CCA)	5,030	3,447
National Grants	1,598	2,123
Adoption	1,300	970
Children and Young Peoples Services Committees (CYPSC)	401	214
Quality and Capacity Building Initiative (QCBI)	384	2,177
National - Early Years	229	122
Irish Refugee Programme	218	208
Total Section 56	123,189	115,421
School Completion Programme	25,442	23,933
Family Resource Centres	18,535	17,544
Family Support Service Counselling Payments	6,354	6,444
Total Other	50,331	47,921
Total Grant Payments	173,520	163,342

Appendix 1

Section 56 – Section 59	€'000
Total Payments less than €50,000	3,172
<u>Payments equal to or greater than €50,000</u>	
Barnardos	9,224
Extern Organisation	6,961
Daughters of Charity	4,954
Foróige	4,300
Focus Ireland	3,409
Youth Advocate Programmes (Yap)	3,334
Peter McVerry Trust	3,292
Don Bosco Care	2,829
St Bernards Children's Services	2,506
Traveller Families Care	2,296
Empowerment Plus	2,141
Sonas Domestic Violence Charity	2,134
Smyly Trust Services	2,045
Crosscare	1,981

Home Again	1,860
The Cottage Home	1,625
Salvation Army	1,572
Childhood Development Initiative (CDI)	1,519
Bessborough Centre	1,462
Good Shepherd Cork	1,378
Dublin Rape Crisis Centre	1,373
Saoirse Housing Association	1,288
Aoibhneas Ltd	1,206
Empowering People In Care (Epic)	1,155
Kildare Youth Services	1,154
Niche Health Project (Cork)	1,143
Clarecare	1,129
Limerick Social Services Centre	1,040
Adapt	988
Cope	955
Clondalkin Behavioural Initiative	900
Streetline	809
Northside Partnership	804
Early Learning Initiative	796
Paul Partnership	781
The Homeless Girl's Society	741
Womens Aid	719
Clare Haven Services	715
Wellsprings - Mercy Childcare	658
Home Youth Liaison Service	653
Louth Leader Partnership	636
Bray Womens Refuge Housing	634
I.S.P.C.C.	599
Irish Foster Care Association	582
Galway Rape Crisis Centre	561
Cuan Saor	560
Kilkenny Womens Refuge	544
Oasis Housing Association	542
Donegal Womens Domestic Violence Service	542
Praxis Care Group	529
Drogheda Womens Refuge	525
An Cosán Shanty Education & Training	522
Ballyfermot Chapelizod Partnership	507
Adapt Kerry	497
Lifestart	493
Womens Aid Dundalk	489
Wexford Womens Refuge	484
Dublin Institute of Technology	482
Rape Crisis Midwest	471
Meath Springboard Family Support	468
Youth New Ross	459

Young Ballymun	452
Meath Womens Refuge	415
Daughters Of Charity Community Services	415
North Tipperary Community Services	413
Bray Area Partnership	413
Cuanlee	407
Cúnamh	400
Cloyne Diocesan Youth Services	393
Springboard Project	390
Mayo Womens Refuge & Support Services	387
St Catherine's Community Services Centre	365
Darndale Belcamp Integrated Childcare Service	360
Youth Service Board Limerick	359
Carrs Child And Family Services	355
Aster Family Support	349
St Brigid's Family and Community Centre	334
Safe Ireland	330
West Cork Women Against Violence	330
North Clondalkin Integrated Family School	327
Our Lady's Nursery Ballymun	327
Sligo Family Support	321
Sexual Violence Centre Cork	321
Mercy Family Centre	320
Domestic Violence Advocacy Service	318
St Brigid's Day Nursery	317
Teach Tearmainn Housing Association	316
Active Connections	312
Pact	309
St Helena's Childcare Centre	308
Esker House Womens Refuge And Support	303
Rape Crisis & Sexual Abuse Counselling	301
County Wicklow Community Partnership	296
Kerry Rape Crisis Centre	274
North Tipperary Development Company	270
Neighbourhood Youth Project	269
Kerry Diocesan Youth Service	268
St Louise's Day Nursery	265
Tír Na nÓg Early Childhood Care	263
Waterford Rape Crisis Centre	256
Wexford Rape Crisis Centre	254
Familibase	253
Donegal Sexual Abuse & Rape Crisis Centre	251
Offaly Domestic Violence Support Service	251
Dundalk Rape Crisis Centre	246
St Vincent's Day Nursery	242
Amen Support Services	240
Edenmore Day Nursery	235

New Communities Partnership	230
Springboard Project Raphoe	228
Deansrath Family Centre	225
The Cari Foundation	225
Mahon FRC	210
St Anne's Day Nursery	201
Tearmann	200
Aosóg After School Project	200
Donegal Youth Service	200
Bonnybrook Day Nursery	197
Kilkenny Rape Crisis Centre	195
Mayo Rape Crisis Centre	194
Sligo County Child Care Committee	193
Laois Support Services Against Domestic Abuse	193
Kilkenny Community Early Years Project	190
Carlow South Leinster Rape Crisis Centre	189
Tipperary Rape Crisis & Counselling Service	189
Mead Day Care Centre	185
Sligo Springboard	185
Longford Womens Link	183
Sligo Family Centre	180
You Are Not Alone - North Cork Domestic Violence	177
Goldenbridge Early Childhood	177
One Stop Shop Cork	171
Togher Pre School & Family Centre	170
The First Step Trust	169
Ballygall Schools & Counselling & Family Service	169
Trinity College Dublin	169
Tír Boghaine	162
Clonmel Community Mothers	161
Mná Feasa Domestic Violence Project	160
Mounttown Neighbourhood Youth	159
Roscommon Integrated Development Company	158
Cox's Demense Youth & Community Project	157
Friends of Tacu	154
The Marian Centre Ltd	145
First Steps Rowlagh	139
Anew Support Service	136
Carlow Women's Aid	134
Cruthu Foundation	130
DVR Oughterarad Galway	130
Teach Oscail FRC	130
Carlow Regional Youth Service	129
Kilbarrack/Foxfield Day Nursery	128
Regional Sexual Abuse/Tullamore Rape Crisis	127
Westmeath Support Services	123
Family Resource Centre, Tyrone Place Inchicore	123

Doras Bui	123
Athlone Rape Crisis Centre	123
Tipperary Regional Youth Service	122
Early Childhood Ireland	122
Alcohol Forum	121
Shanakill FRC	118
Moatview Day Nursery	118
Roscommon Safelink Ltd	117
Hill Street FRC	115
Newbury House Family Centre	115
Vita House Family Centre	112
Phoenix Community Resource Centre	112
Ballyboden Children's Centre	111
Ballyhaunis FRC	110
St Michael's Family Life Centre	109
Donegal Womens Centre	109
Gorey Youth Needs Group	108
Letterkenny Youth And Family Services	100
National Family Support Network	100
St Canice's Community Action Ltd	100
Pavee Point Travellers Centre	100
Clare Youth Service	99
Ferns Youthwork Ireland	99
Hedge School Therapy	97
South West Wexford Community Development Group	95
Northside Inter Agency Project	93
County Dublin Vec	91
West Dublin YMCA	91
Genesis Psychotherapy & Family Therapy	90
Mayo Traveller Support Group	89
Cobh FRC	89
ParentStop CLG	86
Before 5 Family Centre	85
The Mens Development Network	83
Boyle FRC	83
Clonmel Community Resource Centre	82
The Crann Support Group Ltd	82
Cork County Childcare Committee	82
Westmeath Community Development	79
Leitrim Integrated Development Company	78
Raheen FRC	73
St Aidan's School	73
Innishmore Family Centre	72
Lifestart National Office	69
Kenmare FRC	69
RIALTO SPRINGBOARD PROJECT	69
Cherish t/a One Family	68

Southside Partnership	68
Ballina FRC	67
Parentline	66
Cork City Childcare Company	66
Glenfields Community Childcare	65
Homestart	64
Youth Work Ireland - Galway	62
Listowel FRC	62
UNESCO Child and Family Research Centre, NUI Galway	60
Knockanrawley Resource Centre	60
Drogheda Lifestart	59
Waterford & South Tipperary Community Youth Services	58
YMCA Ireland Parents And Kids Together (PAKT)	58
Kerry Family Resource & Counselling Centre	56
Inishowen Development Partnership	55
FACT Ballincollig FRC	55
FORUM CONNEMARA LTD	54
CURAM Claremorris	54
Golf Course Road Community Centre	54
Arlington Novas Ireland	53
Castleisland FRC	53
Parents First (Laois/Offaly)	52
Northside FRC	51
	123,189
Total	

Appendix 2

Schools Completion Programme Payments	€'000
Total Payments less than €50,000	305
<u>Payments equal to or greater than €50,000</u>	
City of Dublin ETB	1,546
Kildare Wicklow ETB	1,321
Louth And Meath ETB	830
County Donegal ETB	774
Cork ETB	769
Cavan And Monaghan ETB	696
Kilkenny And Carlow ETB	655
Galway Roscommon ETB	498
Liberties D8 SCP	408
Ballymun SCP	388
Dublin & Dun Laoghaire ETB	378

Clondalkin A Collinstown SCP	359
Ballyfermot D Dominican SCP	334
Mayo Sligo And Leitrim ETB	334
St Paul's CBS D7 SCP	319
Waterford SCP	316
Sligo SCP	295
North West City SCP	288
Dundalk SCP	273
Bantry Dunmanway SCP	271
Ennis SCP	264
Le Chéile SCP	263
Jobstown SCP	262
Coolock D17 SCP	254
North Inishowen SCP	252
Clondalkin B Quarryvale Balgaddy SCP	250
Mahon Blackrock SCP	247
Tullamore SCP	246
St Munchin's SCP	244
Cabinteely SCP	243
Killinarden SCP	239
Deeside (Ardee) SCP	236
Southill SCP	235
Mullingar SCP	233
Mayfield/The Glen SCP	231
Clár Chríochnú Scoile Conamara SCP	226
St Clondalkin School's Cluster SCP	225
Gorey SCP	224
Deis Scop SCP	223
The Donahies C.S SCP	222
Artane St. Davids D5 SCP	221
Crumlin Drimnagh & Harold's Cross SCP	215
Brookfield/Fettercairn SCP	214
Enniskerry Bunclody SCP	212
Tullow Area SCP	212
Aisling Project Ltd	211
Old Bawn St. Dominics SCP	208
Business in The Community Ireland	207
Blakestown Mountview SCP	205
St Oliver's Clonmel SCP	204
Drimnagh Bluebell Inchicore SCP	199
Mounttown Sallynoggin SCP	196
Carrick-On-Shannon Education Centre	196
Sexton Street Assisting Youth (SSTAY) SCP	194
Finglas (St Vincent's) SCP	192
South West Wexford SCP	192
Edenmore Kilbarrack Raheny Árd Scoil	191
Bridgetown SCP	190

Galway City Westside SCP	190
North Kerry (Link) SCP	190
Riversdale D15 Tofe SCP	190
East Tallaght Balrothery SCP	185
Ballyfermot C Caritas SCP	184
Limerick and Clare E.T.B.	184
St Finian's Swords SCP	181
Steps (Rosbrien) SCP	180
Athlone SCP	180
Tipperary Town SCP	178
Crumlin Cluster SCP	178
Balally Dundrum SCP	176
Kerry SCP	176
Wexford SCP	173
Palmerstown SCP	169
Dublin North Central SCP	168
Pairc SCP	160
Coolock SCP	156
Edenderry SCP	153
Swords Fingal SCP	153
St Marks St Maelruains SCP	152
Dungarvan SCP	151
St Michael's Secondary School	144
Synge Street SCP	142
North Tipperary SCP	140
Greenhills SCP	140
Scoil Mhuire N.S.& Ballinteer	137
Laois & Offaly ETB	136
Kilrush SCP	128
St Canice's Community Action Ltd	124
Barnardos	118
Birr Roscrea SCP	117
Croom Kilmallock SCP	108
Connemara North & West SCP	108
Tipperary ETB	103
South Meath SCP	99
St Ultans School	56

Total	25,442
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* 2018 SCP payments were €23,933m, detailed amounts for 2018 are available in Tusla Annual Financial Statements 2018.

Appendix 3

Family Resource Centre Payments	€'000
Total Payments less than €50,000	Nil
<u>Payments equal to or greater than €50,000</u>	
Curragh Pride FRC	423
Framework RSA	321
Donegal FRC	270
Ard FRC	232
Westport FRC	226
Kerryhead/Ballyheigue FRC	214
Kenmare FRC	211
Mullaghmatt Cortolvin Community Development	210
St Andrew's Resource Centre Ltd	207
Hospital FRC	205
Northside FRC	201
FRC National Forum	198
Boyle FRC	190
Forward Steps Resource Centre Ltd	181
Shanakill FRC	181
Raphoe FRC	178
Ballymote FRC	178
Monsignor McCarthy FRC	175
Castlebar Le Chéile FRC	174
St Canice's Community Action Ltd	174
Fatima Groups UTD	173
Listowel FRC	173
Solas FRC	171
Ballinrobe FRC	170
Millenium FRC	170
St Brigids Family and Community Centre	169
Aster Family Support Ltd	168
Northwest Clare FRC	167
Teach Oscail FRC	166
Clann Resource Centre Oughterard	164
Bagenalstown FRC	164
Cherry Orchard FRC	163
Clara Community & FRC	162
Spafield FRC	162
Portlaoise Family & Community Resource Centre	161
Lus na Gréine	160
Mevagh Family Resource Centre	160
Athy Community And Family Centre	160
Ballybeg Community Development Project	160
Barnardos	160

Carrigtwohill FRC	160
Mountmellick Youth & FRC	160
North Tipperary Community Services	160
Roscommon Integrated	160
Springboard Project Raphoe	160
Teach Dara Kildare Town Community & Family Centre	160
The Crann Support Group Ltd	160
Newpark Close Community Development	160
FACT Ballincollig FRC	159
Newbridge FRC	158
Southill FRC	158
West Clare FRC	157
Mohill Family Support Centre Ltd	155
School ST & Thomas Court Bawn FRC	155
Le Chéile FRC	155
Adrigole FRC	154
Raheen Community Development Group Ltd	153
Tullamore Community and FRC	153
Tubbercurry Family And Childcare Centre	152
St Johnston & Carrigans FRC	152
Downstrands FRC	152
Quarryvale Family Resource Centre	151
Mountview FRC	150
Killaloe Ballina FRC	149
Moville & District FRC	148
Ballyfermot Resource Centre Ltd	146
Cobh FRC	144
Trim FRC	142
Hillview Community Resource Group	138
Ballymun Child and FRC	137
Droichead FRC	137
The Forge FRC	137
Rosemount Community Development Group	137
Killinarden Resource Centre	133
South West Wexford Community	132
South West Kerry FRC	132
Gort Resource Centre Ltd	131
Greystones FRC	131
Castlerea and Family Resource Centre	130
Dunfanaghy Community & FRC	129
Dunmanway FRC	127
Ballyspillane Community & FRC	127
West Sligo FRC	127
Baldoyle Family Resource Services Ltd	127
Clones FRC	126
Loughrea Family & Community Resource	125
Abbeydorney / Kilfynn FRC	125

Duagh FRC	124
Three Drives FRC	124
Artane Coolock Resource & Development Centre	123
Shannon FRC	122
Ballina FRC	121
Gorey FRC	121
Bridgeways FRC	121
Balally FRC	120
Sligo FRC	120
Killorglin FRC	120
Castlemaine FRC	120
The Peoples Resource Centre Kells	118
Connect FRC	118
Hill St. FRC	118
Ballyboden Children's Centre	118
Ballyogan Community Development	117
Taghmon FRC	117
St Kevin's FRC	116
Breffni Community Development Ltd	114
Sacred Heart Comm & Childcare Project	113
Cairdeas Kilmovee FRC	113
Mill FRC	113
Southend Community Development Group	112
St Matthew's FRC	112
Midleton Community Forum CLG	112
Croom FRC	112
Focus FRC	110
Beara West FRC	109
Cara House FRC	108
Claremorris FRC	108
Nearat Hamhnais Teoranta (Ballyhaunis)	106
St Brigids Community Centre	105
Buds Ballyduff Family & Community Services	105
Cara Phort FRC	100
SDC South Dublin County Partnership	95
Bandon FRC	67

18,535
Total

* Comparable figures for 2018 are available in Tusla Annual Financial Statements 2018

Appendix 4

Family Support Services Counselling Payments	€'000
Total Payments less than €50,000	2,330
<u>Payments equal to or greater than €50,000</u>	
Accord	1,592
Rainbows Ireland	250
Cherish t/a One Family	184
Barnardos	175
Cork Counselling Services Ltd	162
One In Four	145
The Association of Agency Based Counselling & Psychotherapy	120
Clanwilliam Institute	119
Crosscare	117
Boyle FRC	113
The Cari Foundation	107
Beacon Of Light Counselling Centre	107
PIETA House	105
Dundalk Counselling Centre	97
Genesis Psychotherapy & Family Therapy Services	92
St Brigid's Family and Community Centre	84
Northside Counselling Services	80
South West Counselling Centre	75
Vita House Family Centre	69
Knock Counselling Centre Ltd	64
Trinity Adult Resource Group For Education & Training	62
The Family Centre	53
Pro Consult	52
	6,354
Total	

* Comparable figures for 2018 are available in Tusla Annual Financial Statements 2018