



**Making Social Care
Better for People**

inspection report

FOSTERING SERVICE

Southwark LA Fostering

**47b East Dulwich Road
London
SE22 9BZ**

Lead Inspector
Rossella Volpi

Key Proportionate Announced Inspection
December 2006 / January 2007

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

Reader Information	
Document Purpose	Inspection Report
Author	CSCI
Audience	General Public
Further copies from	0870 240 7535 (telephone order line)
Copyright	This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI
Internet address	www.csci.org.uk

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

This report is a public document. Extracts may not be used or reproduced without the prior permission of the Commission for Social Care Inspection.

SERVICE INFORMATION

Name of service	Southwark LA Fostering
Address	47b East Dulwich Road London SE22 9BZ
Telephone number	020 7525 4421
Fax number	0207 525 4449
Email address	maureen.nawrat@southwark.gov.uk
Provider Web address	
Name of provider(s)/company (if applicable)	Southwark Social Services
Name of manager	Susan Sinclair
Type of service	Local Authority Fostering Service

SERVICE INFORMATION

Conditions of registration:

Date of last inspection January 2006

Brief Description of the Service:

This is a local authority fostering service located in an inner city area, with a wide range of cultural diversity. The primary aim is that of providing safe and professional foster care within the borough for every Southwark child who needs this service.

Key aims stated by the authority are the promotion of stability and continuity of relationships; promotion of contact with birth families when in the child's best interest; meeting racial, cultural and linguistic needs; cater for disabilities; promote health and education; offer the child choice of placements and enable them to complain.

The fostering team consists of a service manager, team manager, two practice managers, a senior practitioner for the family link service and a team of supervising social workers.

A brokerage team negotiates placements with independent fostering agencies when suitable placements are not available from the service's own carers.

At March 2006 the authority had 201 approved carers. There were 322 children placed with Southwark carers and 101 for whom a place had been purchased externally. In addition to these placements the family link service provided short breaks to 15 children with disabilities.

The service was going to be re-aligned in the near future.

SUMMARY

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

This inspection's main focus was to gain an overview of the service to ascertain whether the positive findings from last year's inspection could be confirmed. The previous inspection considered the service to deliver good outcomes for children under each area inspected.

The previous positive findings were confirmed and the service continued to perform well. (Some variations in scoring under specific standards are often a result of the sampling exercises undertaken or of the different emphasis given to particular areas during inspections. They should not necessarily be taken as evidence of the service having improved or weakened).

The inspection activities were mainly conducted over about 9 inspector's days in December 2006, but the majority of questionnaires sent to stakeholders to inform the inspection was received in January 2007. The inspection was conducted by Liz Brunton and Rossella Volpi and included:

- Visits to four carers, where children were in placements. (Two of these were family link carers providing short breaks to children with disabilities).
- Individual discussion with children and / or carers during the visits.
- Individual discussion with two parents of children using the family link scheme.
- Individual or small group discussion with social workers and a member of the business support team.
- A meeting with representatives of the children's forum.
- Discussion with each member of the fostering management team, including the service manager and head of service.
- Discussion with a number of other officers in the directorate or external professionals, including representatives from health and education.
- Discussion with the elected member of the council with portfolio responsibility for looked after children.
- Informal meeting of a group of carers.
- Observation of one panel's session and discussion with the chair.
- Inspection of a sample of children, carers and staff's files. This included case tracking for the four carers and children in placement where a visit had been arranged.
- Inspection of extracts from a sample of other statutory records, including those relating to complaints or allegations and panel minutes.

Questionnaires were sent to children in placement, carers and children's social workers. 22 questionnaires were received back from children and 17 from carers. From social workers responses were received relating to 15 children in individual placements and one giving an overview for all children in the family link short break service. The responses have informed this inspection.

The inspection has been informed also by a range of written documents, which the authority made available, on request from CSCI, including the service manager's own annual assessment.

What the service does well:

Children expressed satisfaction about their carers and the service received; they gave examples to illustrate how good their carers were. Their views were mostly shared by their social workers.

Children and young people confirmed that they received advice about being healthy and help when they felt unwell:

"I eat healthy food".

"If I am sick auntie takes me to doctor or gets medicine".

"When I was ill A. took me to hospital and stayed with me all the time. She always takes care of us".

Children indicated that they felt well cared for and safe where they were living:

" ..Because my carer talks to me just like her own child and I have everything I need, even love".

"...Because I love my foster mum and brother".

"..Because I have always got someone to talk to if I need to".

Children commented about the help received to achieve, the leisure activities they took part in, how they were consulted, helped to make decisions and enabled to maintain contact with family and friends:

"I do dancing. If I don't have dancing I would go out with my friends or go to see my sister or my family".

"At week-end I go to the seaside and sailing and cycling and scouts or just play".

"During the day I go to school, in the evening I do homework, play playstation, read or watch TV".

"Mum and dad always help me with my homework".

"If we go shopping she asks us our opinion on the food".

"I am always listened to".

"My foster carer always listens to what I have to say, because she treats me just as one of her own children, no different".

The fostering service continued to provide high quality support to carers with emphasis on the educational, health and leisure needs of the children. For example carers said:

".. A pleasure to work with Southwark as a foster carer. I receive superb support and have found it a most rewarding experience".

"I am so delighted with the school the child's social worker got him into. He is thriving since starting there".

"I found Southwark to be very caring and honest".

"The fostering service has put culture, ethnicity and disability at the top of the agenda".

“It is nice to be treated as a professional and asked for my opinions”.
“The service sees to it that children’s annual checks are up to date and eat healthily and take activities to give them healthy lifestyles”.

Carers said that the intensive help from the specialist social workers, the health and mental health teams had directly benefited children. Carers commented very positively about the education team having gone to carers’ houses to support children’s education.

There was much joint working with education, health and other professionals towards ensuring that looked after children would have the same opportunities as all children in the borough. There was an experienced panel, effectively chaired. There was an experienced social work team.

The elected member with the lead responsibility for corporate parenting took an active role in exercising it very thoroughly.

Overall the service was well managed and strongly committed to raising standards. There was much evidence of progress and the improvements that the service manager had attained in some very challenging circumstances, (posed by resources’ availability). The service manager’s commitment, skills and achievements had been noted and were acknowledged by a range of stakeholders.

What has improved since the last inspection?

In their annual assessment the service managers highlighted that:

The service had promoted access to improved educational attainment through a range of projects.

The recruitment publicity for carers had been revamped and made more visible at local events. There had been a 100% increase in enquiries compared to last year. The pre-approval training course had been fully booked.

A new style of fostering newsletters had been developed, which was reflective of the Every Child Matters outcomes.

The service had successfully recruited to permanent posts and encouraged two unqualified fostering social workers to undertake a professional qualification.

What they could do better:

As discussed in the report Southwark fostering services was supporting over 200 carers directly, with potential for about 400 children to be placed at any one time. The level of need in the borough was significant, the profile of children looked after was changing and the demand for both mainstream carers and family link schemes was high. Recruitment of new carers was one of its top priorities.

The service had been operating at optimum capacity, but there were some indications that it might have reached its ceiling. It was difficult to see how services could continue to meet demand and how the priorities set and development projects could be well acted upon with the available resources.

Some professionals also commented on this and mentioned, for example, the lack of choice at times for young people regarding placements and a greater need for services for children with disabilities, than was provided. (Other examples are incorporated in the body of the report).

There were suggestions made by young people regarding diversity, education, raising complaints and concerns, which should be followed up.

One area where young people felt very strongly about and asked that should be included in this report, was that they wanted more clarity about what their money allowances were and what these should include. They also asked that these should be clearly specified in the relevant policies. (This was discussed with the service manager during the inspection who was going to follow this up with the young people's representative group).

Matters listed under the section on requirements and recommendations include some action suggested regarding terms of approval, reviews and management of carers.

Administrative systems needed to be improved, in particular to ensure better recording of when checks were due and tracking of outcomes.

It is stressed, however, that the above is in the context of a good service, clearly committed to an agenda of improvement and where the service manager demonstrated a clear ethos and vision to deliver the best possible outcomes for children.

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. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

CONTENTS

Being Healthy

Staying Safe

Enjoying and Achieving

Making a Positive Contribution

Achieving Economic Wellbeing

Management

Scoring of Outcomes

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.

JUDGEMENT – we looked at the outcome for Standard:

12

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

The fostering service promoted the health and development of children.

EVIDENCE:

Children and young people said that foster carers gave them support and advice about being healthy; this was mostly confirmed by their social workers.

For example, one 17 years old young person (who was interviewed during the inspection) commented that the carer prompted the young person to make their own appointments and to take responsibility for health care. The placing social worker confirmed this and said that the carer supported the young person well through counselling and had "*excellent insight into A's emotional needs*".

Another carer discussed how she tried to encourage a healthy lifestyle and healthy eating for the two young children placed with her.

The short break family link carers were given informative health profiles on the child. Consent documents for emergency treatment were completed before the child was placed and the parents would update these annually. Both parents interviewed said that the family link carers were very attentive to the child's health care needs.

There was evidence that the assessment process for carers looked at their ability to promote health and this would be monitored, once children were in placement, through visits and at reviews. Carers were expected, for example, to ensure that all children were registered with a general practitioner, accessed

specialist help, if needed and had routine health checks, including attending dental and optician appointments.

The department had a designated nurse for looked after children (LAC nurse) and two additional nurses. The LAC nurse took responsibility for the review of health assessments. From the discussion with her, it was evident that she had developed effective ways of doing such assessments with reluctant young people. She also gave health care advice to individual young people and carers and organised training for individual family link carers in invasive techniques. She provided training for foster carers, but she was concerned about the poor uptake; for example the most recent course had to be cancelled due to lack of response.

Discussion with a team of health professionals in the field of mental and emotional health gave evidence of some detailed pieces of work they had done with groups and with individual children or carers, which had been effective. It was understood that this had much contributed to stability of placements and, together with the work of the LAC nurse, to the excellent support that carers continued to receive from the fostering service.

Overall discussion with the professionals and the information provided by the service manager, gave evidence of continuing strong multi-agency approaches to promoting health. Both health and social care practitioners were working together in joint assessments and the delivery of services.

Some examples of the above were:

- Foster carers had access for consultation and advice to a team of dedicated health workers. The project targeted young people who were neglecting their health needs, including those at risk of pregnancy and drug or alcohol abuse. The service manager said that this had been effective. For instance, she said that there had been no pregnancies in girls under 18 in Southwark fostering placements for the past 2 years (with the exceptions of those sometimes accommodated because already pregnant).

- The sexual health advisor had visited foster carers' groups to discuss sexual health matters.

- The Carelink team, employed a variety of techniques in working with children and understanding what had happened in their lives. The team was jointly funded and managed by CAMHS (children and adolescents mental health services), PCT and the fostering service). The team would assist in accessing CAMHS where children lived outside Southwark.

- The fostering service was assisted by two experienced social workers to support carers where there were specific placement difficulties or risk of breakdown. One of the workers was a trainer on the 'Behaviour Changes' training course for carers. The course was aimed at understanding the nature

and causes of behaviour difficulties and developing appropriate strategies. Feedback from carers about the course had been very positive.

Overall there was evidence of excellent work by professionals to promote children's physical, emotional and mental health. There was much evidence of how this had benefited children and supported carers in maintaining placement stability. (This is the reason for the rating of 4).

A strengthening of the management of carers (and particularly to ensure uptake of relevant courses) would be needed so as to minimise the risk of the excellent work done being undermined.

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.

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

3, 6, 8, 9, 15, 30

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

The service took robust steps to promote children’s welfare and protect them from abuse and neglect. A tighter system for updating checks and for ensuring placement of children with carers to be always consistent with the terms of approval, would address some minor shortfalls.

EVIDENCE:

Children indicated that they felt safe with their carers and well cared for where they were living. For examples they said:

"I am loved". "I am happy where I live and want to stay till I grow up". "I am very well cared for".

Two young children seen during a visit to a carer were relating easily to her, demanding and receiving appropriate attention, responses and affection. A young person interviewed said that she felt safe in her foster home. Placing social workers and two mothers (of two children linked with two short break carers) also were confident that children would be safe and protected.

The four carers who were visited and whose files were case tracked showed commitment to the children and knowledge of their needs. All evidence

reviewed suggested that they were providing very good care in suitable accommodation. For example, one placing social worker said that she had *"Nothing but praise for the carer who has a high level of commitment to A"*. The mother of a child said: *"She looks after him well & understands his needs. He enjoys going there"*.

Health and safety checks of foster homes were conducted at approval, but not afterwards, although hazards noted were considered at the annual reviews. (See recommendation - standard 6)

The family link carers' assessments seen (both fairly recent) were thorough. The assessment process was discussed in some detail with the carers for one child. The discussion gave additional evidence that the assessments of family link carers, although looking at some different issues, were as careful as those for mainstream carers.

Not all criminal record bureau checks (CRB) for carers, adult members of household or support carers had been updated every 3 years, although it was Southwark's policy that this would be done. There was no evidence of a system in place for flagging up when CRB checks were due. It was left to supervising social workers to monitor this, although a new electronic system being introduced might be able to give such information. (See recommendation- standard 6).

When seeking fostering placements from independent fostering agencies or other local authorities, the brokerage team did not ask for evidence of up-to-date CRB checks for carers and their households. (See recommendation- standard 6).

Fostering applicants had medical checks before approval, as part of ascertaining their suitability for the task. These were not updated, unless the foster carers were over the age of 60 or if there were obvious concerns. The designated LAC nurse considered that medicals should be updated 3 yearly for all carers. (See recommendation - standard 6)

Carers, supervising social workers, placing social workers and parents thought that the placements, in the cases tracked, had been appropriate and in the interest of the children. One young person expressed satisfaction with the current match, after two failed placements.

In the family link scheme in particular, there was evidence of very careful matching, much information sharing and prolonged introductions before a link was established.

Terms of approval regarding age, in the family link scheme, had been recently changed with carers' previously approved from age 5, now being approved from birth. There were practical reasons for this (as discussed by staff during

the inspection). It was clear that the intention was not to be less considerate or thorough in the individual matching. However terms of approval, including ages, should reflect what the individual carers are considered most suitable for and an additional safeguard to the matching process. In one case followed up there was no evidence that the change had been fully explored with the carers or, indeed, that the carers would be comfortable, at that stage, with a newborn baby. (See recommendation – standard 8).

Placement agreement meetings to agree roles and expectations (involving carer, child, parent and social worker) were held and recorded for family links; but records of these were not seen on files for fostering placements. (See recommendation – standard 8).

The terms of foster carers' approval were not always clear on files. It would be helpful if copies of notices of approval sent to foster carers were retained on the files. (See recommendation – standard 8). Also, while the placement details were clearly listed for each foster carer, these did not always include the reasons why the placement ended. (See requirement – standard 8)

It was noted that when exemptions to the usual fostering limit had been made, there was a written agreement to grant such exemption (in line with s 63(12) schedule 7 of the Children Act 1989). It was also noted, though, that the reasons why these arrangements were considered to be the best available placements for the young people concerned and in their interest, had not always been given. It was therefore difficult to understand why the placements were considered to be appropriate. For example, one such exemption resulted in a 5 years old child sleeping on a top bunk and three babies in the foster carers' bedroom. Another meant that the foster carers were looking after children aged 4 years, 18 months, 2 months and a newborn baby).

One young person had been placed outside the foster carer's terms of approval (but within the usual fostering limit), without a clear justification being documented and without the case being promptly referred to the panel. Again it was difficult to see why such placement would have been in the interest of the children. The carer had been approved for two children, aged 5 to 18 and two teenagers were in placement. She was a single carer with also 3 of her own children: one teenager and the others aged 3 and 10. The third foster child placed outside the terms of approval was a baby. This situation was of particular concern as incidents then occurred in the home where the baby sustained scratches, bruising and a chipped tooth, (through falling while playing with the 3 years old). (See requirement – standard 8).

Staff said that child protection and safer caring were topics explored in the pre-approval training for carers and also listed as part of the core training, which all carers were expected to undertake after approval.

Foster carers and family link carers seen were aware of the importance of safe caring. Safer caring guidelines for each fostering household were not seen on all files looked at. (See recommendation – standard 9).

Records seen of allegations against carers showed that they had been properly dealt with. However, one case, where a parent had complained that her young child had sustained bruising and other injuries in the foster home, (also referred to above) had been listed as a complaint rather than an allegation. (See recommendation – standard 9).

The carers seen with the young people / children were managing behaviour well and were thoughtful and imaginative in their responses. One placing social worker said of a carer: "*She raises problems very diplomatically*".

Southwark had a robust recruitment and vetting policy for staff, including management. Procedures comprised interview, written references, criminal records bureau and other checks. Random inspection of a sample of staff's file (including panel members) showed that the procedure had been adhered to.

All fostering / family link staff and managers, interviewed during the inspection, were appropriately experienced and qualified and showed commitment to providing a good service.

The fostering panel benefited from an independent chair, from a range of members with differing backgrounds, (including social work, education, health and an ex-care leaver) and it had access to legal advice. A social work team manager acted as advisor to the panel. The manager of the family link scheme considered that there was suitable expertise in disability on the panel.

One session of the fostering panel was observed. It was noted that discussion on the cases presented was thorough, with all members contributing thoughtfully; the session was well led by the chair. The panel gave thought to the most appropriate terms of approval for carers in relation to their potential or ability to provide a safe and nurturing environment for the children placed with them, promote health, education, diversity and work with birth families.

The chair was satisfied with the panel, both with the expertise and with the quality of the discussions. She said that the panel properly considered the assessments / reviews presented, discussed whether there were any gaps to be followed up and would not recommend approval unless satisfied.

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.

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

7, 13, 31

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

The service valued diversity and strived to provide children with care that reflected their individual needs. The service had continued to give high priority to meeting children’s educational needs, with the support of a comprehensive looked after children’s education service. Arrangements for short break care were sensitive to the fact that parents remained the main carers.

Issues such as uptake of training, caseloads and other matters raised by stakeholders (and referred to in this report), might hinder development in the area of enjoying and achieving, if not addressed.

EVIDENCE:

At the previous inspection, when education was looked at in some depth, this area was considered excellent. There continued to be evidence of excellent work and high commitment by Southwark to support children to achieve. This was particularly noted in the discussion with the member of the council with the lead responsibility for corporate parenting and with representatives of the education department.

The work of CAHMS, in supporting stability of placements by working directly with carers to prevent disruptions, as well as Southwark’s successful efforts to

keep the majority of children placed within easy reach of the local schools, would have also greatly contributed to educational achievements.

Feedback from children confirmed that they felt supported by their carers with their homework. For example one young person seen during a home visit was doing very well in college. The young person, carer and social worker were all very pleased with her progress and her ambition to go to university. All foster homes were said to have been provided with computers for the use of young people placed.

The carers visited were clear of their responsibility to encourage their foster children to achieve educationally and gave evidence of how they liaised with schools. Comments from children's social workers mainly agreed with this.

In the case of short break carers for children with disabilities, it was evident that the carers supported children's education and development in a variety of means. For example, support and discussion with parents, help with homework if necessary, emphasis on leisure and other activities that would be particularly suitable for each child.

The authority stated that any looked after child in Southwark was placed in education within 20 days. Southwark had improved on last year's GCSE and A levels returns and had initiated an apprentice scheme for looked after children. The panel was getting more robust in assessing carers' ability to support education, in particular at looking at the achievements of birth children. The importance of leisure pursuits was stressed at reviews and through the year.

The authority also stated that there had been an improved response to the educational needs of children looked after with the expansion of the jointly funded education team. The manager of such team was an educational psychologist who provided a vital link with Southwark's education department, also offering the latest advice and guidance from the DFES. Additionally this post enabled children to receive a fast referral service regarding special educational needs.

There were a few issues raised by some children and professionals that should be followed up by management, so as to minimise the risk of the excellent work done in this area being undermined.

Some social workers rated education as adequate only, in Southwark, while a professional commented: "*Carers should be encouraged more to take part in school meetings, filling report cards and attending PEP meetings*". The main points raised included the following:

- A minority, but still significant proportion of carers, not being able to support children in education.

- Lack of clarity of roles between some supervising social workers and children's social workers regarding the lead role in promoting children's educational achievements and challenging carers if needed.
- More help and targeted supervision needed for supervising social workers to enable them to address performance issues with carers, particularly regarding education.

Young people confirmed that Southwark supplied computers and free Internet access to help them with education. However some were unhappy that, they said, some carers kept the computers for their own use only, or sited them in the carer's bedrooms, which made them inaccessible to the young people.

Young people suggested that supervising social workers and children's social workers should ask carers more in depth questions to properly assess how they ensured that young people got all the support they were entitled to. (See recommendation – standards 7, 13, 31).

Discussion with carers and staff gave evidence that the service valued diversity and that the ability of carers to do so was carefully assessed.

For example, one carer seen well supported the young person in following the religion of her choice, which was different from the carer's. The young person confirmed this directly. The carer and young person shared African heritage and the young person had also learnt about her country of origin through contact with her own wider family, which the carer had encouraged and from a relative of the carer.

There were a number of placements, which were transracial/ transcultural. Staff discussed how attentive they would be to make certain that the carers would have the right attitudes, knowledge and expertise to work well with the individual children and their families.

Discussion with young people's representatives confirmed that in many cases the above applied. They said that in their experience (and that of the young people on whose behalf they spoke), many transracial and transcultural placements had been effective in supporting the young person's racial and cultural needs.

They said, however, that there were a number of young people who were unhappy in such placements, as they felt isolated from their culture. Some found the area where they were living, in terms of neighbourhood and environment, to be too alien. They reported that the young people did not want to raise that directly as they liked their carers and appreciated the carer's efforts. Young people suggested that more probing should be done by social workers / supervising social workers regarding these issues. They also wanted more emphasis about culture and race at reviews and more placement choices. (See recommendation - standards 7, 13, 31).

A carer raised that more emphasis should be given, when matching, to lifestyle considerations.

The family link short break scheme was achieving success in recruiting African carers for African young people, through targeted recruitment.

The family link carer (with whom this was discussed) and the designated LAC nurse said that family link staff had been very helpful in accessing information and services for children with disabilities. Equipment had been provided by occupational therapists or from the family link scheme's own budget.

The family link scheme was run by dedicated staff within the fostering team, who had good links with the children with disability service. The scheme had grown steadily since it began in 2001.

Two parents were interviewed (whose children were linked to two separate carers' households). Both expressed much satisfaction with the service received. They confirmed that they retained the main responsibility for their child's health care and education. They said that they had a good relationship with the carers who always kept them informed.

It was evident that the short-break link scheme was operating very well and that parents very much valued it. Some comments from social workers indicated that allocated resources were hindering its expansion to meet demand and needs. It was raised also that this had meant a lack of real choice in placements for children and families, at times.

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.

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

10, 11

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

The service had continued to take steps to enable children to maintain contact with family, friends and other significant people as set out in care plans and foster care agreements. The service promoted consultation.

EVIDENCE:

Maintaining and developing family contact and friendships were integral to the service provided by the authority. Children confirmed that this happened in practice; the carers visited were clear of the expectations of the authority and committed to this. The documents seen on files of young people contained clear details of contact arrangements.

Both mainstream carers visited were effective in enabling contact. In one case the young person and her social worker confirmed that the carer had supported her well over increasing her contact with her family, while, at the same time, ensuring that she remained safe. In the other case the young children in placement spoke freely and with anticipation about the contact arrangements.

The panel gave due consideration both to the attitudes of the carers regarding working with birth families and to the practicalities of supporting contact, when recommending terms of approval for carers.

The service manager said that the majority of children who had been living with Southwark foster carers had remained in contact when they moved out into independent living. She also discussed how Southwark had been promoting permanent legal solutions to caring for children, which had resulted in children being adopted or in their family and friends carers applying for special guardianship orders, thus offering children greater security.

There continued to be evidence of a strong commitment to listening to children and of projects aimed at encouraging their involvement in decisions affecting their lives.

Children and young people confirmed that they were consulted. For example, one young person seen (during one of the carers visits) said: *'Everyone listens to me in this house'*. She was a confident young woman who clearly made her views known in the fostering household and this was confirmed by her social worker. Another carer seen discussed how she consulted the young person about what he wanted to eat and how he preferred to spend his time, during his short break stays. Direct observations of the interaction between a carer and two young foster children, as well as discussion of their care plans, gave evidence of children being consulted and enabled to make decisions.

Should a child make a formal complaint, the complaint officer would allocate them an advocate, to assist in the process.

Supervising social workers and reviewing officers sought children's views and they aimed to visit when they knew that children would be likely to be around. Consultation documents were sent to each child prior to every statutory review. Such form had been changed following feedback from young people.

Southwark had a children's rights officer and had recently commenced an independent visitors' scheme.

Southwark looked after children had their own representative group (called Speakerbox), which was met during the inspection. Speakerbox had been involved in a number of projects, representing and collating children's views and feeding back their experiences to inform policy and practice. Speakerbox had also participated in various training activities for carers and social workers. They were meeting regularly with the corporate parenting panel.

In summary, at the previous inspection, when the area of consultation was looked at in some depth, it was assessed as excellent. The overall score is maintained: there continued to be evidence of excellent work to enable consultation.

Some professionals commented that there was a need to expand consultation with younger children and children with non-verbal communication. Discussion with Speakerbox also indicated that there were significant barriers for some

young people in raising complaints and concerns (for the same reasons referred to above when discussing diversity). These would be areas for the authority to explore so that the outcomes for children regarding consultation can remain excellent. (See recommendation - standards 7, 13, 31).

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):

This area was not looked at in sufficient detail on this occasion to enable a judgement, but was considered good at the previous inspection.

The service manager, in the annual assessment of her service, gave evidence, which suggest that the previous positive outcomes had been maintained.

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 1, 16, 17, 21, 24, 25 and 32 the key standards to be inspected.

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

1, 2, 16, 17, 21, 24, 25

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

There was robust management of an experienced and mature service. Overall the fostering service was comfortable with research, tried to work from an evidence base and knew what their weaker areas were.

The service had been operating at optimum capacity, but there were some indications that it might have reached its ceiling. This could hinder development and expansion.

EVIDENCE:

There was a clear statement of the aims and objectives of the service. The service was updating a number of policies.

All managers and almost all social workers involved in fostering were appropriately qualified and experienced. Staff found that lines of accountability were clear. Discussion with the team managers gave evidence of competence and commitment to lead staff in a professional and supportive manner. The manager of the family link scheme was effective, creative, hard working and was praised by colleagues including the family link carer, social workers and the designated LAC nurse.

The service manager's skills, effective leadership and dedication to an agenda of continuous improvement, is acknowledged. This was recognised by a range of stakeholders, including the (then) head of service. They noted the progress in the service since the current service manager's appointment, the strong emphasis on performance management and quality assurance, a robust review of the effectiveness of strategies adopted, backed by research. (This is the reason for the score of 4, under standard 2).

For example, professionals commented that the service manager has caused a huge shift in what the authority expected carers to do, with more transparency and rigour and that she had raised the profile of education. They used expressions such as: *"very insightful"* or *"creative thinker and striving to find solutions to issues that she inherited"*.

There was a full permanent management team in place, which had been achieved for the first time in years. The service had managed to fill 11 of the 13 permanent vacancies. It was discussed during the inspection that the authority might want to consider a flatter management structure, under the service manager, particularly if the team was expected to expand.

Fostering social workers supervised more foster homes than in most other comparable services and also undertook form F assessments. An increase in social work staffing should be considered. This would also enable, for example, more frequent supervision of carers, consistent undertaking of placement agreement meetings for new placements, the move to the fostering service of those long term foster carers still held in the adoption team, etc.

The need for an administrative system to ensure that CRB checks would be kept up-to-date and for more administrative support over foster carers' reviews indicated a need for more administrative time in the fostering section. Social work staff with whom this was discussed shared this view and felt that they spent a disproportionate amount of their time on administrative tasks, such as filing.

Overall the in-house service must have reached the ceiling for the current staffing levels. It was difficult to see how Southwark's strategy for additional development, according to every child matters outcomes and for targeted recruitment of carers, would be realistic unless resources to support this are identified. (See recommendation – standard 17).

Carers seen praised the support received. For example a foster carer said that her supervising social worker (SSW): *"gave good support and was very good at following up on things"*. One family link carer said: *"the SSW and manager give excellent help and make very useful suggestions"*. An example of the positive written comments received is: *"I am proud to be part of this team. I can speak to the managers as easily as I can to the social workers and they have an interest in me and in my children"*.

The comments received also indicated that carers rated as excellent the support from the professionals involved in health, mental / emotional health and education working jointly with fostering. For example: *"They have always done their very best to support me and all the children I have fostered over the years"*.

SSWs aimed to visit foster carers every 6 weeks and this was generally evidenced on files seen. However, more frequent visits were sometimes needed and much longer gaps had occurred between visits in some cases. (For example in the case referred to above, where the carer was fostering more young people than she was approved for, there had been a gap of 2.5 months. It was noted that the allegation concerning her care of the young child was made soon after this gap in supervisory visits. (See recommendation – standard 17). Records showed that annual unannounced visits had been made.

An out-of-hours telephone support service was provided for foster carers by a number of staff in the fostering service.

Carers' groups provided additional support. It was suggested that a dedicated group for family link carers would be helpful; management might want to explore this.

Records showed that foster carers had been reviewed annually and it was very positive that an independent reviewing officer had conducted the reviews. Reviews seen were quite comprehensive. It was also positive that review reports normally referred to the views of carers, supervising social workers, placing social workers and young people. It is suggested, though, that these people's views are routinely sought in writing, so that they can be recorded as given. (See recommendation - standard 21).

First reviews seen had gone to panel. Subsequent reviews had not always been signed off by a manager and written notice had not always been given to foster carers of their continued approval. (See requirement – standard 21).

An annual review had recently been carried out with a foster carer about whom an allegation (though called a complaint and referred to above) had recently been made. The review had not been referred to the panel. (See recommendation - standard 21).

There was a comprehensive training programme on offer and foster carers could attend courses provided by neighbouring authorities. Carers (including family link carers) were expected to undertake specified core training during their first year or two. However, uptake of courses had been poor, the fostering section did not see the attendance records or the evaluation sheets and there were no training profiles for carers. Although consideration of training needs was part of the carers' annual reviews, the expectations of the service were not specific enough. (See recommendation - standard 21).

Foster carers had complained that training programmes came out late and that all courses were held during weekday daytimes. An option of some evening and weekend training might make it easier for foster carers with outside employment to attend. The management team was already aware of these issues and were planning to address them.

The service had been successful in encouraging a significant number of carers to undertake a relevant national vocational qualification (NVQ). In fact the proportion of carers who had achieved this was higher than the national average.

In summary, regarding management and supervision of carers (standard 21), there continued to be evidence that carers received excellent support. It should also be noted that at the last inspection, when the content and delivery of training for carers was looked at, it was rated as excellent.

The reason why this standard has been rated as almost met, rather than excellent, on this occasion, is because the sample of records seen this time pointed to some issues to be addressed, regarding management of carers and the arrangements for training.

Individual case records for children were kept. These and other records were held securely and with due regard for confidentiality. Computers were password protected. Entry to the building required individual electronic passes with identifying photograph.

The premises were offices equipped for the work of the fostering service and included suitable rooms that could be used for training and meeting purposes.

The assessment, management and support of kinship carers were discussed with the service manager. Two files, (which were held in the district) were inspected. There were some areas that would be followed up at a future visit. Thus the relevant standard has not been scored in this report. The service manager discussed her plans for change and the draft policy on kinship carers that she was proposing to the authority.

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	
<i>Standard No</i>	<i>Score</i>
12	4

STAYING SAFE	
<i>Standard No</i>	<i>Score</i>
3	3
6	2
8	2
9	2
15	3
30	3

ENJOYING AND ACHIEVING	
<i>Standard No</i>	<i>Score</i>
7	3
13	4
31	4

MAKING A POSITIVE CONTRIBUTION	
<i>Standard No</i>	<i>Score</i>
10	3
11	4

ACHIEVING ECONOMIC WELLBEING	
<i>Standard No</i>	<i>Score</i>
14	X
29	X

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

No

Are there any outstanding requirements from the last inspection?

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
1	FS8	30(3)	The provider must ensure that: - Placement details include the reasons why the placements ended. - Placements are consistent with terms of approvals. - Changes to terms of approvals, if sought in an emergency, are properly justified in terms of best interest of the child, agreed at management level and referred promptly to panel.	01/04/07
2	FS21	29(6)	The provider must ensure that foster carers receive written notice of its decision, after each review, regarding whether the carer continues or not to be suitable and the terms of approval appropriate.	01/04/07

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	FS6	<p>That, as part of its strategy to provide suitable foster carers, the service implements the following:</p> <ul style="list-style-type: none"> - To update CRB checks for carers and household members regularly, consistently with Southwark's own policy. An effective system should be put in place to ensure that when checks are due and whether they are done or not, can be monitored. This should also include checks for kinship carers whose files are held in the district (i.e. those not yet transferred to the fostering service). - To repeat health and safety checks annually as part of the foster carers' reviews. - To update medicals 3 yearly for all carers. - To ask for evidence of up to date CRB checks for carers and their households, when seeking fostering placements from independent fostering agencies or other local authorities.
2	FS8	<p>That, regarding approvals:</p> <ol style="list-style-type: none"> 1) For family link carers: <ul style="list-style-type: none"> - That the ages of the children in the terms of approval are consistent with what individual carers are considered most suitable for. 2) For main stream carers: <ul style="list-style-type: none"> - That the terms of foster carers' approval are clearly indicated on their files. - That copies of notices of approval are sent to foster carers and are retained on the files.
3	FS8	<p>That placement agreement meetings are held and recorded.</p>
4	FS9	<p>That, as part of their policy to protect children in placements:</p>

		<ul style="list-style-type: none"> - Safer caring guidelines are completed for each fostering household and a copy is kept on the individual carer's file. - Concerns expressed about the safety or well being of a child are regarded as allegations rather than complaints.
5	FS7 FS13 FS11	<p>That the suggestions made by young people regarding diversity, education, raising complaints and concerns are explored and followed up. That their request for consultation regarding allowances is acted upon.</p> <p>That the authority follows up the comments made by some professionals regarding:</p> <ul style="list-style-type: none"> - More robust monitoring of how carers support young people with education - Expanding consultation with younger children and children with non-verbal communication.
6	FS17	That the fostering service reviews whether the establishment of social work and administrative staff remains adequate, both to fulfil the expectations of the tasks on the day to day and to support intended development and progress.
7	FS21	<p>That reviews of carers, where there are allegations, complaints or concerns about the foster carer, are referred to the panel.</p> <p>That, to inform review reports, the views of carers, young people, carers' birth children, supervising social workers, placing social workers are routinely sought in writing.</p>
8	FS21	<p>That, as part of the management strategy regarding training for carers, the fostering service:</p> <ul style="list-style-type: none"> - Considers ways to improve uptake of training. - Receives a copy of attendance records and the evaluation sheets - Completes training profiles for carers. - Ensures that training done or not done is part of an analysis of the needs of carers, linked to competencies. - Includes in the carers' annual review clear and specific expectations about training.

Commission for Social Care Inspection

SE London Area Office

River House

1 Maidstone Road

Sidcup

DA14 5RH

National Enquiry Line

Telephone: 0845 015 0120 or 0191 233 3323

Textphone: 0845 015 2255 or 0191 233 3588

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

© This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI