

inspection report

FOSTERING SERVICE

Oxfordshire County Council Fostering Service

Yarnton House Rutten Lane Yarnton Oxford OX5 1LP

Lead Inspector Lindy Latreille

Announced Inspection 17th July 2006 10:00

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Fostering Services*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

Every Child Matters, outlined the government's vision for children's services and formed the basis of the Children Act 2004. It provides a framework for inspection so that children's services should be judged on their contribution to the outcomes considered essential to wellbeing in childhood and later life. Those outcomes are:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a contribution; and
- Achieving economic wellbeing.

In response, the Commission for Social Care Inspection has re-ordered the national minimum standards for children's services under the five outcomes, for reporting purposes. A further section has been created under 'Management' to cover those issues that will potentially impact on all the outcomes above.

Copies of *Every Child Matters* and *The Children Act 2004* are available from The Stationery Office as above

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SERVICE INFORMATION

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(if applicable)

Oxfordshire County Council

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applicable)

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Type of registration Local Authority Fostering Service

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 13th January 2006

Brief Description of the Service:

Oxfordshire Family Placement Service currently provides services in relation to both adoption and fostering. The service is soon to be split into two teams but will continue to be managed by one service manager.

This service comprises three geographically based family placement teams (over four sites), a county wide family placement team for children with disabilities and a county wide placement support team. A unit manager leads each of these teams and a recruitment officer, fostering panels and an advisor to the panels further support the service.

The disability family placement team is part of the Directorate's disability service for children and young people, and is managed by the disability service manager. That team does, however, apply the same standards as the wider fostering service and is party to its development work. The placement service manager manages the teams that constitute the family placement service. The following fostering services are provided:

Recruitment, preparation, assessment, training and support of carers.

Preparation and support groups.

Training for carers including NVQ and NVQ Assessor Awards.

Training for staff including student placements and the Child Care Award.

Placement finding for all children and young people, including disabled children.

Relief placements.

Short-term placements.

Long-term placements.

Emergency placements.

Short breaks for disabled children and young people.

Parent and child placements.

Fostering Plus - a fee paid service for foster carers who accept children and young people with challenging behaviour and high level needs.

Assessments for courts, including Residence Orders.

Placement Support.

As of June 2006, the fostering service was supporting 285 households who offered a total of 346 placements.

SUMMARY

This is an overview of what the inspector found during the inspection.

This was an announced inspection carried out by two inspectors over four days. Six foster carers were visited in their own homes when eight young people were consulted. These placement visits included a mother and baby, an unaccompanied asylum seeker, a young person with a disability, a kinship carer, and foster carers and young people from black and minority ethnic groups.

Interviews were carried out at the fostering service's head office and included the service manager, the deputy head of service, the panel chair, four unit managers and six supervising social workers. The weekly matching meeting - Placement Matters - was attended, and members of the prevention and intervention team, the placement support team and the attach team were interviewed. Three area offices were visited in the North, City and South of the County. The inspectors attended a fostering forum prior to the inspection, which provided an opportunity to meet with 13 foster carers. The Oxfordshire Foster Care Association was running an event during the inspection week and inspectors attended and spoke to foster carers. Meetings were held with staff from the educational "Reach-Up" and "Bridging Project", with staff from the training department and the medical team for 'Looked After Children'. Telephone contact was made with four placing social workers and six independent reviewing officers.

Documentation was sampled and included foster children's case records, foster carers' files, training schedules, the register, staff supervision records and policies and procedures.

This annual inspection was brought forward in time to meet the needs of the regulatory body in preparation for the move to OFSTED. In spite of this, the service manager and staff co-operated fully to ensure that the inspectors had all relevant information to assist the inspection process.

What the service does well:

The service offers enthusiastic foster carers who provide a caring environment and personal support to the young people in their activities, at school and in their personal and health education.

The service invests time to explore the possibilities of matching with a view to future stability.

The supervising social workers maintain close liaison with the foster carers using all aspects of communication.

The supervising social workers were knowledgeable in their interviews during the inspection and had good links to other services available for placement support.

Foster carers met were positive about the supervising social workers, and confirmed that any worries were quickly addressed. The foster carers felt able to voice their opinions and were confident that they would be listened to. Equipment and training were on offer as necessary.

What has improved since the last inspection?

The outstanding requirements of the last inspection have been met.

The service manager confirmed that there is a more robust maintenance of the register.

Information of foster carer households is now in place as specified by regulations.

All foster carer agreements are signed or an explanation is logged in the file.

Panel members are recruited to fully meet the regulatory requirements.

Serious consideration has been given to the recruitment of foster carers to meet the needs of the young people; to this end an additional post has been funded to ensure prompt outcomes from enquiries into the service.

The application form for panel members has been improved to provide the information required.

The training of foster carers has been enhanced with another person to support the trainer and a review of training has been completed and shared with senior management.

Information about young people in the public domain has been amended to ensure all aspects of safeguarding.

Foster carers' files have been indexed and are signed by the service manager when auditing.

Training is available for managing complex behaviours.

What they could do better:

The number of foster carers attending training needs to increase.

The monitoring of some aspects of the service needs to be improved and recorded, including placement breakdowns and emergency admissions.

Copies of all foster care agreements need to be signed by the carers and supervising social workers, with a copy held on the carers' files.

Prior to all foster carer reviews the young people placed in the home should be consulted and their comments recorded.

The information technology systems used for recording need to be more robust.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office.

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Statutory Requirements Identified During the Inspection

Being Healthy

The intended outcome for this Standard is:

 The fostering service promotes the health and development of children.(NMS 12)

The Commission considers Standard 12 the key standard to be inspected at least once during a 12 month period.

JUDGEMENT - we looked at the outcome for Standard:

12

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

Health needs are identified and followed up with good liaison between the foster carers and the medical health team for looked after children.

EVIDENCE:

Foster carers were clear about their roles in promoting young people's health and well being, and this was supported by information in the foster carers' handbook. Six foster carers were met and were knowledgeable about the identified needs of the young people placed and felt able to meet them, in some cases with the support of other professionals, eg Looked After Children (LAC) nurse, health visitors, midwives, general practitioners and hospital consultants, dentists, the Prevention and Intervention team, the Attach Team and Child and Adolescent Mental Health Services (CAMHS). Foster carers were well aware of the health needs of the young people in their care and detailed how these were actioned. This was evidenced through some supervision notes and diary notes completed by the supervising social workers. Minutes of the reviews confirmed that consideration of health needs took place at the reviews and health professionals were invited as appropriate.

The Looked After Children (LAC) nurse was informed and proactive in achieving the health care assessment, even with hardened refusers, by relocating to where the young people congregate. This information is then sent to the placing social workers.

The clinical psychologist and senior social work practitioner from the Attach Team met with one inspector to explain the team's aims and objectives and to explain the work undertaken. In addition, a summary and analysis of active cases seen by the Attach Team in January 2006 was read as part of the inspection. The team consists of a clinical psychologist and two specialist social workers. The team has been attempting to recruit a further clinical psychologist since April 2005. The team's aim is to 'promote permanency in care arrangements for looked after children, this includes facilitating placement stability and promoting the process of adjustment from public care to adoption'. The service offers consultation to adoptive families, social workers and supervising social workers, as well as direct work with young people and their carers. The Attach team held a training course which carers were able to attend on 'Young People, Trauma & Relationships'. There is currently no waiting list for the service. The inspector saw evidence that referral to the team can be made by young people, carers, adoptive parents and social workers. All attendees are given feedback sheets, with the responses used to evaluate the services provided. The vast majority of feedback sheets relating to the work of the team noted positive outcomes for children, young people and their carers. Carers spoken to at a coffee morning praised the service very highly.

Where necessary, alterations have been made to homes to accommodate young people with disabilities. Carers detailed the equipment that had been provided and the swift response of staff to meet the needs of the young people.

Carers consulted, as part of the inspection, understood the value of a healthy diet. One young vegetarian who was visited told the inspector that his carers provided tasty and appropriate food.

There is a balanced programme of health training on offer and foster carers spoke of the usefulness of this. External training has also been offered to carers in order to meet the specific needs of some young people.

Staying Safe

The intended outcomes for these Standards are:

- Any persons carrying on or managing the service are suitable. (NMS 3)
- The fostering service provides suitable foster carers.(NMS 6)
- The service matches children to carers appropriately.(NMS 8)
- The fostering service protects each child or young person from abuse and neglect.(NMS 9)
- The people who work in or for the fostering service are suitable to work with children and young people. (NMS 15)
- Fostering panels are organised efficiently and effectively.(NMS 30)

The Commission considers Standards 3, 6, 8, 9, 15 and 30 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – we looked at outcomes for the following Standard(s):

3, 6, 8, 9,15 and 30

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

Young people are kept safe with a variety of systems and strategies employed by the service.

EVIDENCE:

The service manager is experienced and qualified to hold her position, as stated in the last report and evidenced during interviews at this inspection. A monitoring system ensures that the service audits the documentation maintained by supervising social workers in a timely fashion. These include annual safety checks of the foster carers' homes, appropriate vetting of staff and carers and essential training; evidence of this was found on file.

The homes visited as part of the inspection were homely, free from avoidable hazards, varied and personalised to meet the needs of the young people placed. The young people said they liked their homes and their bedrooms. The homes are checked annually as part of the foster carers' annual review, the first of which is presented to Panel. There has been some sharing of bedrooms that was inappropriate for the needs of the young people; the service manager confirmed that this would be better managed in the future

and has since confirmed that risk assessments would be undertaken on all children who share bedrooms.

Health and safety issues are covered in the preparation training for all carers, who demonstrated this knowledge in discussions held during the home visits.

The service employs a range of foster carers including those from black and minority ethnic groups, to cater for the variety of placements needed, including foster plus, kinship, emergency, relief, short break, short term up to two years, long term and permanent pre-adoption. Where necessary, alterations have been made to properties to enable the best management of young people with a disability.

The foster carers valued the preparation training and found the handbook useful. Where a foster carer is expected to transport the young person, checks are maintained with regard to the vehicle used.

All those consulted as part of this inspection felt comfortable about matching the needs of the young people with appropriate carers. When speaking to the supervising social workers, they were able to detail the specifics of the matching process. Although this was not outlined clearly in the referral material on some of the files examined, a new format will include these details in the future. The individual needs of the young people were met in all cases sampled, including specialised equipment and their need for appropriate activities to develop their skills and self esteem. The service is conscious of the need to find placements close to the young people's home and school areas, enabling them to retain as much continuity in their lives as possible. No referrals are accepted unless the service manager considers that a positive match is available. She personally attends the weekly meeting 'Placement Matters', which reviews all requests for placements from placing social workers who present each case with background information. The request form has recently been comprehensively updated and informs the matching process to a higher standard.

All carers have had the opportunity to update their mandatory training in safeguarding procedures and first aid, including moving and handling where relevant for foster carers working with young people who have physical disabilities. There is training in managing challenging behaviour, which is particularly relevant to foster plus foster carers, but is not mandatory. The foster carers' agreement does not specify the mandatory training that carers are expected to follow or the need to update and there has been a poor uptake on training by foster carers; this was confirmed as being addressed by the training officers. A good choice of supplementary training courses is available to carers. There is no training specifically for kinship carers, but they are able to access any of the training courses that are held.

Safe caring guidelines were evidenced in the files sampled. No young people consulted said that they were bullied. The service manager confirmed that she thought anti-bullying strategies were taught within the safeguarding training. A training officer confirmed that the topic of bullying featured in many of the training courses, for example 'Child Protection' and 'Supporting Children Who Are Different From You'. Overall, the number of serious incidents recorded regarding the safety of the young people placed was low and all were thoroughly investigated with appropriate outcomes.

All foster carers sign to comply with the "No Smacking" policy and that other forms of corporal punishment are not acceptable.

Foster carers consulted said that there is a robust assessment and vetting process applied to all prospective carers, supporting previous inspection findings. This is followed by an induction and training programme, which the foster carers confirmed met their needs. Data provided from the service prior to the inspection confirmed that every foster carer and all adult members of the households of foster carers have all had pre-employment checks. This includes Criminal Records Bureau, the Protection of Children Act (POCA) and references obtained.

All the supervising social workers consulted are qualified, experienced and registered with the General Social Care Council (GSCC). They demonstrated, during interviews at the inspection, an in-depth knowledge of the cases they were managing, providing positive and safe outcomes for young people. There are no unqualified staff who carry out social work functions.

The chair of the fostering panel was interviewed following a panel meeting. The panel was newly formed in April 2006 following the splitting of the joint adoption and fostering panels. There are now two fostering and three adoption panels and the chair for the fostering panel was previously the chair of the joint panel. The meeting was pertinent in all aspects of the agenda worked. The composition of the panel provides a wide area of expertise and the debate was informed and child focused. At present foster carers do not attend panels; this is due to the new formation of the panel, and the need to complete training for all panel members. The chair anticipates that this will be commencing in the autumn. When a foster carer takes a young person over their approved numbers, a report is presented to panel for their authorisation as an extension of the foster carer's approval. These reports are sent to the service manager to form part of the quality audit. Where a change is made to the foster carer's approval, the unit managers approve and now copy in the service manager for quality purposes. Unit managers reported that this was taking place. Training is provided for panel members, which includes induction training and shadowing supervising social workers. Panel members are able to attend the department's training courses and a representative from the Fostering Network is scheduled to provide training to panel members in the autumn of this year on the subject of Kinship Care.

Enjoying and Achieving

The intended outcomes for these Standards are:

- The fostering service values diversity.(NMS 7)
- The fostering service promotes educational achievement.(NMS 13)
- When foster care is provided as a short-term break for a child, the arrangements recognise that the parents remain the main carers for the child.(NMS 31)

The Commission considers Standards 7, 13, and 31 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT - we looked at outcomes for the following standard(s):

7, 13 and 31

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

Young people have access to a wide range of activities and their educational needs are met through various supportive strategies.

EVIDENCE:

The service provides a range of foster carers to meet the needs of the young people, including single carers, black and minority ethnic carers, kinship and experienced carers, who are able to offer a specialised service to young people with special needs, including short and long term placements. In all cases permanence is regularly considered.

The service focuses on providing countywide placements for Oxfordshire's children and young people. At the weekend prior to the inspection the fostering service held an event to "Celebrate Achievements of Young People in Care, 10 years and over". Feedback from this was very positive and many people found it quite emotional.

The families visited clearly catered for the individual needs of the young people in their care, liaising with other health or educational professionals. Training in diversity was delivered to foster carers at the recent Fostering Forum. Part of the ongoing training programme for foster carers provides a course on 'Supporting Children Who Are Different From You'. This explores issues of difference, for example regarding race, culture and sexuality. Further training courses which look at issues of diversity include 'Disability, Sexuality and Transition', 'Visual Awareness' and 'Deaf Awareness'. From September 2006 all training will incorporate a core theme of anti-discriminatory practice and inclusion.

The fostering service has been successful in recruiting some foster carers from diverse backgrounds and who are able to actively support the young people's ethnicity, culture and faith.

The service manager provided data to support effective monitoring of educational attainment that includes exclusions, provision of personal educational plans and educational attainment at GCSE level. 264 young people are in mainstream school, 27 are in special schools and seven attend pupil referral units. 98 young people have statements of educational need and 86% of the young people have personal education plans. Of the 41 young people taking GCSEs in 2005, 32 achieved at least one pass and three young people achieved five passes or more at A* to C grades. Educational achievement is also monitored at statutory looked after child reviews. The provision of education for the young people visited was good. They had not had their learning disrupted unnecessarily and all enjoyed attending school. Where support was identified as necessary, it was provided through the Reach Up Team. Consequently all the young people are receiving an appropriate education.

The Reach Up Team is a multi-disciplinary team of people with the aim of 'raising the educational achievement of children in the care of Oxfordshire County Council'. The team offers advice, support and training for colleagues and associated agencies about the particular issues regarding the education needs of looked after children. The team's priority is 'to work in collaboration with colleagues to develop and improve the existing systems that identify the needs and deliver services for looked after children'. There are also projects which are able to provide direct support to individual children and young people to help with their educational achievement. Examples of the team's projects include an attendance project which tracks, monitors and intervenes where attendance becomes an issue. The behaviour support teacher draws up a detailed behaviour management plan for joint working to support the individual child at school and at the foster home. Regular case consultation meetings provide a forum for professionals to consider any issues that may be leading to breakdown in school placement, or lack of progress. A teacher and four learning mentors support looked after children who are studying for their GCSE examinations. All looked after children who complete their compulsory

schooling (Year 11), receive gift vouchers to the value of £100. The Reach Up Team has taken the lead in developing good quality personal education plan documents and in providing training for teachers and social workers on the subject. The team has been involved in a joint project to raise the aspirations of looked after young people. This involves students from a local university acting as befrienders to the young people and visiting them weekly at their schools. The Adult Basic Skills Service has delivered IT training for carers in their own homes. One carer visited during this inspection spoke very highly of the support provided by the Reach Up Team and that the IT lessons enabled the carer to be as knowledgeable about IT as the foster children.

The Bridging Project works specifically with young people from various ethnic backgrounds. The majority of young people involved with the Bridging Project are asylum-seeking young people living in foster care. The project specialises in working with young people of school-leaving age and can continue working with them up until they reach the age of 20, with the aim of finding suitable employment and training opportunities. Specific courses are held in Mathmatics and English, plus vocational courses, for example furniture making.

Carers confirmed that they have close links with the young people's teachers, attending parents' evenings and events. All the feedback received from placing social workers indicated that the carers' support for education was good.

The fostering service provided a week of activities in a summer arts project at Hill End Camp, where 65 young people spent an active week, from which the feedback was most positive.

Short break placement, formally known as respite care, is provided through the Breaktime Scheme. Young people with disabilities are linked to one foster carer or family who provide a regular pattern of planned short break care. There is a dedicated team who recruit, support and co-ordinate this area of work. Home visits confirmed the enthusiasm of foster carers and the speedy response to meet the needs of the young people with appropriate equipment or alterations to the home. There are 33 foster carers who provide this specialised service and feedback from them was positive.

Making a Positive Contribution

The intended outcomes for these Standards are:

- The fostering service promotes contact arrangements for the child or young person. (NMS 10)
- The fostering service promotes consultation.(NMS 11)

The Commission considers Standards 10 and 11 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – we looked at outcomes for the following standard(s):

10 and 11

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

There are good systems in place that promote contact and enable all parties concerned to contribute their views regarding the care of the young people, so that positive outcomes are achieved.

EVIDENCE:

Feedback from the young people indicated that their foster families welcomed their friends and family members where this was appropriate, and that carers enabled contact outside the home, for example one meeting took place in the nearby park which was more suitable for the parent concerned. The fostering service offers training and guidance to support the carers in this area of work; six placing social workers commented that contact was well managed and promoted.

The local authority has developed co-ordinated participation strategies of extensive consultation with young people. Sounding boards have been established to involve young people, their parents and foster carers in shaping services. Care leavers, known locally as source workers, have joined service meetings, are involved in recruitment, and attend foster carer events. They also act as peer mentors for the young people.

95% of young people participate in their reviews, according to the service. Feedback on their care is sought from the young people and their carers prior to the statutory reviews. The young people visited said they attended their reviews and felt able to offer opinions about their care. In some of the files sampled inspectors were unable to find evidence of children and young people being consulted by the service in connection with their carers' annual reviews, although workers confirmed that this was routinely undertaken. The service needs to ensure that the views of all children and young people are taken into account and included in their foster carers' annual reviews.

Foster carers reported to the inspectors that they felt their views were valued and actioned, particularly in the area of training.

The Placement Support Team provides intensive work over a six-week period with the young people who are at immediate risk of placement breakdown. Following this intensive work, young people are given an evaluation form to feedback on the quality of help that they received.

All but one of the young people said that they knew how to make a complaint, but as no complaints had been logged, it appears that any concerns had been dealt with at an early stage.

Achieving Economic Wellbeing

The intended outcomes for these Standards are:

- The fostering service prepares young people for adulthood.(NMS 14)
- The fostering service pays carers an allowance and agreed expenses as specified.(NMS 29)

JUDGEMENT – we looked at outcomes for the following standard(s):

There are no key standards to assess in this section of the report and no concerns were raised in the last inspection or have been received since.

EVIDENCE:

Management

The intended outcomes for these Standards are:

- There is a clear statement of the aims and objectives of the fostering service and the fostering service ensures that they meet those aims and objectives.(NMS 1)
- The fostering service is managed by those with the appropriate skills and experience. (NMS 2)
- The fostering service is monitored and controlled as specified. (NMS 4)
- The fostering service is managed effectively and efficiently. (NMS 5)
- Staff are organised and managed effectively. (NMS 16)
- The fostering service has an adequate number of sufficiently experienced and qualified staff. (NMS 17)
- The fostering service is a fair and competent employer. (NMS 18)
- There is a good quality training programme. (NMS 19)
- All staff are properly accountable and supported. (NMS 20)
- The fostering service has a clear strategy for working with and supporting carers.(NMS 21)
- Foster carers are provided with supervision and support. (NMS 22)
- Foster carers are appropriately trained. (NMS 23)
- Case records for children are comprehensive. (NMS 24)
- The administrative records are maintained as required. (NMS 25)
- The premises used as offices by the fostering service are suitable for the purpose.(NMS 26)
- The fostering service is financially viable. (NMS 27)
- The fostering service has robust financial processes. (NMS 28)
- Local Authority fostering services recognise the contribution made by family and friends as carers.(NMS 32)

The Commission considers Standards 17, 21, 24 and 32 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – we looked at outcomes for the following standard(s):

4, 17, 21, 22, 23, 24, 25 and 32.

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The fostering service continues to be well managed and a greater emphasis is being placed on formalising systems to support an audit trail.

EVIDENCE:

Monitoring of some aspects of the fostering service is good, for example the monitoring of files. However, monitoring in other areas needs to be improved, for example regarding emergency admissions and placement breakdowns.

The fostering service surveyed 290 foster carers in June 2006, of which 80 carers responded. The survey looked at child related issues, support from children's social workers, contact with birth families, support from supervising social workers, complaints and allegations, working with other professionals, links with other foster carers, training attended, reasons for not attending training, fees and allowances, recruitment and retention, support mechanisms and service development. The conclusion reached was that the majority of carers were more than satisfied with the service they receive. The service has developed an action plan to address any issues raised through the survey.

The supervising social workers employed by the fostering service are suitably qualified and experienced. Supervising social workers are able to attend any internal or external training that is relevant to their professional development. In May 2006 all supervising social work teams were represented at a BAAF training session, which looked at the role of their role. Foster carers reported that there are enough staff available to meet their needs. The service is recruiting an enquiries person, as recommended at the last inspection, to collate and track all enquiries in respect of fostering and examine the reasons for drop out.

Placing social workers were complimentary in their feedback regarding the quality of care provided and emphasised that foster carers wanted to achieve the best possible outcomes for the young people they were looking after. One placing social worker described how she valued working closely with a supervising social worker on one specific matter. All placing social workers surveyed confirmed that the supervising social workers attended the children and young people looked after child reviews.

The assessment of foster carers is thorough and is undertaken by supervising social workers who are employed by the service. The care that foster carers provide is of a good standard. They are supported with a comprehensive training programme, which is well received by a disappointingly small proportion of foster carers. Foster carers spoke very positively about the quality of the training offered but some admitted that they have not done any for quite a while. Induction training was good, according to the carers consulted, and an ongoing further training programme is offered to meet their needs, but the very poor uptake needs to be addressed.

The training department uses a matrix to detail any training attended by carers. However, kinship carers were not seen on the list. It is recommended that they be included in order to track any training attended. 138 foster carers have achieved or are working towards a relevant professional qualification; this is commendable and needs to be considered when investigating the poor uptake of other training. All carers have their training and development needs scrutinised as part of the annual review process and, following all courses, they are asked to complete training appraisal forms. Where training needs are specialised, foster carers spoke of the fostering service's swift response to funding identified training.

One inspector met with the learning and qualifications manager and the foster carers' training and NVQ assessor to discuss the training options that are available to carers. The service has a comprehensive training programme in place, which enables carers to attend a variety of group training sessions that are relevant to their role. Mandatory training for carers consists of preparation training, child protection and first aid. Moving and handling training is usually provided to carers who are caring for children with physical disabilities. One carer visited as part of the inspection particularly praised the training course that looks in detail at every aspect of young people leaving care. This course is held once a month over six months and covers such topics as personal relationships, health, education, employment, training and pathway planning.

If there is a particular need, carers can receive one-to-one training on some topics. For example, one carer undertook training in court skills at home, which was facilitated by a supervising social worker. Support for foster carers to attend training is available by way of funding mileage, public transport or taxis fares. Carers can claim for child-care costs while attending training and venues and times are varied across the county to facilitate attendance. Carers are supported in undertaking the Level 3 National Vocational Qualification (NVQ3) in Caring for Children and Young People. The NVQ 3 was introduced to Oxfordshire carers in February 2005. As at 18th July 2006, 11 carers were undertaking the award, 20 carers had achieved the award and three carers were also NVQ assessors. The service hopes to secure funding to provide Level 2 NVQ training for foster carers, recognising that this course is more relevant for some carers, such as respite carers. Any carers wishing to train as assessors would be supported in doing so.

The training team compiled an analysis of training and an action plan from April 2006, which is designed to tackle any shortfalls regarding facilitating carers to attend training. Clearly the training team is being proactive in trying to encourage more carers to attend training and being creative in ways to support this aim. In addition to trainers promoting training at carer events and meeting with all supervising social workers, information is passed on through the newsletter.

The service is considering providing mandatory child protection and first aid training to carers on the point of their approval. There is a move towards the service recognising that carers working with various professionals, for example with the Attach Team, may be accredited. All carers have been consulted about preferred training days, times and venues in order to shape the future training provided.

Retention of the workforce is good.

There is a clear strategy for working with foster carers and this was verified during discussions with the supervising social workers. Foster carers described a high quality of liaison with supervising social workers and its usefulness in supporting them in their tasks; "I couldn't do this if it weren't for them", particularly in the areas of health and behaviour management. Foster carer support groups are held on a regular basis. Surgeries are held throughout the year and enable carers to meet people who can provide advice on any fostering issues. They are facilitated by Care Co-ordinators (who are themselves experienced foster carers) alongside other professionals, such as an educational psychologist, a behaviour support teacher and the nurse for looked after children. All carers agreed that the Fostering Forum day was most beneficial and informative and provided an opportunity to meet with other foster carers. They are geographically widespread throughout Oxfordshire and the Oxfordshire Foster Care Association offers great support to all the carers through fund raising events, a quarterly newsletter and training.

Communication between the foster carers, the service manager and the supervising social workers is good. This was evidenced by detailed and relevant information via e-mailing and telephone contact. No concerns were raised about the out-of-hours support for foster carers and they were confident of support at all times.

Regular supervision is provided for all supervising social workers and foster carers, with the additional opportunity of informal support and guidance whenever it is required. Some foster carers were unaware that the meetings with the supervising social workers were supervision, as no notes were taken and none forwarded after the meeting. Some supervising social workers confirmed that they wrote up the supervision meetings at a later time. Good practice should determine that supervision is recorded in all cases and shared with the foster carers. Foster carers said that the supervising social workers carried out unannounced visits during the year and this was confirmed by reading carers' files.

Allegations in the last 12 months against foster carers numbered 14, with three others about the fostering service; all have been satisfactorily investigated and completed. No referrals have been made under the Protection of Children Act (POCA).

The handbook is informative and foster carers commented on its usefulness as a resource.

Recording by the fostering service is generally of a satisfactory standard and the service manager is proactive in working to improve this further and ensure that all records are fully dated and signed. Files sampled were inconsistent regarding keeping copies of foster care agreements and foster placement agreements. The relevant persons had not signed some foster care agreements. It is recommended that the carers sign copies of all foster care agreements as well as the supervising social workers, with a copy held on the carers' files. Some information needed from the placing social workers is still not in place despite extensive efforts to obtain it. All supervising social workers know to record the request so that this can be monitored. The staff spoke of difficulties with their information technology as, at times, information inputted was lost and systems that staff had devised to collect data would not work with the main system. Management of this is essential to maintain safety and consistency. Foster carers are provided with secure filing cabinets for all their records. There was a previous requirement regarding the register of foster carers. The service manager confirmed that this had been amended.

There are two designated supervising social workers who have specialised in the area of kinship care placements. During the inspection one inspector met with the senior practitioner for kinship care. The steering group meets regularly and focuses on the need to monitor and extend the service and to learn from good practice nationally. The department is also supporting kinship placement research, which is being undertaken at a local university. At the time of the inspection there were 52 kinship foster carers in the fostering service. Those visited felt informed by the service and supported to meet the needs of the young people. They recalled the process of assessment which, once they fully understood why it was so rigorous, they were happy to fully comply with. They felt that the fostering service had helped them to make the necessary links with health or education and spoke of the good support that the young people received from the Reach Up Team. Kinship carers are not provided with any specialist training, but they are able to access any of the training courses that are provided for carers.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Fostering Services have been met and uses the following scale.

4 Standard Exceeded (Commendable) 3 Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) 1 Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion "N/A" in the standard met box denotes standard not applicable

BEING HEALTHY		
Standard No	Score	
12	4	
	•	

STAYING SAFE		
Standard No	Score	
3	3	
6	3	
8	3	
9	3	
15	3	
30	3	

ENJOYING AND ACHIEVING		
Standard No Score		
7	3	
13	4	
31	3	

MAKING A POSITIVE CONTRIBUTION		
Standard No	Score	
10	3	
11	3	

ACHIEVING ECONOMIC		
WELLBEING		
Standard No	Score	
14	X	
29	X	

MANAGEMENT		
Standard No	Score	
1	X	
2	X	
4	2	
5	X	
16	X	
17	X 3 X	
18	X	
19	X	
20	X	
21	4	
22	3	
23	3 2 3 3 X	
24	3	
25	3	
26	X	
27	X	
28	X	
32	3	

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Fostering Services Regulations 2002 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	FS24	A written policy on case recording should be developed which establishes the purpose, format and content of files, and clarifies what information is kept on the foster carers' files and what information is kept on the children's files.
2	FS11	The views of young people should be taken into account and consistently recorded as part of the annual foster carers' reviews.
3	FS23	The service manager press ahead with the proposed action plan to ensure that more foster carers attend training. Kinship carers should be included in the training matrix, in order to record details of all training attended by all carers.
4	FS25	Information technology systems should ensure that information is not lost.

5	FS1	All aspects of the service should be monitored and shortfalls identified.
6	FS22	Copies of all foster care agreements should be signed by the carers and supervising social workers. The manager should ensure that copies of foster placement agreements and foster care agreements are consistently placed on the files.
		densities, placed on the most

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