

# inspection report

# Fostering Services

# Five Rivers Family Placement Services

**Belmont School** 

School Lane

Salisbury

Wiltshire

SP1 3TA

27th - 30th September 2004

### **Commission for Social Care Inspection**

Launched in April 2004, the Commission for Social Care Inspection (CSCI) is the single inspectorate for social care in England.

The Commission combines the work formerly done by the Social Services Inspectorate (SSI), the SSI/Audit Commission Joint Review Team and the National Care Standards Commission.

### The role of CSCI is to:

- Promote improvement in social care
- Inspect all social care for adults and children in the public, private and voluntary sectors
- Publish annual reports to Parliament on the performance of social care and on the state of the social care market
- Inspect and assess 'Value for Money' of council social services
- Hold performance statistics on social care
- Publish the 'star ratings' for council social services
- Register and inspect services against national standards
- Host the Children's Rights Director role.

### **Inspection Methods & Findings**

SECTION B of this report summarises key findings and evidence from this inspection. The following 4-point scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

### The 4-point scale ranges from:

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

'O' or blank in the 'Standard met?' box denotes standard not assessed on this occasion.

'9' in the 'Standard met?' box denotes standard not applicable.

'X' is used where a percentage value or numerical value is not applicable.

FOSTERING SERVICE INFORMATION			
Local Authority Fostering Service?		No	
Name of Authority			
Address			
Local Authority Manager		Tel No:	
Address		Fax No:	
		Email Addres	s
Registered Fostering Agency (IFA)		Yes	Enter Yes/No
Name of Agency Five Rivers Family Placement Services		<b>Tel No</b> 01722 421142	
Address Belmont School, School Lane, Salisbury, Wiltsh	nire, SP1	<b>Fax No</b> 01722 421144	
3TA		Email Address Caroline.kerley	<b>s</b> /@five-rivers.org
Registered Number of IFA D010000500			
Name of Registered Provider Five Rivers Family Placement Limited Name of Registered Manager (if applicable) Mrs Caroline Anne Kerley Date of first registration 6th November 2003	Date of late	est registration per 2003	certificate
	Yes or No		
Registration Conditions Apply ?	No		
Date of last inspection	20/10/03		

Date of Inspection Visit		27th September 2004	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Rosie Hodgson	097235
Name of Inspector	2	Martin Davis	
Name of Inspector	3		
Name of Inspector	4		
Name of Lay Assessor (if applicable Lay assessors are members of the	,		
independent of the CSCI. They accompany inspectors on some			
inspections and bring a different perspective to the inspection process.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)			
Name of Establishment Representative at the time of inspection		Caroline Kerley	

Introduction to Report and Inspection Inspection visits
Description of Fostering Service

Part A: Summary of Inspection Findings

Reports and Notifications to the Local Authority and Secretary of State Implementation of Statutory Requirements from last Inspection Statutory Requirements from this Inspection Good Practice Recommendations from this Inspection

### Part B: Inspection Methods & Findings

(National Minimum Standards For Fostering Services)

- 1. Statement of purpose
- 2. Fitness to carry on or manage a fostering service
- 3. Management of the fostering service
- 4. Securing and promoting welfare
- 5. Recruiting, checking, managing, supporting and training staff and foster carers
- 6. Records
- 7. Fitness of premises
- 8. Financial requirements
- 9. Fostering panels
- 10. Short-term breaks
- 11. Family and friend carers

Part C: Lay Assessor's Summary (where applicable)

Part D: Provider's Response

- D.1. Provider's comments
- D.2. Action Plan
- D.3. Provider's agreement

### INTRODUCTION TO REPORT AND INSPECTION

Independent and local authority fostering services which fall within the jurisdiction of the Commission for Social Care Inspection (CSCI) are subject to inspection, to establish if the service is meeting the National Minimum Standards for Fostering Services and the requirements of the Care Standards Act 2000, the Fostering Services Regulations 2002 and the Children Act 1989 as amended.

This document summarises the inspection findings of the CSCI in respect of Five Rivers Family Placement Services. The inspection findings relate to the National Minimum Standards for Fostering Services published by the Secretary of State under sections 23 and 49 of the Care Standards Act 2000, for independent and local authority fostering services respectively.

The Fostering Services Regulations 2002 are secondary legislation, with which a service provider must comply. Service providers are expected to comply fully with the National Minimum Standards. The National Minimum standards will form the basis for judgements by the CSCI in relation to independent fostering agencies regarding registration, the imposition and variation of registration conditions and any enforcement action, and in relation to local authority fostering services regarding notices to the local authority and reports to the Secretary of State under section 47 of the Care Standards Act 2000. The report follows the format of the National Minimum Standards and the numbering shown in the report corresponds to that of the standards.

The report will show the following:

- Inspection methods used
- Key findings and evidence
- Overall ratings in relation to the standards
- Compliance with the Regulations
- Notifications to the Local Authority and Reports to the Secretary of State
- Required actions on the part of the provider
- Recommended good practice
- Summary of the findings
- Report of the Lay Assessor (where relevant)
- Providers response and proposed action plan to address findings

This report is a public document.

### **INSPECTION VISITS**

Inspections will be undertaken in line with the agreed regulatory framework with additional visits as required. This is in accordance with the provisions of the Care Standards Act 2000. The following inspection methods have been used in the production of this report. The report represents the inspector's findings from the evidence found at the specified inspection dates.

### BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

Five Rivers Family Placement Service is an Independent Fostering Agency operating from six branches across the country and in Ireland. The head office is at Fordingbridge in Hampshire. This inspection is of the main branch of the Family Placement Service, based in Salisbury, with a new sub-office in Fordingbridge. This branch currently provides over eighty placements within a 40-mile radius of Salisbury.

Salisbury branch shares its building with Belmont School, a registered EBD school that fostered children can access.

Five Rivers Family Placement Service places a strong emphasis on providing sibling placements, and at the time of inspection they were providing a number of multiple placements for sibling groups of up to four children. There are placements for children with a disability and mother and baby placements. Both practical and emotional support systems are in place to maintain these placements.

There is a play therapist within the team and three other therapists are contracted to work with fostered children.

The Salisbury branch currently operates one Fostering Panel for the whole of the agency.

### PART A SUMMARY OF INSPECTION FINDINGS

### **Inspector's Summary**

(This is an overview of the inspector's findings, which includes good practice, quality issues, areas to be addressed or developed and any other concerns.)

This is the third inspection under the Care Standards Act 2000. The inspectors acknowledge in this report the developments made since last inspection as well as highlighting any new and outstanding requirements and good practice recommendations.

A marked change since last inspection has been the splitting of the team so that a requirement regarding unsuitable premises could be met. The two teams are relatively close geographically so that the manager and staff are able to access both offices easily. The inspectors heard from staff, carers and saw in direct observation and documentation that this has been a positive and welcome development for the team. However, it raises the issue of whether the new office is considered a 'Branch' in its own right. An assessment was made at this inspection. The inspectors saw that many of the functions of a branch are covered in the new sub-office at Fordingbridge. Core business such as support (including separate support groups), training (shared), assessment, information, reviews and recruitment is carried out at this office. The offices share a Statement of Purpose, policies, procedures and guidelines, common record keeping and admin systems. Whilst the practice manager at Fordingbridge can influence day-to-day decision-making the Registered Manager still has responsibility for the overall direction of the office.

The inspectors have advised that the agency run this sub-office arrangement for a year so that it is possible to gain a more accurate assessment of the 'branch' issue. They have advised that this links also to the wide remit of the Registered Manager such that the agency wide developmental and operational function of this role is likely to compromise the management of the Salisbury and Fordingbridge Team.

The inspectors saw that the Agency is contracting with a number of inner city Social Services Departments. This new development will provide a more measured response and an opportunity to plan placements, and is seen as positive in the inspector's opinion. However, bearing in mind that the Agency only has a small number of black or mixed race carers and little developed in the way of services or training for carers to address any needs arising from trans-racial placements, the inspector is concerned that black children may not have their needs addressed. A requirement has been made to address this issue.

### 1. Statement of Purpose This standard is met.

 There is a clear Statement of Purpose, which sets out the services provided for children who are placed by the fostering service. This document is in place for the whole organisation with interchangeable information on staff and support systems for each branch.

# 2. <u>Fitness to provide or manage a fostering service</u> One standard is met and one almost met.

• The inspectors noted that the manager of this main office is in the role of Operations and Development Manager. This is a role that covers the whole organisation. Whilst the inspectors saw that this staff member was fully competent to manage the Salisbury office, they question the wide remit of the post. In the inspectors opinion the developmental and operational function of this role, coupled with time out for management training, is compromising the management of the Salisbury and Fordingbridge Team.

### 3. Management of a fostering service Both standards are met.

The inspector noted in documentation and through discussion with staff and carers that there are well established lines of communication and accountability.

Findings under Standard 2 are also relevant here. It is the inspectors view that clarification about the role of the Operations and Development manager be addressed quickly so that the manager can focus on the job of managing her team.

# 4. <u>Securing and promoting welfare</u> One standard is exceeded, four met, three almost met and one not met in this section.

- The Agency continues to provide a high standard of support to ensure that contact is promoted for children and young people in foster care.
- Health & Safety checks have been developed since the last inspection. These now represent a very comprehensive survey of each foster home
- In relation to matching and valuing diversity the inspectors found that where one trans-racial placement was made, no specific services were accessed to address any shortfalls in the placement in order to recognise the child's specific needs.
- In one emergency and a respite placement, the inspectors found that little matching had taken place, such that the safety of children in these placements was compromised. Whilst the inspectors understand the pressures of emergency and respite situations, matching remains a very important area if children's needs are to be met safely.
- Inspectors noted that developments had been made in the area of safer care.

# 5. Recruiting, checking, managing, supporting and training staff and foster carers Five Standards are met in this section, three almost met and one not met.

- Despite developments in recruitment processes since the last inspection there continue to be gaps in filing relevant information held in the agency.
- An outstanding recommendation relates to the appropriate level of administrative support. Administrative support at Salisbury is adequate. However, the inspectors found that in the new Fordingbridge sub office administrative support is stretched and a repeat recommendation is made.
- The inspectors heard from a group of carers that they feel very well supported by the agency. The agency operates on an excellent ratio of supervising social workers to foster carers. This is reflected in foster carer and placing social worker comments about the support received. In questionnaires completed as part of this inspection all of the carers who replied to questions about support, said that they felt very well supported by the agency.
- Records about allegations of abuse were inspected and found to have significant shortfalls. The inspector noted that notifications were not in line with Schedule 8.
   A requirement is made.

### 6. Records In this section one Standard is met and one not met

- The inspectors noted further developments made by the agency during the last year in respect of records. This includes records for children and carers. There are also new recording systems in place in a range of areas ensuring easy access to information.
- The inspector noted at this inspection that the monitoring of records by the registered person under Schedule 7 is not of the required standard. Advice was given to the manager about this.

### 7. Fitness of premises for use as a fostering service This Standard is met

At the last inspection it was found that the office accommodation was unsuitable
for the purpose and a requirement made to address this issue. In response
additional office space was identified and the staff team split. Staff report that
this has benefited the team.

# 8. <u>Financial requirements</u> In this section one Standard is met, one almost met and one not met.

- Written procedures that set out how situations of financial crisis will be managed, in particular the arrangements for disclosing information to purchasers and liaising with them to protect children were not in place.
- There are no clearly documented financial arrangements for control and supervision of the agencies financial affairs and powers despite previous requirements and recommendations made.
- There continue to be no written principles and standards governing the agency's financial management.
- Foster carers informed inspectors that allowances are paid on time. Inspectors
  were shown the systems developed by the agency to ensure that carers are paid
  promptly even where a local authority may have been slow to make a payment.

# 9. <u>Fostering panels</u> This standard is almost met in matters relating to the Salisbury Panel.

- The inspectors heard about the continuing efforts being made to find an independent panel member who has been placed with foster carers. The inspectors clarified to the chair that this member could also be a person whose child has been placed with foster carers. A repeated good practice recommendation is made.
- The inspector was made aware at this inspection of the wide remit of this panel. There are 5 branches that are served by the panel and this breaches Regulation 25(5), which states that 'a fostering panel may be established jointly by any two but not more than three fostering service providers.' The inspector has clarified that because section 11(2) of the Care Standards Act states that 'each IFA branch is to be treated as a separate agency', it follows that each branch has to have a panel, such that a maximum of three branches of the same organisation can share the same panel. A requirement is made.

As part of this inspection, children, foster carers and placing social workers were sent questionnaires. The inspectors received 11 children's responses, 21 foster carer responses and 24 placing social worker responses. The analysis of these questionnaires is attached to the back of this report. Salient points are also picked up in the text.

# Reports and Notifications to the Local Authority and Secretary of State

(Local Authority Fostering Services Only)

The following statutory Reports or Notifications are to be made under the Care Standards Act as a result of the findings of this inspection:

Report to the Secretary of State under section 47(3) of the Care Standards Act 2000 that the Commission considers the Local Authority's fostering service satisfies the regulatory requirements:	NO
satisfies the regulatory requirements.	
Notice to the Local Authority under section 47(5) of the Care Standards Act 2000 of failure(s) to satisfy regulatory requirements in their fostering service which are	NO
not substantial, and specifying the action the Commission considers the Authority should take to remedy the failure(s), informing the Secretary of State of that Notice:	
Report to the Secretary of State under section 47(4)(a) of the Care Standards Act of a failure by a Local Authority fostering service to satisfy regulatory requirements	NO
which is not considered substantial:	
Report to the Secretary of State under section 47(1) of the Care Standards Act 2000 of substantial failure to satisfy regulatory requirements by a Local Authority	NO
fostering service:	
The grounds for the above Report or Notice are:	
DOES NOT APPLY	

# Implementation of Statutory Requirements from Last Inspection

Requirements	from	last Inspe	ction visit	fully a	actioned?
- 1	_			- ,	

NO	
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### If No please list below

### STATUTORY REQUIREMENTS

Identified below are areas not addressed from the last inspection report which indicate a non-compliance with the Care Standards Act 2000 and Fostering Services Regulations 2002.

No.	Regulation	Standard	Required actions	
1	11(a)	FS9FS8	To ensure that the welfare of children placed is safeguarded at all times.	1/01/04
2	44(1)	FS27	To ensure that the fostering agency is carried on in such a manner as is likely to ensure that it will remain financially viable for the purpose of achieving the aims and objectives set out in its statement of purpose.	1/01/04

Action is being taken by the Commission for Social Care Inspection to monitor compliance with the above requirements.

### **COMPLIANCE WITH CONDITIONS OF REGISTRATION (IF APPLICABLE)**

### (Registered Independent Fostering Agencies only)

Providers and managers of registered independent fostering agencies must comply with statutory conditions of their registration. The conditions applying to this registration are listed below, with the inspector's assessment of compliance from the evidence at the time of this inspection.

Condition			Compliance
-			
Comments			
Condition			Compliance
-			
Comments			
Condition			Compliance
-			
Comments			
Condition			Compliance
-			
Comments			
Lead Inspector	Rosie Hodgson	Signa	ture
Second Inspector	Martin Davis	Signa	
Regulation	Malcolm Sykes	Signa	
Manager		-	
Date		_	

### STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

Action Plan: The appropriate Officer of the Local Authority or the Registered Person (as applicable) is requested to provide the Commission with an Action Plan, which indicates how requirements are to be addressed. This action plan will be made available on request to the Area Office.

### STATUTORY REQUIREMENTS

Identified below are areas addressed in the main body of the report which indicate non-compliance with the Care Standards Act 2000, the Children Act 1989, the Fostering Services Regulations 2002, or the National Minimum Standards for Fostering Services. The Authority or Registered Person(s) is/are required to comply within the given time scales in order to comply with the Regulatory Requirements for fostering services.

No.	Regulation	Standard *	Requirement	
1	11(a) & 34(3)	FS9FS8	To ensure that the welfare of children placed is safeguarded at all times.	1/11/04
2	11(b)	FS7	To ensure that before making any decision affecting a child to be placed with foster parents due consideration is given to the child's religious persuasion, racial origin and cultural and linguistic background.	1/11/04
3	24(5)	FS30	The fostering panel may be established jointly by any two but not more than three branches.	1/02/05
4	28(5)(b)	FS22	To ensure that in producing the Foster Care Agreement for a foster carer, this is in line with Schedule 5 of the Fostering Services Regulations 2002. This should include the terms of a the foster carer's approval	1/11/04

5	33(a)&(b)	FS8	The agency shall not place a child with a foster parent unless it is satisfied that  It is the most suitable way of performing its duty under section 22(3) or 61(1)(a) and (b) of the 1989 Act; and  A placement with the particular foster parent is the most suitable placement having regard to all the circumstances.	1/11/04
6	43(1)	FS22	If any of the events listed in Schedule 8 takes place, the registered person shall without delay notify the persons indicated.	1/11/04
7	22(2)	FS25	Records specified in Schedule 2 shall be retained for at least 15 years from the date of entry.	1/11/04
8	44(1)	FS27	To ensure that the fostering agency is carried on in such a manner as is likely to ensure that it will remain financially viable for the purpose of achieving the aims and objectives set out in its statement of purpose.	1/11/04

### GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

Identified below are areas addressed in the main body of the report which relate to the National Minimum Standards and are seen as good practice issues which should be considered for implementation by the Authority or Registered Person(s).

cons	idered for imp	lementation by the Authority or Registered Person(s).
No.	Refer to Standard *	Recommendation Action
1	FS2	The manager should exercise effective leadership of the staff and operation, such that the fostering service is organised, managed and staffed in a manner that delivers the best possible childcare.
2	FS7	To ensure that children and young people, and their families, are provided with foster care services which value diversity and promote equality.
3	FS8	Written foster placement agreements should contain specific reference to elements of matching which were taken in to consideration in agreeing the placement and identify areas where foster carers need additional support to compensate for any gaps in the match between the child and carer.
4	FS8	Where trans-racial placements are made, the agency should provide the foster family with additional training, support and information to enable the child to be provided with the best possible care and to develop a positive understanding of her/his heritage.
5	FS9	Training for foster carers and staff should include training in safe caring skills.
6	FS9	Each foster carer should be provided with full information about the foster child to enable the carer to protect the foster child, their own children, and other children for whom they have responsibility and themselves.

7	FS9	Detailed and individualized safe care policies should be cleared with the child's social worker and explained clearly and appropriately to the child.
8	FS9	Management systems should be put in place to collate and evaluate information on allegations of neglect or abuse of a child in foster care. The information should be scrutinised regularly.
9	FS12	Each carer should be provided with a written health record for each child placed in their care.
10	FS16	The level of administrative support should be kept under review.
11	FS19	The effectiveness of training programmes for staff should be routinely evaluated and training programmes reviewed and updated at least annually.
12	FS20	All staff should receive regular, planned appraisals from their line manager.
13	FS22	Each approved foster carer should be supervised to enable her or him to provide consistent, high quality care for children placed.
14	FS22	Information about the procedures for dealing with complaints and representations should be widely available.
15	FS22	Records about allegations of abuse should be kept and monitored.
16	FS25	Records of complaints and allegations should be clearly recorded on the relevant files for staff, carers and children – including details of the investigation, conclusion reached and action taken. Separate records should also be kept which bring together data on allegations and on complaints.
17	FS27	There should be procedures to deal with situations of financial crisis
18	FS30	One of the independent members should be a person who has at any time been placed with foster carers or whose child has at any time been placed with foster carers.

<sup>\*</sup> Note: You may refer to the relevant standard in the remainder of the report by omitting the 2-letter prefix e.g FS10 refers to Standard 10.

### PART B INSPECTION METHODS & FINDINGS

The following inspection methods have been used in the production of this report Number of Inspector days spent 8

(Enter Yes or No or NA) below

Survey of placing authorities	YES				
Foster carer survey					
Foster children survey					
Checks with other organisations and Individuals	YES				
Directors of Social services	NO				
Child protection officer	YES				
Specialist advisor (s)	YES				
Local Foster Care Association	NO				
Tracking Individual welfare arrangements	YES				
Interview with children	YES				
Interview with foster carers	YES				
Interview with agency staff	YES				
Contact with parents	NO				
Contact with supervising social workers	YES				
Examination of files	YES				
Individual interview with manager	YES				
Information from provider	YES				
Individual interviews with key staff	YES				
Group discussion with staff	YES				
Interview with panel chair	YES				
Observation of foster carer training	NO				
Observation of foster panel	YES				
Inspection of policy/practice documents	YES				
Inspection of records	YES				
Interview with individual child	YES				

Date of Inspection

Example. - 31/12/99 (Date Inspection

Started)

Time of Inspection (Time started on first day: 24 Hour

clock)

Duration Of Inspection (hrs) Example - 10.5

27/9/04

9.30

44

The following pages summarise the key findings and evidence from this inspection, together with the CSCI assessment of the extent to which the National Minimum Standards have been met. The following scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The scale ranges from:

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

# **Statement of Purpose**

The intended outcome for the following standard is:

 There is clear statement of the aims and objectives of the fostering service and the fostering service ensures that they meet those aims and objectives.

### **Standard 1 (1.1 - 1.6)**

There is a clear statement of the aims and objectives of the fostering service and of what facilities and services they provide.

### **Key Findings and Evidence**

Standard met?

3

There is a clear Statement of Purpose, which sets out the services provided for children who are placed by the fostering service. This document is in place for the whole organisation with interchangeable information on staff and support systems for each branch.

There are two new Children's Guides that are in different formats, to meet the needs of different groups of children.

The fostering service Policy and Procedures have been updated during the year, as has the Foster Carer handbook.

<sup>&</sup>quot;0" in the "Standard met?" box denotes standard not assessed on this occasion.

<sup>&</sup>quot;9" in the "Standard met?" box denotes standard not applicable.

<sup>&</sup>quot;X" is used where a percentage value or numerical value is not applicable.

### Fitness to Carry On or Manage a Fostering Service

The intended outcomes for the following set of standards are:

The fostering service is provided and managed by those with the appropriate skills and experience to do so efficiently and effectively and by those who are suitable to work with children.

### Standard 2 (2.1 - 2.4)

The people involved in carrying on and managing the fostering service possess the necessary business and management skills and financial expertise to manage the work efficiently and effectively and have the necessary knowledge and experience of childcare and fostering to do so in a professional manner.

### **Key Findings and Evidence**

Standard met?

The manager has almost completed her Social Care Management training. She expects to complete her qualification successfully by June 2005.

Staff report that they have good working relationships with their managers and that any difficulties can be addressed as they arise. Team meeting minutes evidenced that issues raised by the team were taken up with relevant senior managers.

The inspectors noted that the manager of this main office is in the role of Operations and Development Manager. This is a role that covers the whole organisation. Whilst the inspectors saw that this staff member was fully competent to manage the Salisbury office, they question the wide remit of the post. In the inspectors opinion the developmental and operational function of this role, coupled with time out for management training, is compromising the management of the Salisbury and Fordingbridge Team.

### Standard 3 (3.1 - 3.4)

Any persons carrying on or managing the fostering service are suitable people to run a business concerned with safeguarding and promoting the welfare of children.

### **Key Findings and Evidence**

Standard met?

An inspection of staff files at head office was made and the inspectors were able to see evidence of references set out in Schedule 1 of the Fostering Service Regulations 2002 being followed for managers.

Inspectors were able to see a spreadsheet system in place to bring forward three yearly checks for managers.

### Management of the Fostering Service

The intended outcomes for the following set of standards are:

Number of statutory notifications made to CSCI in last 12 months:

The fostering service is managed ethically and efficiently, delivering a good quality foster care service and avoiding confusion and conflicts of role.

Standard 4 (4.1 - 4.5)

There are clear procedures for monitoring and controlling the activities of the fostering service and ensuring quality performance.

### **Key Findings and Evidence**

Standard met?

The inspector noted in documentation and through discussion with staff and carers that there are well established lines of communication and accountability.

The inspectors found that information is provided to purchasers of services. Financial procedures are also made clear to foster carers in writing. This is reinforced by financial contracts both to purchasers and foster carers. The inspectors advised that detailed information about charges and payments to foster carers as well as itemised amounts paid for wider services should be more readily available to purchasers and others.

rumber of statatory normations made to ocor in last 12 months.		_
Death of a child placed with foster parents.	0	
Referral to Secretary of State of a person working for the service as unsuitable to work with children.	0	
Serious illness or accident of a child.	1	
Outbreak of serious infectious disease at a foster home.	0	
Actual or suspected involvement of a child in prostitution.	1	
Serious incident relating to a foster child involving calling the police to a foster home.	2	
Serious complaint about a foster parent.	2	
Initiation of child protection enquiry involving a child.	4	
Number of complaints made to CSCI about the agency in the past 12 months	ths:	(
Number of the above complaints which were substantiated:		0

**Standard 5 (5.1 - 5.4)** 

The fostering service is managed effectively and efficiently.

### **Key Findings and Evidence**

Standard met?

3

Findings under Standard 2 are also relevant here. It is the inspectors view that clarification about the role of the Operations and Development manager be addressed quickly so that the manager can focus on the job of managing her team.

In this inspection, the inspectors found that job descriptions are in place for managers at all levels. The manager indicated that the role of Senior Practitioner is still in need of some clarification.

### **Securing and Promoting Welfare**

The intended outcome for the following set of standards is:

• The fostering service promotes and safeguards the child/young person's physical, mental and emotional welfare.

**Standard 6 (6.1 - 6.9)** 

The fostering service makes available foster carers who provide a safe, healthy and nurturing environment.

### **Key Findings and Evidence**

Standard met?

3

The inspectors visited a number of foster homes and found them to be warm and well maintained. The inspectors saw that foster homes are inspected annually with a health and safety check done. These checks have been developed since the last inspection so that they now represent a very comprehensive survey.

The inspector has advised that training be provided for fostering service staff so that they can complete these checks with confidence and authority.

For carers their Health and Safety responsibilities are set out in the Foster Care Handbook. They also receive some introductory training in this area during their induction training.

The inspectors saw that there was no sharing of rooms except in sibling placements.

**Standard 7 (7.1 - 7.7)** 

The fostering service ensures that children and young people, and their families, are provided with foster care services which value diversity and promote equality.

### **Key Findings and Evidence**

Standard met?

2

The inspector visited two foster homes where children of mixed race were placed. Both children and foster carers were spoken to. Children's case files were also inspected, as well as foster carer records and supervision notes. The Social Worker for one case was also interviewed. One of these placements was long term and showed a good match between the ethnic origin of the carers and the child. The other placement was short term and had been arranged in emergency. In this placement the match did not reflect the child's ethnic origin.

The inspector noted that where one trans-racial placement was made, there was acknowledgement of the child's needs and some attempts were made to access relevant guidance, although with limited success.

The inspectors noted that although the service does provide initial fostering training for applicants where carers are introduced to issues of discrimination and valuing diversity, it is the inspector's opinion that a more specific additional training be provided for carers to equip them with the skills and confidence to work with youngsters from other cultures. Foster carers spoken to with regard to this issue felt they were not well prepared to work in this way and would welcome additional training. In the inspectors opinion this training should also be extended to Family Placement staff to ensure they can support appropriately.

The inspectors also visited a foster home where the child's needs arising from her disability were well matched and met.

### Standard 8 (8.1 - 8.7)

Local authority fostering services, and voluntary agencies placing children in their own right, ensure that each child or young person placed in foster care is carefully matched with a carer capable of meeting her/his assessed needs. For agencies providing foster carers to local authorities, those agencies ensure that they offer carers only if they represent appropriate matches for a child for whom a local authority is seeking a carer.

### **Key Findings and Evidence**

Standard met?

1

The inspectors heard from the referrals officer that there is a stringent filtering process that takes place before a placement is considered. And that in this way a high percentage of referrals are turned away because a match could not be achieved. This was further supported by statistical information provided by senior staff.

The inspectors visited two foster homes where careful matching had taken place. In the inspectors opinion these carers were capable of meeting the children's assessed needs. Inspection of children's files and interviews with carers and staff further confirmed this.

The inspectors also visited two foster homes where little evidence of matching had taken place. These were emergency and respite placements. In one instance, children were placed outside the foster carers approval category without any recourse to fostering panel for a variation of approval. In respite placements, the inspectors found little evidence of paperwork accompanying the child, so that it was difficult to see if matching was appropriate. There was no evidence on file of Placement Agreement for any of these placements, and no evidence of planning involving the placing Social Worker or the Five Rivers Social Worker for these placements. Foster carers confirmed that they arranged for exchange of information verbally. Carers confirmed that they had little written information in order to care appropriately. (Links to Standard 9)

The inspectors noted in documentation that in the emergency placement, although two days had lapsed between initial referral and placement, no Care Plan or recent comprehensive written assessment was available before placement, despite the child's long care history. This information was still not forthcoming three months into placement.

Since 18 out of the 19 foster carers who replied to the questionnaires indicated that they took emergency placements, this further highlights the important issue of matching. Whilst the inspectors understand the pressures of emergency and respite situations, matching remains a very important area if children's needs are to be met safely.

Foster care agreements seen did not identify areas where foster carers might need additional support to compensate for gaps in the match.

**Standard 9 (9.1 - 9.8)** 

The fostering service protects each child or young person from all forms of abuse, neglect, exploitation and deprivation.

### **Key Findings and Evidence**

Standard met?

2

The inspectors noted that developments had been made in the area of safer care. Documentary evidence shown to the inspector indicated that good practice recommendations made at the last inspection had been taken up. The inspectors saw examples of detailed and appropriate policies in place to keep children and carers safe. However, the inspectors also found significant gaps in two of the cases tracked, with no individual policies in place, despite sexualised obsessive behaviour in one placement. There was no evidence that policies are shared with placing social workers.

Carers and Fostering staff both indicate that they would welcome specific training in relation to drawing up safer care policies. The training officer has gained advice from Fostering Network about safer care. He told the inspectors that his intention was for policies to be customised to individual circumstances. In the inspectors opinion it is important that this is backed up by training where best practice can be shared.

Percentage of foster children placed who report never or hardly ever being bullied:

Χ

%

**Standard 10 (10.1 - 10.9)** 

The fostering service makes sure that each child or young person in foster care is encouraged to maintain and develop family contacts and friendships as set out in her/his care plan and/or foster placement agreement.

### **Key Findings and Evidence**

Standard met?

4

The inspectors found plenty of evidence of work done within the agency to encourage maintain and develop family contacts and friendships for fostered children.

The inspectors heard from carers and saw in documents that there are some high levels of contact supported in the agency. Help and support is given to the carer to maintain this and to deal with difficult contact issues. Carers reported to the inspector how very much they valued the support they received from the agency in this difficult area.

The inspectors saw that carers record outcomes of contact arrangements and their perceived impact on the child. This information is then fed back via monthly summary sheets to the child's social worker.

### Standard 11 (11.1 - 11.5)

The fostering service ensures that children's opinions, and those of their families and others significant to the child, are sought over all issues that are likely to affect their daily life and their future.

### **Key Findings and Evidence**

Standard met?

3

Inspectors heard from foster carers that they are encouraged to seek out children's opinions and feed these back to the placing social worker. The inspectors heard that in their regular supervision visits to carers, Fostering Support Workers consider any issues that arise about each child and they then also provide a link to the placing Social Worker. The inspectors also heard that Family Support Workers provide an invaluable link in ascertaining the child's wishes and feelings.

The inspectors spoke to fostered children during the inspection and found that they were keen to talk to inspectors about what it is like being fostered. There continues to be no evidence of formal consultation with young people fostered by the agency. There remains then an opportunity in the agency to develop forums for fostered children so that they can air their opinions and views on all matters affecting them. A children's council or equivalent, if developed would be seen as good practice.

The Children's Guide sets out how children can complain. The inspectors saw that there was one complaint by a child, which was handled appropriately. There was however, no outcome letter to the complainant, which would be seen as good practice in dealing with complaints. It was encouraging to see that the system was being used.

### Standard 12 (12.1 - 12.8)

The fostering service ensures that it provides foster care services which help each child or young person in foster care to receive health care which meets her/his needs for physical, emotional and social development, together with information and training appropriate to her/his age and understanding to enable informed participation in decisions about her/his health needs.

### **Key Findings and Evidence**

Standard met?

2

A requirement was made at the last inspection, with regard to meeting the health care needs of children and young people fostered by the agency. At this inspection, the inspectors found that a comprehensive health record front sheet had been put in place for children's files. Inspectors were told that these are copied to foster carers to hold at home.

Inspectors saw that these records were in place on most files inspected. However, in the absence of placement agreements for respite carers visited, inspectors saw that background medical information was not shared and that procedures regarding consent to medical treatment were not made clear. In one instance a young person placed for respite who was prescribed Ritalin, arrived with tablets in an envelope with a note from the carer. This secondary dispensing is not safe practice. Subsequent to the inspection, the agency has produced an administering of Medication Policy which should improve this practice.

Carers asked the inspector to highlight the need for specific training about First Aid for carers of children. In this way they felt they would be better equipped for their task.

### Standard 13 (13.1 - 13.8)

The fostering service gives a high priority to meeting the educational needs of each child or young person in foster care and ensures that she/he is encouraged to attain her/his full potential.

### **Key Findings and Evidence**

Standard met?

3

Inspectors heard that the majority of children placed within the agency are in mainstream schooling.

Inspectors were shown a new Education Record front sheet that will be kept on the child's file. This will be used in conjunction with the School Exclusion Log to assist with tracking school exclusion patterns.

Inspectors found appropriate SEN Statements, IEP's and PEP's on files read. Where these were not in place, the inspectors saw copies of letters sent out to the placing social worker requesting updated records that relate to education.

Some carers described positive working relationships with schools, with support given when young people were excluded. Other carers reported that this was often the 'last straw' leading to placement breakdown. One carer reported a poor response from the school when she tried to address issues of bullying and racist attacks on the foster child.

One child was accessing the Belmont School from their foster placement. The inspector heard that this is a valuable resource for children who have found mainstream school a difficult environment.

### **Standard 14 (14.1 - 14.5)**

The fostering service ensures that their foster care services help to develop skills, competence and knowledge necessary for adult living.

### **Key Findings and Evidence**

Standard met?

3

The inspectors were shown new documentation, which will be used to help prepare young people for adult living. The inspector gave advice to staff about the use of Assessment and Action Records through the Local Authority as a way of developing this area for young people.

The inspectors found documented evidence on file that related to preparing young people for adulthood. Inspectors heard from staff and carers about sensitive and individualised planning for young people. Foster carers told inspectors of a number of examples of well-planned endings for fostered children, with Pathway Plans in place to see them through this difficult transition.

# Recruiting, Checking, Managing, Supporting and Training Staff and Foster Carers

### The intended outcome for the following set of standards is:

 The people who work in or for the fostering service are suitable to work with children and young people and they are managed, trained and supported in such a way as to ensure the best possible outcomes for children in foster care. The number of staff and carers and their range of qualifications and experience are sufficient to achieve the purposes and functions of the organisation.

**Standard 15 (15.1 - 15.8)** 

Any people working in or for the fostering service are suitable people to work with children and young people and to safeguard and promote their welfare.

### **Key Findings and Evidence**

Standard met?

3

Personnel records were inspected and staff interviewed. In the inspectors view personnel files were of a good standard, they are clearly structured and there is an effective monitoring system in place to maintain these records.

Two of the files sampled did not initially appear to meet the requirement of schedule. Further information was provided to indicate that this standard was met but care must be taken in future to maintain complete files.

All files contained evidence of appropriate personal and professional references and for new employees there is a record of telephone enquiries to follow up written references.

Appropriate CRB checks were in place on all the files inspected. A personnel officer confirmed that a system has been developed to ensure that checks are renewed on a three yearly cycle.

New staff that have limited or no family placement experience are closely supported and supervised, appropriate training is identified. Two social workers said that they had attended a one-day BAAF Assessment Skills workshop, and the training co-ordinator confirmed that a further two-day BAAF course has been arranged for all staff in December 2004. Fostering Network Carer Supervision training has also been organised.

Family Placement Support Workers are unqualified. They have an appropriate job description. Their responsibilities include practical support of carers and children; this may include direct work with young people but only as an agreed package and only with appropriate supervision from the Practice Manager or other qualified member of staff.

Total number of staff of the	27	Number of staff who have left the	2
agency:	21	agency in the past 12 months:	2

Standard 16 (16.1 - 16.16)

Staff are organised and managed in a way that delivers an efficient and effective foster care service.

### **Key Findings and Evidence**

Standard met?

2

At this inspection the inspectors saw that the management structure had changed within the agency. The structure shown to the inspector is clear and job descriptions provided give a picture of responsibilities and levels of management delegation within the team.

Points highlighted under Standards two and five are relevant here, particularly in relation to the wide remit of the Operations and Development Manager. Inspectors have questioned the wide remit of this post. Staff in Fordingbridge were very confident in the ability of the Practice Manager to manage their team.

Three good practice recommendations were made at the last inspection in relation to this Standard. The inspectors found in questionnaires, case files and in discussions with staff, that two of these recommendations had been met. This related to the recommendation that carers maintain a training portfolio and also that a clear understanding be outlined about how the fostering service social workers and children's social workers work effectively together. The agency has moved forward in these areas by providing training portfolios for carers and in clarifying the interface between the agency and placing social workers. The inspector was also told that new training portfolios for staff will be provided soon.

The recommendation outstanding related to the appropriate level of administrative support. The inspectors found that particularly in the new Fordingbridge sub office administrative support was stretched. All the staff in this office confirmed that this is a problem. The inspector heard that the administrative worker here has responsibility for CRB's across the agency and this is very time consuming. Evidence seen on files also showed that recording was significantly delayed due to backlog in typing. The inspector was also told that annual reviews were delayed for the same reason. Managers of the service subsequently stated that administration within the Fordingbridge office was resolved prior to the inspection.

The inspectors saw on files and heard from staff that they have workloads that are manageable and in line with the Statement of Purpose.

Inspectors were informed that a new computer system has been purchased and will be on line for fostering staff shortly. This will enhance communication, particularly for homeworking staff.

### **Standard 17 (17.1 - 17.7)**

The fostering service has an adequate number of sufficiently experienced and qualified staff and recruits a range of carers to meet the needs of children and young people for whom it aims to provide a service.

### **Key Findings and Evidence**

Standard met?

3

The inspectors found that the agency has an adequate number of sufficiently experienced and qualified staff. All staff have appropriate qualifications. Relatively small caseloads are carried within the team, with staff supporting up to 10 families and assessing up to 2 applicants. Staff felt that caseloads were manageable and enabled them to offer high levels of support to carers. This is in line with the Statement of Purpose.

At the last inspection, inspectors received feedback from panel regarding the need to have a clearly set out assessment process for carers. A good practice recommendation was made. Whilst the manager indicates that an assessment process is already in operation, it is the inspector's opinion that more detail is needed here. Some suggestions were made to senior staff about this.

The assessments read were of the required standard. The inspectors saw that assessments are updated when the carers have been approved for a number of years. This is good practice. However, use of the competency element of the assessments appears to be limited. On one file this was simply made up of a series of witness statements.

Staff report that training input on assessment during the year has been valuable. This is to be repeated in more depth before Christmas.

### **Standard 18 (18.1 - 18.7)**

The fostering service is a fair and competent employer, with sound employment practices and good support for its staff and carers.

### **Key Findings and Evidence**

Standard met?

3

Carers reported that the Out-of-Hours support system continues to work well. Staff will visit if necessary out of hours. Carers find this a very supportive service. 'Just knowing its there helps.'

Management systems were in place for carer supervision, appraisal and support. The inspector made some suggestions about amendments to the annual review format so that important information such as unannounced visits could be recorded.

There is public liability and professional indemnity insurance for staff and carers.

There is a whistleblowing policy, which is made known to staff and carers through policy documents and the foster care handbook.

Standard 19 (19.1 - 19.7)

There is a good quality training programme to enhance individual skills and to keep staff up-to-date with professional and legal developments.

### **Key Findings and Evidence**

Standard met?

2

A part-time fostering training co-ordinator' post had recently been established and an experienced fostering social worker appointed to it. The co-ordinator takes responsibility for both carer and social work training.

Evidence was found of staff having induction. Staff also confirmed that the induction programme had improved over the last year at their behest. Post-qualifying and in-service training is available. An inspector was informed that the organisation would support unqualified staff to become DIPSW qualified through distance learning schemes.

A systematic programme of staff training has yet to be developed and it was reported to inspectors that access to training could be ad hoc. The training co-ordinator was aware of these concerns; he has prioritised areas of training including assessment and support of carers and will undertake to develop a formal programme for staff in the future.

A group of carers spoken to during the inspection asked for specific training on drugs, First Aid that is specific for children and also on self-employment. These carers and others interviewed during the inspection also raised the issue of NVQ training for carers. They reported that there has been a delay in this training and carers find this frustrating. The manager asked the inspectors for clarification about NVQ assessors. This is being followed up by CSCI.

Staff appraisals were seen on file. Some significant gaps were noted in the frequency of staff appraisals. The inspector noted that the appraisal did not always identify training needs. The inspectors advised that a system should be developed to ensure that the training coordinator is informed of identified staff training needs following appraisal.

Staff have responsibility for completing Health and Safety assessments but have not received any specific health and safety training, some staff said that they would value this training.

Despite a recommendation of the last inspection, no evaluation of training programmes for staff was provided for inspection. A repeat recommendation is made.

Standard 20 (20.1 - 20.5)

All staff are properly accountable and supported.

### **Key Findings and Evidence**

Standard met?

2

The inspector noted some significant amendments to the Policy and Procedure file for staff. The inspector was informed that some new policies are still in draft form, for example the new complaints procedure. It is important that once this policy is formalised that amendments be made to reflect any changes in both the Foster Care Handbook and Children's Guide.

The inspector saw in supervision records that these were up to date and staff reported that they were satisfied with the support offered.

The inspector saw that there were recent appraisals on two staff files sampled. However, one member of staff stated they had not received an appraisal in the last three years.

The inspector read staff team meeting minutes and saw that regular meetings are held in both offices.

### Standard 21 (21.1 - 21.6)

The fostering service has a clear strategy for working with and supporting carers.

### **Key Findings and Evidence**

Standard met?

3

The inspectors heard from a group of carers that they feel very well supported by the agency. The agency operates on an excellent ratio of supervising social workers to foster carers. This is reflected in foster carer and placing social worker comments about the support received. In questionnaires completed as part of this inspection all of the carers who replied to questions about support, said that they felt very well supported by the agency.

16 out of 22 placing social workers that replied to questions about how well the agency works with the placing authority said that they felt the agency worked very well in partnership with them. The remainder reported that the agency worked fairly well with them. This indicated that there is a good system of communication between the fostering service social workers and the child's social worker. This was further confirmed by telephone discussion with two placing social workers spoken to during the inspection.

Two carers spoken to provided evidence that communication and support from fostering service social workers can be inappropriate. This seems to be particularly so at times of stress, for example when new to fostering and unclear about the levels of support to expect. With hindsight these carers felt they should have been more supported over decisions about their involvement in contact for example. Another carer indicated that they felt their fostering support social worker did not appreciate the difficulties they were experiencing with the fostered child. This carer felt excluded from important meetings about long term planning for the placement, and disempowered in the process.

Standard 22 (22.1 - 22.10)

The fostering service is a managed one that provides supervision for foster carers and helps them to develop their skills.

### **Key Findings and Evidence**

Standard met?

2

In Foster Care agreement documents inspected at this inspection the inspectors saw that in some instances, the terms of the foster parent's approval had been attached to the general signed agreement.

This process had been adopted following discussion at a previous inspection and Five Rivers' understanding that they were conforming with correct practice. The inspectors gave amended advice regarding this practice and a requirement is made.

Inspectors found evidence on files showing regular visits to foster carers. At the time of the inspection, one file did not contain evidence of contracts that subsequent information indicated were made.

Inspectors found evidence of an annual unannounced visit for one carer, but none in other files inspected. The inspectors recommend that a section be added to the annual review to record when an unannounced visit took place so that this can be monitored.

9 out of 11 children who replied to questionnaires completed as part of this inspection reported that they had been told how to make a complaint. 9 out of 17 Social Workers who replied to questionnaires indicated that they had been given information about the agencies complaints procedure. All 20 foster carers who responded to questionnaires indicated that they knew how to complain on behalf of a child. One reported verbally to the inspector that they didn't know they could complain in their own right. 6 carers reported that they had made a complaint on behalf of a foster child. The inspector gave feedback to senior staff about the complaints system, in particular what constitutes a complaint.

The inspector gave advice to the manager about updating local Child Protection procedures.

Records about allegations of abuse were inspected and found to have significant shortfalls. The inspector noted that notifications were not in line with Schedule 8. A requirement is made. The inspector stressed to the manager the importance of following up recommendations of any Child Protection conferences.

**Standard 23 (23.1 - 23.9)** 

The fostering service ensures that foster carers are trained in the skills required to provide high quality care and meet the needs of each child/young person placed in their care.

### **Key Findings and Evidence**

Standard met?

3

The inspectors did not attend training for foster carers as part of this inspection. The inspectors were able to read the 2004 –2005 training programme for foster carers and an inspector interviewed the newly appointed training co-ordinator.

Introductory training includes a residential weekend. This is facilitated by both staff and experienced carers.

The training co-ordinator has developed a programme of training for foster carers. This includes safer care, legislation, child sexual abuse and challenging behaviour. The full programme has yet to run but initial feedback from foster carers has been positive. The training co-ordinator anticipates that the programme will run on a rolling basis with further modules developed as a result of feedback from carers and staff.

Carers interviewed confirmed that the agency provides support to enable them to attend training events; this includes financial incentives, childcare cover and children's activities at training venues.

The training co-ordinator has made links with the local authority in an attempt to identify shared training needs.

At the point of inspection carers did not have access to first aid training although the training co-ordinator had approached a local training organisation and plans to commission a series of six half-day workshops on emergency aid in foster homes.

Carers have limited access to NVQ training and assessment. An inspector was informed that the agency had recently appointed a new NVQ trainer who would co-ordinate carer access to NVQ. Examples were found of the agency financially supporting carers that have accessed external NVQ courses.

A successful Children Who Foster Support Group meets on a quarterly basis. Carers interviewed said that their children valued the opportunity to meet with other young people who foster and discuss common issues. Activities organised by the group provide a reward/recognition for the role played by the young people.

### Records

### The intended outcome for the following set of standards is:

 All appropriate records are kept and are accessible in relation to the fostering services and the individual foster carers and foster children.

### Standard 24 (24.1 - 24.8)

The fostering service ensures that an up-to-date, comprehensive case record is maintained for each child or young person in foster care which details the nature and quality of care provided and contributes to an understanding of her/his life events. Relevant information from the case records is made available to the child and to anyone involved in her/his care.

### **Key Findings and Evidence**

Standard met?

3

The inspectors noted further developments made by the agency during the last year in respect of records. This includes records for children and carers. There are also new recording systems in place in a range of areas ensuring easy access to information. Whilst staff report these developments as very welcome, an issue of file 'ownership' was raised with the inspector. The inspector was told that filing is completed by administrative staff and that this can mean that social work staff don't know where papers are filed. This may be a consequence of a newly devised system, however the inspector fed back to senior staff that it is important for files to be a useful 'tool' for staff in their work. The manager reported that a forthcoming 'team day' would address this issue.

The inspector heard about sensitive work done by foster carers helping children to understand their complex histories, with the collection of appropriate memorabilia, photograph albums etc.

Comments made under Standard 7 are also relevant to this Standard. In order to help children come to terms with past events, it is crucial that background information be sought.

Standard 25 (25.1 - 25.13)

The fostering service's administrative records contain all significant information relevant to the running of the foster care service and as required by regulations.

### **Key Findings and Evidence**

Standard met?

1

The inspector noted developments in administrative records across the areas outlined in Standard 25.2. The inspector spoke to staff responsible for the development of these records and systems and gave advice about aspects of this work. It is expected that these new recording practices will be replicated across the agency.

Notifications of the events listed in Schedule 8 had significant gaps. A requirement is made and a good practice recommendation further backs this up.

The inspector noted that archived records are being stored in roof space at the Salisbury office, but was told that new premises for archived files were being sought.

Number of current foster placements supported by the agency:	
Number of placements made by the agency in the last 12 months:	
Number of placements made by the agency which ended in the past 12 months:	Х
Number of new foster carers approved during the last 12 months:	Χ
Number of foster carers who left the agency during the last 12 months:	Χ
Current weekly payments to foster parents: Minimum £ X Maximum £	X

# Fitness of Premises for use as Fostering Service

### The intended outcome for the following standard is:

The premises used as offices by the fostering service are suitable for the purpose.

Standard 26 (26.1 - 26.5)

Premises used as offices by the fostering service are appropriate for the purpose.

### **Key Findings and Evidence**

Standard met?

3

At the last inspection it was found that the office accommodation was unsuitable for the purpose and a requirement made to address this issue. In response additional office space was identified and the staff team split. Staff report that this has benefited the team.

The new Fordingbridge provides suitable office accommodation, comprising of two team rooms, a meeting room, manger's office and admin office. Staff were generally positive about the move to Fordingbridge and considered the physical facilities appropriate.

The inspector did not consider the current security of the office to be appropriate. Access to the building as a whole is unrestricted during the day, there is no reception area or suitable entry system to the 1<sup>st</sup> floor where the fostering team are located. Some staff described feeling vulnerable at certain times due to this open access. Senior staff indicated that this would be quickly remedied with the provision of a key security pad system.

Suitable facilities exist for the secure retention of records.

At Fordingbridge, two computer terminals have been provided for staff, and some staff have laptops. Access to e-mail and Internet facilities is only available via the administrator's computer, in the inspectors opinion this is inadequate and undermines efficiency. Whilst this computer is password protected the administrators password has had to be shared with other staff so that they can access their e-mails when the administrator is absent. Senior staff reported that there are imminent changes to the whole computer system with the introduction of the intranet for all staff.

### **Financial Requirements**

### The intended outcome for the following set of standards is:

 The agency fostering services are financially viable and appropriate and timely payments are made to foster carers.

**Standard 27 (27.1 - 27.3)** 

The agency ensures it is financially viable at all times and has sufficient financial resources to fulfil its obligations.

### **Key Findings and Evidence**

Standard met?

2

The inspectors were provided with budget statements for 2004-6. These statements had been broken down for each branch of Five Rivers Consortium (Family Placements) Limited. These demonstrate that there are sufficient financial resources to fulfil obligations.

Written procedures that set out how situations of financial crisis will be managed, in particular the arrangements for disclosing information to purchasers and liaising with them to protect children were not in place.

Budget forecasts predict a growth in foster placements from 104 in September 2004 to 127 by September 2006.

### **Standard 28 (28.1 - 28.7)**

The financial processes/systems of the agency are properly operated and maintained in accordance with sound and appropriate accounting standards and practice.

### **Key Findings and Evidence**

Standard met?

1

Since the last inspection guidance has been written for managers and staff describing the financial procedures to be followed, however this does not extend to the responsibilities of directors and consultants commissioned to work for the agency.

There are no clearly documented financial arrangements for control and supervision of the agency's financial affairs and powers despite previous requirements and recommendations made.

There continue to be no written principles and standards governing the agency's financial management.

The registered provider receives a copy of monthly accounts and a financial advisor attends the monthly senior management meeting

Standard 29 (29.1 - 29.2)

Each foster carer receives an allowance and agreed expenses, which cover the full cost of caring for each child or young person placed with him or her. Payments are made promptly and at the agreed time. Allowances and fees are reviewed annually.

### **Key Findings and Evidence**

Standard met?

3

Foster carers informed inspectors that allowances are paid on time. Inspectors were shown the systems developed by the agency to ensure that carers are paid promptly even where a local authority may have been slow to make a payment.

The agency does not publicise current allowance levels to carers annually. The inspector found an example of where two carers taking on similar responsibilities were paid at different levels; one carer had questioned this with a senior manager who then took appropriate action. The company accountant confirmed that due to the way in which allowances are calculated this situation could reoccur.

Senior staff told the inspectors that steps had been taken to remedy the above discrepancies for all carers.

### **Fostering Panels**

The intended outcome for the following set of standards is:

 Fostering panels are organised efficiently and effectively so as to ensure that good quality decisions are made about the approval of foster carers, in line with the overriding objective to promote and safeguard the welfare of children in foster care.

Standard 30 (30.1 - 30.9)

Fostering panels have clear written policies and procedures, which are implemented in practice, about the handling of their functions.

### **Key Findings and Evidence**

Standard met?

2

The inspector observed a panel meeting and also met with and interviewed the panel chair. The inspector noted that the panel had acted on the three requirements made at the last inspection.

The inspector heard that that because the Responsible Individual is on the panel he is able to channel feedback to managers about the assessment process. The chair is also able to meet regularly with managers from all the offices for feedback. Suggestions were made to the chair and to the Responsible Individual regarding the assessment process, review format and health and safety assessments.

Where the outcomes of assessments or annual reviews presented to panel are different to the social work recommendation the inspector advised that the reasons for this should be recorded on file (perhaps by copying the panel minutes on to file.)

The inspectors noted that there is no independent member on the panel with specific experience of education. The chair agreed that this would be beneficial but was anxious not to disrupt the panel make up at this stage.

The inspectors heard about the continuing efforts being made to find an independent panel member who has been placed with foster carers. The inspectors clarified to the chair that this member could also be a person whose child has been placed with foster carers. A repeated good practice recommendation is made. Subsequent to the inspection, CSCI was informed that a potental panel member to meet these criteria had been identified.

### **Short-Term Breaks**

The intended outcome for the following set of standards is:

When foster care is provided as a short-term break for a child, the arrangement recognises that the parents remain the main carers for the child.

**Standard 31 (31.1 - 31.2)** 

Where a fostering service provides short-term breaks for children in foster care, they have policies and procedures, implemented in practice, to meet the particular needs of children receiving short-term breaks.

### **Key Findings and Evidence**

Standard met? | 9

Five Rivers Fostering Service does not provided short-term placements within the meaning of the Fostering Services Regulation 37.

### Family and Friends as Carers

The intended outcome for the following set of standards is:

Local authority fostering services' policies and procedures for assessing, approving, supporting and training foster carers recognise the particular contribution that can be made by and the particular needs of family and friends as carers.

**Standard 32 (32.1 - 32.4)** 

These standards are all relevant to carers who are family and friends of the child, but there is recognition of the particular relationship and position of family and friend

### **Key Findings and Evidence**

Standard met?

This standard is not relevant to Five Rivers Fostering Service.

PART C	LAY ASSESSOR'S SUMMARY		
(where applicable)			
Lay Assessor	Signature		
Date			

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### PROVIDER'S RESPONSE

D.1 Registered Person's or Responsible Local Authority Manager's comments/confirmation relating to the content and accuracy of the report for the above inspection.

We would welcome comments on the content of this report relating to the Inspection conducted on  $27^{th} - 30^{th}$  September 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible	

# Action taken by the CSCI in response to the provider's comments: Amendments to the report were necessary Comments were received from the provider Provider comments/factual amendments were incorporated into the final inspection report The inspector believes the report to be factually accurate YES YES

### Note:

In instances where there is a major difference of view between the Inspector and the Registered Provider responsible Local Authority fostering service Manager both views will be made available on request to the Area Office.

D.2 Please provide the Commission with a written Action Plan by 28 February 2005, which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.

Status of the Provider's Action Plan at time of publication of the final inspection report:

Action plan was required	YES
Action plan was received at the point of publication	YES
Action plan covers all the statutory requirements in a timely fashion	
Action plan did not cover all the atatutany requirements and required further	
Action plan did not cover all the statutory requirements and required further discussion	
Provider has declined to provide an action plan	NO
Other: <enter details="" here=""></enter>	

### **Public reports**

It should be noted that all CSCI inspection reports are public documents. Reports on children's homes are only obtainable on personal application to CSCI offices.

### FIVE RIVERS FOSTERING - ANNOUNCED INSPECTION 27-30 SEPTEMBER 2004

### D.3 PROVIDER'S AGREEMENT

Registered Person's or responsible Local Authority Manager's statement of agreement/comments: Please complete the relevant section that applies.

D.3.1	confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.				
	Print Name				
	Signature				
	Designation				
	Date				
Or					
D.3.2	I of am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:				
	Print Name				
	Signature				
	Designation				
	Date				

Note: In instance where there is a profound difference of view between the Inspector and the Registered Provider both views will be reported. Please attach any extra pages, as applicable.

# **Commission for Social Care Inspection**

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