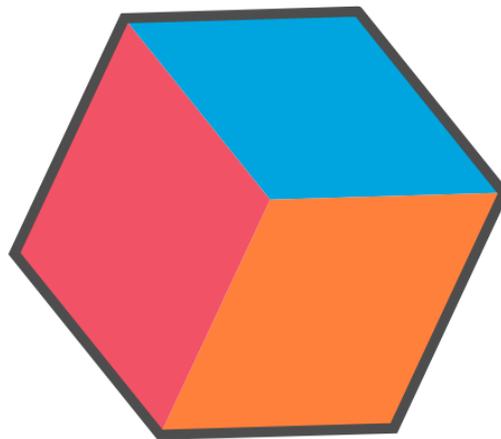
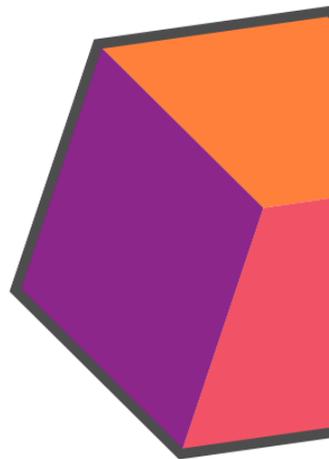
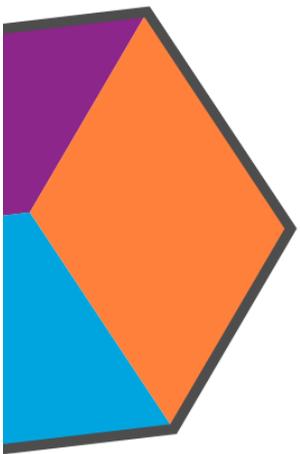


**Pre-Budget 2023 Submission
July 2022**

**EPIC, Empowering People in Care
July 2022**



empowering people in care

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Introduction

EPIC, Empowering People in Care (EPIC) is a national organisation that works with and for children and young people who are currently living in state care or who have experience of living in care. This includes those in relative care, foster care, and residential care - including high support and special care - as well as children and young people accommodated by the State under section 5 of the Child Care Act, and those sentenced or remanded by the courts. EPIC also works with young people preparing to leave care, in aftercare services, and with young adults with care experience up to the age of 26 years.

EPIC is the only independent organisation providing a direct 1:1 advocacy service to children and young people in the care of the State and in aftercare services. EPIC's Advocacy Service works to enable them to have their views and concerns heard and taken seriously, to empower them to speak for themselves, to help to resolve the issues and challenges they experience in care, to assist them in accessing the services and resources they need, and to bring about positive change in their experience of care and in their lives.

EPIC makes this submission to Government in both our capacity as a national children's rights organisation, and on behalf of the children and young people with whom we work. Our submission is informed by the evidence base from our caseload, as well as our research and policy work.

It is EPIC's view that relevant Government Departments should, as a matter of course, care-proof their budgets for children in care and young people leaving care. The State is acting *in loco parentis* for these children and young people and therefore bears significant responsibility for their wellbeing and socio-economic outcomes. Care-proofing means that Government Departments would review the impact their budgets have on care-experienced children and young people and take proactive measures to address any gaps identified.

Furthermore, EPIC believes that children and young people with care experience should have positive actions applied to their circumstances. This group of children and young people can have additional needs and vulnerabilities which the State as their 'corporate parent' has an obligation to respond to in order that they achieve the best possible outcomes, including upon transition to adulthood.

Overview of Children and Young People in Care and Key Statistics

According to Tusla's figures, there were 5,860 children in care at the end of Quarter 1 2022¹. 64% (3,748) of children in care are in general foster care, 26% (1,500) are in relative foster care, 7% (436) are in residential care, including 16 in [Special Care](#), and 3% (176) are in other placements.²

It is of note that while the overall number of children in care remains similar when compared with the same period in 2021 (there are 19 less children in care in Q1 2022), the numbers of referrals to Tusla have increased significantly. The most recent figures published show that in 2020, the number of referrals was 69,712, while in 2021, there were 73,069 referrals made to the Child and Family Agency.³ This is an increase of 3,357 children being referred to Tusla – approximately 5%.⁴

The rise in referrals in 2021 should be interpreted in the context of the Covid-19 pandemic, and the associated closures of schools and services which had a disproportionate impact on children and young people affected by poverty, marginalisation and inequality.⁵ However, in a recent reply to a Parliamentary Question in Dáil Éireann, Minister O'Gorman stated that there had also been a *"significant increase in referrals between 2019 and 2020 where the number grew by 13,151."*⁶ Two explanations were offered by the Minister for this. Firstly, the early effects of the Covid-19 pandemic, and secondly, *"the change in the methodology for counting of referrals that was introduced in 2020. This change means that since then all areas now count all referrals, including those which are screened out. This provides a better account of activity and demand on child protection and welfare services but has inflated the number of referrals."*⁷ Minister O'Gorman continued that *"given the nuances of referral data and significant changes which have occurred in recent times, it is difficult to comment with any certainty on the reason for increase in referrals at this time."*⁸

EPIC welcomes the improved focus on data gathering and analysis by the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) and Tusla. While further work needs to be undertaken to understand the increase in referrals in line with the new system, it is nonetheless evident that Tusla is experiencing a high volume of child protection and welfare concerns which

¹ Tusla, *Quarterly Service Performance and Activity Report Quarter 1 2022*, p.5. https://www.tusla.ie/uploads/content/Q1_2022_Service_Performance_and_Activity_Report_V1.0.pdf [accessed: 7 July 2022].

² *Ibid.* p. 32.

³ *Ibid.* p.3.

⁴ *Ibid.*

⁵ *Ibid.*

⁶ Department of Children, Equality, Disability, Integration and Youth, *Written Answers*, Tuesday 14 June 2022. [Child and Family Agency: 14 Jun 2022: Written answers \(KildareStreet.com\)](#) [accessed: 7 July 2022].

⁷ *Ibid.*

⁸ *Ibid.*

must be responded to, while also: ensuring that children currently in its care are safe, supported, and secure; assisting families; and playing a leadership role in the management of the Ukraine response. This is an extraordinarily challenging, complex, and resource-heavy task. While the Chief Executive Officer of Tusla, Mr. Bernard Gloster, has reported that the Agency concluded 2020 in a stable financial position⁹, the agency has historically been underfunded and the impact on its budget of the pandemic, the HSE cyber-attack and the Ukraine crisis must be addressed. Further, the prospects for Tusla's partners that deliver vital frontline services is less certain¹⁰.

It is EPIC's firmly held position that Budget 2023 must prioritise support to the Child and Family Agency and its civil society partners at an increased level to reach those most in need with timely, effective, and quality interventions.

Social Work Numbers

Tusla has a duty to allocate a Social Worker to a child as soon as the need for an admission to care is identified and for as long as they remain in care. At the end of March 2022, a total of 638 (11%) of children in care did not have an allocated Social Worker.¹¹ EPIC understands the difficulties in recruiting and retaining Social Workers, but the fact that 11% of children in care do not have a Social Worker is concerning. During a meeting with the Public Accounts Committee in October 2021, Tusla's Director of Services and Integration, Ms. Kate Duggan, stated that there were approximately 1,770 Social Workers in Tusla's employ at that time¹² and that Tusla "*is challenged in terms of our ability to allocate an adequate number of Social Workers.*"¹³ Tusla has undertaken various actions to rectify this situation and to improve its staffing generally, including converting temporary agency staff to Tusla contracts, offering employment to all final-year social work students in 2021, and engaging with the Department of Further and Higher Education, Research, Innovation and Science to increase the number of student placements.¹⁴

EPIC welcomes these actions and recognises that child protection social work is amongst the most difficult and challenging environments in which to recruit and retain staff. We are also cognisant that the demand for Social Workers is not restricted to Tusla, but that social work is an aspect of the

⁹ [https://www.oireachtas.ie/en/debates/debate/committee_of_public_accounts/2021-10-](https://www.oireachtas.ie/en/debates/debate/committee_of_public_accounts/2021-10-21/3/?highlight%5B0%5D=tusla&highlight%5B1%5D=t)

https://www.oireachtas.ie/en/debates/debate/committee_of_public_accounts/2021-10-21/3/?highlight%5B0%5D=tusla&highlight%5B1%5D=t

¹¹ Tusla, *Monthly Service Performance and Activity Report March 2022*, p. 18. [PowerPoint Presentation \(tusla.ie\)](#) [accessed: 7 July 2022].

¹² Committee of Public Accounts, *Tusla, the Child and Family Agency – Financial Statements 2020*. 21 October 2021, p.12.

https://www.oireachtas.ie/en/debates/debate/committee_of_public_accounts/2021-10-21/3/?highlight%5B0%5D=tusla&highlight%5B1%5D=t [accessed: 8 July 2022].

¹³ *Ibid.*

¹⁴ *Ibid.*

work of many State agencies and private entities who are competing to recruit. We equally acknowledge the views of the Tusla Executive Management Team put forth at the meeting of the Public Accounts Committee in October 2021, that alongside recruitment and retention activities, the organisation must invest in developing multidisciplinary teams to meet the level of need and address the current gaps in social work provision across Ireland.

EPIC urges the Government to make provision for this in Budget 2023 by ensuring the Child and Family Agency has the investment and political support necessary to attract and retain a range of child protection and welfare specialists to supplement its current social work team and fill gaps in service provision.

Investment in Independent Advocacy

The need for increased budgetary allocation to ensure every child in care and every young person in aftercare services has access to an independent Advocate has never been greater. The number of children and young people who refer themselves to EPIC to secure an independent advocacy service is increasing. Further, we have experienced a rise in the number of cases per individual, meaning that once a case is resolved, the child or young person will often open a new case on a different issue. This reflects the complexity of circumstances experienced by some care-experienced children and young people. Independent advocacy demonstrates a clear value-for-money proposition by often resolving issues which might otherwise result in lengthy and costly court proceedings that are rarely in the best interests of the child.

The 2009 Report of the Commission of Inquiry into Child Abuse¹⁵ unambiguously affirmed the need for children in care to have the support of an independent Advocate, stating *“Children in care are often isolated with their concerns, without an adult to whom they can talk. Children communicate best when they feel they have a protective figure in whom they can confide. The Department of Health and Children must examine international best practice to establish the most appropriate method of giving effect to this recommendation.”*¹⁶ The report further asserted that *“The HSE and Irish Youth Justice Service will ensure that all young people in care and detention are made aware of the Irish Association of Young People in Care (*note: now EPIC) and will support children should they wish to contact or become involved in the service.”*

¹⁵ Commission to Inquire into Child Abuse Report, Dublin, 2009.

¹⁶ Commission to Inquire into Child Abuse Report, Vol. IV, Dublin, 2009, p.463.

Welcome efforts have been made by Tusla in recent years to increase the budget for independent advocacy, however, year on year, the number of advocacy cases received by EPIC has increased substantially - from 500 cases in 2016, to 853 cases in 2020 - an increase of 66%.¹⁷ While these numbers may not seem especially significant, they should be considered against the total number of children in care (approximately 5,860) and in light of the fact that EPIC generally works with especially vulnerable children and young people who have fallen through the cracks and require a high level of support. EPIC has real concerns about the situation of children and young people who are unable to access an Advocate, especially those who may also lack a Social Worker or Aftercare Worker.

While funding for independent advocacy is currently received through Tusla, EPIC believes the right to independent advocacy for children in care should be recognised in legislation through an amended Child Care Act 1991, currently under review by the DCEDIY. This would also ensure appropriate oversight, regulation, and investment in independent advocacy services.

Given the challenges in recruitment and retention of social workers outlined previously, specifically the fact that it is not primarily a resource issue, increased public funding should be directed to independent advocacy where the level of need is high, the return on investment is effective, and where Advocates can resolve many issues confronting over-stretched social work teams and aftercare workers.

Educational Supports and Guidance for Young People Leaving Care

In its 2022 Strategic Plan for Residential and Care Services, Tusla stated that *“Engagement in education is a significant protective factor against health and social outcomes and a proven route out of poverty. This is particularly important for children and young people in care as research in Ireland and internationally points to poorer educational outcomes for young people who have alternative care experiences, especially residential care, when compared to their peers.”*¹⁸

EPIC welcomes indications from Minister Harris and the DFHERIS that care leavers will be named as a priority cohort in the new National Access Plan on Equity of Access in Higher Education 2022-2026. From 2020-2021 EPIC worked in partnership with Munster Technological Universities (Cork and Kerry) to establish dedicated supports for care-leavers in these campuses. EPIC is now working with TU Dublin on an expanded programme of supports for care-leavers across Technological

¹⁷ EPIC, *Advocacy Report 2020*. p. 13.

¹⁸ Tusla, *Strategic Plan for Residential Care Services for Children and Young People 2022-2025*. Office of the Director of Services and Integration, Dublin, 2022. p. 12.

Universities. **We believe funding to universities should be negotiated in line with their commitment to progressing supports and services which allow care-leavers to both access and stay in third level education.**¹⁹

EPIC commends the extension of the DCEDIY and Tusla *Education and Training Bursary Scheme for Care Experienced Young People*, which has been funded for a second year through dormant accounts funding.²⁰ Many young people in EPIC's Service have been recipients of this Bursary and we have seen first-hand the enormous, positive impact it has had in their lives and in their educational and employment outcomes. **EPIC urges the Government to use the opportunity of Budget 2023 to regularise the DCEDIY and Tusla *Education and Training Bursary Scheme for Care Experienced Young People* and initiate funding to be provided on a long-term basis.**

Mental Health

EPIC has long advocated for dedicated mental health assessments and the allocation of supports and therapeutic interventions where necessary to be made available to all children in care as a matter of urgency. We have also called for continued access to mental health services for young people who transition to aftercare services and beyond. The current access route is too slow and is often inaccessible to those who have aged out of care but still require support. Unresolved trauma can shape how children and young people respond to everyday life experiences, including how they respond to the services provided by professionals.

A recent report into youth mental health services in Ireland affirmed that *"the landscape of youth mental health has deteriorated over recent years."*²¹ **The HSE's recent [Sharing the Vision Implementation Plan 2022-2024](#) recognises the complexity and challenge of transitioning between services for young people accessing specialist mental health supports, and it states that the age of transition to adult services should be extended to 25 years²². This is particularly relevant to young care leavers, and we believe Budget 23 should enable the Department of Health to advance this recommendation as a matter of priority with specific accommodation made for children and young people who have been in the care of the state.**

¹⁹ HEA, *National Access Plan 2022-2026, Consultation Paper*. 2021. p. 8.

²⁰ [Bursary Scheme Application Form MT.docx \(live.com\)](#) [accessed: 18 July 2022].

²¹ K. O'Sullivan, S. Clark, A McGrane, N. Rock, L. Burke, N. Boyle, N. Joksimovic & K. Marshall. *A Qualitative Study of Child and Adolescent Mental Health during the COVID-19 Pandemic in Ireland*. *International Journal of Environmental Research and Public Health*, 2021, 18, 1062. p.1063.

²² *Sharing the Vision*, Recommendation 36, page 64.

The Sharing the Vision Implementation Plan further states that “[I]n line with the core values and principles of this policy, mental health services will be evidence-informed and recovery-oriented and will adopt trauma-informed approaches to care, based on lived experience and individual need.”²³

EPIC urges the Department of Health to ensure that resources are made available for training on trauma-informed care to be introduced in all care settings.

EPIC welcomes Tusla’s new Integrated Framework for Therapeutic Services for Children in Care which is in the early stages of development. **We would urge the DCEDIY and the Department of Health to monitor this model closely through its establishment and pilot phase, and ensure, upon evaluation, that it receives sufficient financial and human resource investment to deliver at scale across the six Tusla regions.**

Aftercare

At the close of Q1 2022, 3,118 young people were in receipt of an aftercare service.²⁴ However, 17% (533) were awaiting an aftercare plan²⁵ despite the fact the Child and Family Agency is obliged to provide an aftercare plan at least six months before the young person turns 18. The number of young people waiting for an aftercare plan at present is increasing, and the absence of sufficient aftercare planning results in young people failing to receive the supports to which they are entitled when they are made independent at 18.

Further, the eligibility criteria for obtaining an aftercare service when a young person ages out of the care system at 18 are restrictive and can often result in young people receiving arbitrary or insufficient supports at a time when they are especially vulnerable.²⁶

Tusla has stated that the “*most important requirements for young people leaving care is for secure, suitable accommodation as well as further education, employment or training or family support. These core requirements will be prioritised in the provision of aftercare services.*”²⁷

EPIC therefore urges the Government to prioritise investment in aftercare services in Budget 23 – specifically to ensure all care leavers that are assessed as needing an aftercare service receive it, and that the criteria which results in discriminatory provision of aftercare on the grounds of

²³ *Ibid.* p.34.

²⁴ Tusla, *Quarterly Service Performance and Activity Report, Quarter 1 2022.* p.40.

²⁵ *Ibid.* p.43.

²⁶ Provisions include that aftercare is only available to the age of 21 or to 23 if you are in higher education< see Tusla National Aftercare Policy for Alternative Care: https://www.tusla.ie/uploads/content/4248-TUSLA_National_Policy_for_Aftercare_v2.pdf

²⁷ *Aftercare Policy, Guidance and Legislation Briefing*, Tusla Child and Family Agency, 2017, p. 7.

education are removed. EPIC would also urge that any funding requirements that may arise from Tusla's upcoming Service Improvement Plan for Aftercare be prioritised as a matter of urgency

Care Placements and Housing

The ongoing crisis in the housing sector is particularly impacting on children in care and young people in aftercare. EPIC's Advocacy Report 2020 documented that the main presenting issue to our Service was accommodation.²⁸ This continued in 2021 and it remains the case in our 2022 referrals to date. The range of accommodation issues affecting children and young people with care-experience varies from emergency measures which require children to be accommodated in hotels when no residential placement is available, to insufficient move-on placements for 18 year old's leaving residential care or foster placements, to the prohibitive cost of private rented accommodation and the absence of family support to fall back on, and the lack of short term lets to fill the gap when care-leavers have to leave student accommodation for summer and Christmas and have nowhere to go and no opportunity for short term rentals.

EPIC currently has 22 cases in its Advocacy Service of young care-leavers who are now in homeless services. While the current housing crisis affects many young people across society, care-leavers often have no family or community supports to rely on and can therefore fall into precarious circumstances quickly and with grave consequences. **EPIC urges the Department of Housing to work with DCEDIY to identify possibilities through Budget 23 to prioritise investment in accommodation for children in care and care-leavers. This should include identification and establishment of an increased number of Tusla-led residential care homes, supported facilities and aftercare homes. Innovative partnerships such as the recent collaboration between Tusla, Mayo County Council and Focus Ireland on provision of aftercare homes and the Tiglin housing initiative which was supported by Kildare County Council to establish Jigginstown Manor, and the Capital Assistance Scheme (CAS) should be scaled up.**

Unaccompanied Minors

Tusla have reported that on average, approximately 90 unaccompanied children seeking international protection are placed in the care of Tusla per year. However, Tusla has stated that

²⁸ EPIC, *Advocacy Report 2020*. Dublin, 2022. p.19.

since January 2022, 164 unaccompanied minors have been placed in its care – 59 from Ukraine and 105 from other countries including Afghanistan and Somalia²⁹.

It is EPIC's view that all unaccompanied minors must be considered a child in care foremost and should be provided with all attendant safeguards and supports until a decision is made on the child or young person's status - including through the provision of aftercare services. **The DCEDIY must use the opportunity of Budget 23 to consolidate inter-departmental planning with the Departments of Housing and Health to ensure all unaccompanied children have immediate access to safe, secure, accommodation and appropriate services - including medical, mental health, education and language supports.**

When an unaccompanied child turns 18, they must be deemed eligible for an aftercare service, and efforts must be made to identify suitable accommodation.

Foster Care

There is no doubt that the most appropriate place for any child in care to live is with a loving, supportive foster family. Despite having amongst the highest numbers of foster-carers in the EU, the number of foster-carers in Ireland is now decreasing overall. This has a detrimental effect on the lives and livelihoods of children who could be placed in a stable family home but are instead housed in institutional environments, sometimes with frequent residential placement moves based on availability.

The foster care allowance was last increased on January 1st 2009 and is currently €325 per week per child under 12, and €352 per week for a child aged 12 or over.³⁰ With the current cost of living crisis and general inflation, an increase in this allowance is long overdue. **EPIC urges the Government to invest in foster-care allowances, as well as in training and resources, in order to help retain and recruit foster-carers.**

Privately Operated Residential Services

EPIC welcomes Tusla's Strategic Plan for Residential Services which seeks to balance public and private residential care for children and young people.³¹ EPIC has voiced its concerns regarding the

²⁹ <https://www.rte.ie/news/ireland/2022/0720/1311318-minor-facilities/>

³⁰ Department of Children, Equity, Disability, Integration and Youth. *Kildare Street Written Answers*. 5 July 2022. [Children in Care: 5 Jul 2022: Written answers \(KildareStreet.com\)](#) [accessed: 13 July 2022].

³¹ Tusla, *Strategic Plan for Residential Care Services for Children and Young People 2022-2025*. Office of the Director of Services and Integration, Dublin, 2022.

reliance on privately operated residential services and the decline in Tusla run services which was the result of insufficient public investment over many years. From 2015 to 2021, there was an 131% increase in the number of private residential services. In the same period, residential services operated by Tusla and the Community and Voluntary sector decreased by 16%.³² In 2021, 76% of all children's residential services remained privately operated.³³

A major disparity between Tusla and privately operated residential services is the requirement of HIQA to monitor Tusla's performance against the National Standards for Children's Residential Centres and to reports its findings to the Minister. Private providers and Community and Voluntary sector providers are not inspected by HIQA, but by the Tusla Alternative Care Inspection & Monitoring Service (ACIMS)."³⁴ This is of critical concern to EPIC, as evidence from other jurisdictions has documented significant gaps in oversight, regulation, standards and child protection practice in privately operated services.

There is also a danger that if a privately run service is not deemed profitable, the service may be closed at short notice. This leads to further disruption for the children and young people living there who will have to be relocated on an emergency basis and who have already experienced destabilisation and anxiety as a result of needing to be taken into care.

Tusla's new Residential Services Plan states "*[T]here is a shared view, between all internal and external stakeholders that the same external regulation that applies to the Tusla Residential Care Centres should apply across the Private and Community & Voluntary Residential Care Centres.*"³⁵

EPIC urges the Government to identify, establish, design, and deliver an increased number of public care homes. EPIC also welcomes the recommendation to "increase capacity across Tusla & Community & Voluntary services by 110 beds from 2022-2025."³⁶ This incremental increase of public residential capacity aims to achieve 50:50 private/public provision by 2025³⁷ and may alleviate some of the pressure on placements outlined previously in this submission.

³² *Ibid.* p. 22.

³³ *Ibid.*

³⁴ *Ibid.* p.35.

³⁵ *Ibid.*

³⁶ *Ibid.* p.40.

³⁷ *Ibid.* p.2.