

inspection report

Fostering Services

Lambeth Social Services

Mary Seacole House
91 Clapham High Street
London
SW4 7TF

26th, 27th February, 1st – 5th March 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?

YES

Name of Authority

Lambeth Social Services

Address

Mary Seacole House, 91 Clapham High Street, London,
SW4 7TF

Local Authority Manager

Ruth Wise

Tel No:

020 7926 8543

Address

Mary Seacole House, 91 Clapham High Street, London,
SW4 7TF

Fax No:

Email Address

Registered Fostering Agency (IFA)

NO

Name of Agency

Tel No

Address

Fax No

Email Address

Registered Number of IFA

Name of Registered Provider

Name of Registered Manager (if applicable)

Date of first registration

Date of latest registration certificate

Registration Conditions Apply?

NO

Date of last inspection

05.06.04

| | | | |
|--|----------|--------------------|----------------|
| Date of Inspection Visit | | 26th February 2004 | ID Code |
| Time of Inspection Visit | | 10:00 am | |
| Name of Inspector | 1 | Sue Nott | 105781 |
| Name of Inspector | 2 | Roger Blades | 113834 |
| Name of Inspector | 3 | Eileen Hourigan | |
| Name of Inspector | 4 | | |
| Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the NCSC. 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 | | | |

Introduction to Report and Inspection

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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**
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Part D: Provider's Response

D.1. Provider's comments

D.2. Action Plan

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INTRODUCTION TO REPORT AND INSPECTION

Independent and local authority fostering services which fall within the jurisdiction of the National Care Standards Commission (NCSC) 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 NCSC in respect of Lambeth Social 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 NCSC 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. |
|--|
| <p>A local authority fostering service covering an inner city area with a high demand for placements. The service comprised of a short-term fostering team, carrying out recruitment, assessment and support functions; a long term fostering team; plus two workers carrying out kinship assessments, who were to form the basis of a new Family and Friends team. The teams were part of the Children's Division. The Family Link Respite Service for children with disabilities was managed separately within the authority. The brokerage team dealt with all referrals for placements. Internal resources were sought first, before placements with Independent Fostering agencies were agreed.</p> <p>Prior to January 2003, some of the borough's fostering functions were contracted out to the private sector. Recruitment and assessment had been brought back in house and management were still in the process of developing its own service. Information provided for the inspection showed that out of 458 children placed, 98 were placed with 94 Lambeth carers. The in house service provided approximately 40% of the total number of placements needed to meet the needs of the children looked after within the authority.</p> |

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 inspection took place seven months after the previous inspection and, although a number of the requirements had been met, some were still in the process of being implemented within the timescale given. Inspectors were reassured by the continuing commitment of management and staff to develop those areas of practice where improvement was needed and to consolidate areas where they were doing well. The return of carer recruitment and assessment functions from the private sector to the local authority began in January 2003, and the in house service was still being developed. Overall, the findings of the inspection identified some areas of good practice and a commitment by staff and managers to expand and improve the service and to develop quality assurance systems. Areas done well included good individual link worker support and a rigorous panel keen to maintain and strengthen its quality assurance role within the wider Children's Services Strategy. However, the shortfalls identified in the service were areas identified in the previous inspection and where considerable work is required. These include the staffing situation, as the small number of permanent staff make it difficult to ensure a consistent and stable service, and the need to ensure regular training for carers, particularly in child protection issues. There is still an urgent need to improve the payment system to carers.

Statement of Purpose (Standard 1)

This standard was partially met. The agency had recently revised the statement of purpose and the children's guide had been developed to meet the needs of all the children and young people receiving a service. The Good Practice Guide was in the process of being updated.

Fitness to Provide or manage a fostering service (Standards 2-3)

These standards were met. The managers were all appropriately qualified and had relevant professional childcare experience to manage the fostering service. They demonstrated the ability to provide good and supportive leadership, and to respond to the challenges of their roles. All staff and managers interviewed expressed clear commitment to the service.

Management of the fostering service (Standards 4-5)

One standard was met. The second was partially met. The fostering service was on the whole managed effectively, but lack of consistent communication between the fostering service, Looked After Children teams and the brokerage team, often caused by changes in staffing, continued to impact on the service provided. Also difficulties in the payments of allowances continued to affect performance.

Securing and promoting welfare (Standards 6-14)

Nine standards were assessed: five were met; four were partially met. The fostering service carried out clear approval procedures and aimed to ensure carers provided safe, healthy and caring environments for the foster children and young people. The agency was developing

its' policy around recruitment and was planning to widen its carer base, to ensure families would be recruited that would best meet the needs of the range of children being referred to them. The agency put emphasis on valuing diversity and maintaining contact for the children with birth families. Efforts were made to listen to children and young people and enable them to have a say in the service provided. Young people interviewed identified a strong wish to be placed in borough. Staff recognised the importance of the matching process for the foster child and carer. However, this process was impaired by the difficulties in obtaining all the necessary relevant information and documentation about a child or young person from the placing social worker. Lack of continuity of staff in all teams impacted on these standards and affected the communication between teams, and consequently the efficiency of the service in securing and promoting the welfare of the children placed. Lambeth placed a high number of children with independent fostering agencies. Clear and consistent procedures were not in place to ensure that feedback regarding placements made with independent agencies was sought and collated to ensure the well being of all children placed.

Recruiting, checking, managing, supporting and training staff and foster carers (Standards 15-23)

Nine standards were assessed; three were met; six were partially met. There were appropriate recruitment and selection procedures in place to ensure the employment of appropriately qualified and experienced staff. The process of updating CRB checks had been completed on all staff. Evidence was provided on computer, but no paper evidence of these new checks was available for inspection. Staff were positive of the support provided by managers. Individual supervising social worker support to carers was good, but training provided was limited, apart from a good NVQ programme for a limited number of carers. The response from carer questionnaires was small, but on the whole was positive, and confirmed the inspectors' view that the basic support provided was improving and becoming more reliable. Although there had been some improvement in staffing since last year, there was still a high turn over of staff throughout the department, which was affecting continuity of service for carers and children.

Records (Standards 24-25)

One standard was met; One was partially met. Records were of a reasonable standard, although key information and chronologies were not always up to date on the children and young people's files. A system of auditing was in place. Files were secured and stored appropriately.

Fitness of premises (Standard 26)

This standard was met. The present offices were appropriately laid out for the space available and were suitable for carrying out the work of the agency. Managers were exploring alternative accommodation to accommodate the expanding team. There was a satisfactory level of security provided.

Financial requirements (Standard 27-29)

Two standards were met; One was not met. There was evidence of appropriate financial systems for the control and supervision of the agency's financial affairs. However, there continued to be severe difficulties in ensuring that payments to carers were made on time.

Fostering panel (Standard 30)

This standard was met. The panel was operating within the regulations. Roles and responsibilities of the managers in relation to panel were clear. The panel chairs were suitably experienced and qualified, and the panel was effective and thorough in its discussions. Meetings were held regularly. Panel members received papers sufficiently in

advance. Annual training for panel was planned. The fostering panels was operating well, and it was clear that there was a range of expertise among the members. The panels were considered by both the chairs and the fostering staff to be rigorous in its' deliberations. The expertise and skill of the panel ensured that any practice insufficiently child-centred was challenged. The panel's role in monitoring quality assurance mechanisms was evidenced in the improvement in assessments. Prospective carers did not yet, however, attend panel.

Short-term breaks (Standard 31)

This standard was not assessed. The children with disabilities respite service was managed separately within the authority.

Family and friends as carers (Standard 32)

This standard was partially met. The increased number of kinship assessments had had a significant impact on the workload of the fostering service. However, there was evidence of an improving service now being provided to carers, who were family and friends of the children placed.

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

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 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:

YES

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 which is not considered substantial:

NO

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 fostering service:

NO

The grounds for the above Report or Notice are:

The legislation has changed, and a notice will be issued under section 81(5) of the Health and Social Care Act 2003 that the council has failed to discharge its fostering functions to an acceptable standard, as a number of standards have not been fully met. However, this failure is not considered substantial.

The areas where the council has only partially met, or failed to meet the required standards specifically relate to poor communication between workers in different teams in Children's Services; issues in securing and promoting the welfare of children; recruiting, and checking staff; lack of ongoing training to carers; maintaining satisfactory records and the efficiency of the payment system for carers.

Implementation of Statutory Requirements from Last Inspection

Requirements from last Inspection visit fully actioned?

NO

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. | FSR2002.3 | FS1 | These must include the details specified in the Fostering Services standards and regulations. The children's guide must be suitable for all children fostered through the service. Council members must approve the Statement of Purpose and children's guide, once finalised. | 01.04.03 |
| 2. | FSR2002.8 | FS4 | The authority must ensure that there are clear procedures in place to monitor and control the fostering service in a way that ensures consistent quality performance. | 01.04.03 |
| 3. | FSR2002.11, 12 | FS8 & FS24 | The provider must ensure that each child or young person placed in foster care is carefully matched with a carer capable of meeting her/his assessed needs. Appropriate and sufficient information must also be collated about each child and the carer appropriately informed. | 05.01.04 |
| 4. | FSR2002.20 | FS15 | The Authority must ensure that all appropriate statutory checks to assess suitability of staff to work with children are conducted on existing staff as well as on new appointments and that evidence of this is available for inspection. | 20.06.03 |
| 5. | FSR2002.19 | FS17 | The Authority must review the current staffing arrangements to ensure a stable staff team in all parts of the fostering service. | 05.01.04 |
| 6. | FSR2002.11 | FS18, FS21 & FS22 | The Authority must ensure that carers are properly supported, including providing an out of hours management system for carers. | 01.03.04 |
| 7. | FSR2002.17 | FS23 | The Authority must ensure that carers are trained in the skills required to provide a high quality service to the children. The training must include all the areas specified in the National Minimum Standards and Regulations. | 01.04.04 |
| 8. | FSR2002.34 | FS25 | The Authority must ensure that carers' files are up to date, consistent in format and a system in place to ensure regular audits of files. | 20.06.03 |
| 9. | FSR2002.44 | FS29 | The Authority must ensure that appropriate payments are made to foster carers. | 01.03.04 |

Action is being taken by the National Care Standards Commission 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 | | |

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|------------------|-------------------|--|
| Condition | Compliance | |
| | | |
| Comments | | |

| | | |
|------------------|-------------------|--|
| Condition | Compliance | |
| | | |
| Comments | | |

| | | | |
|-------------------------|---------------------|------------------|-------|
| Lead Inspector | Sue Nott | Signature | _____ |
| Second Inspector | Roger Blades | Signature | _____ |
| Locality Manager | Peter Nunn | Signature | _____ |
| 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 and recommendations 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 | FSR2002.3 | FS1 | Lambeth fostering service must ensure that the Statement of Purpose and Children's guide are kept under review, approved by council members, and revised appropriately with any ongoing developments. | 01.09.04 |
| 2 | FSR2002.8 | FS4 | The authority must ensure that there are clear procedures in place to monitor and control the fostering service in a way that ensures consistent quality performance. This was the subject of a previous requirement. | 01.09.04 |
| 3 | FSR2002.8 | FS4 | The provider must ensure that there are clearly established lines of communication between carers, staff in the fostering services and staff in the LAC teams. | 01. 10.04 |
| 4 | FSR2002.12 | FS6 | Where little information is available, clear risk assessments must be made when placing children with new carers. | 01.09.04 |
| 5 | FSR2002.33 | FS8 | The provider must ensure that a system is developed to collate feedback on all placements from the social workers and children and young people involved. | 01.10.04 |

| | | | | |
|----|-------------------|------|--|----------|
| 6 | FSR2002.11 and 12 | FS8 | The provider must ensure that each child or young person placed in foster care is carefully matched with a carer capable of meeting her/his assessed needs. Appropriate and sufficient information must also be collated about each child and the carer appropriately informed. This was the subject of a previous requirement and is restated in this report. | 31.07.04 |
| 7 | FSR2002.17 | FS9 | An ongoing training programme for carers must be developed to include issues covering safe caring strategies, child protection and managing challenging behaviour. | 01.08.04 |
| 8 | FSR2002.15 | FS12 | The provider must ensure that information is available regarding a child or young person's health to ensure plans are made to address their future medical and emotional needs, without unnecessary delay. | 01.08.04 |
| 9 | FSR2002.20 | FS15 | The provider must ensure that evidence of all appropriate statutory checks to assess suitability of staff to work with children is available for inspection. | 31.07.04 |
| 10 | FSR2002.19 | FS17 | Managers must ensure that the service that their recruitment strategy for carers is maintained, and developed to meet the demands of the service. | 01.10.04 |
| 11 | FSR2002.19 | FS16 | The service must continue to review its current staffing arrangements to ensure a more permanent staff group is provided to achieve its aims. | 31.07.04 |
| 12 | FSR2002.17 | FS21 | The provider must ensure that carers are properly supported, including arrangements for an ongoing training programme, access to respite care, necessary equipment, and regular financial support. | 01.10.04 |
| 13 | FSR2002.35 | FS22 | A system must be developed to ensure that carers receive regular supervisory visits and that unannounced visits are carried out to all carers, including permanent carers, and those at a distance. | 01.10.04 |

| | | | | |
|----|-------------------|------|--|----------|
| 14 | FSR2002.17 | FS23 | The provider must ensure that carers are trained in the skills required to provide a high quality service to the children. The training must include all the areas specified in the National Minimum Standards and Regulations. | 01.10.04 |
| 15 | FSR2002.34 | FS24 | Managers must ensure that case files for each young person in foster care and carers files provide an up to date, comprehensive record. | 31.07.04 |
| 16 | FSR2002.44 | FS29 | The provider must ensure that timely payments are made to foster carers. This was the subject of a previous requirement. | 31.07.04 |
| 17 | FSR2002.11 and 17 | FS32 | The provider must ensure that further work is carried out on improving services to kinship carers, that resources to achieve a better service are kept under review, and that the special needs of kinship carers are recognised and included in future training programmes. | 01.10.04 |

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).

| No. | Refer to Standard * | Recommendation Action |
|-----|---------------------|---|
| 1 | FS1 | The children's guide should include the address and phone number for the local office, as well as that of the head office. |
| 2 | FS1 | It is recommended that the agency consider making the children's guide available in different languages to meet the needs of all the children and young people placed. |
| 3 | FS6 | The agency should encourage carers to request written confirmation from their insurance company that the fostered child or children will be considered members of their household and that a copy of this written confirmation is kept on the carer's file. |
| 4 | FS8 | Where carers are unable to reflect the racial, cultural and religious needs of the child or young person, additional training and support should be given and identified in the written foster placement agreement at the time of placement. |

| | | |
|----|------|---|
| 5 | FS10 | It is recommended that workshops on contact issues are included in the general training programme being developed. |
| 6 | FS14 | Specific training for carers on helping young people prepare for independence should be provided. |
| 7 | FS15 | Copies of qualifications achieved, CV's, other identification documents and photographs of staff should be available on all files. Any gaps in CV's should be explained and noted during interview. |
| 8 | FS19 | There should be a clear policy regarding the location of personal development plans to ensure outcomes are monitored and linked to an assessment of training needs. |
| 9 | FS19 | The induction programme for new staff should be reviewed to ensure consistency in standard and quality. |
| 10 | FS20 | Staff job descriptions should be reviewed and updated, where necessary, to ensure staff have clear information regarding their duties and responsibilities. |
| 11 | FS25 | The audit form should be clearer about the timescales imposed. |
| 12 | FS25 | It is recommended that carer's files routinely record details of visits during the assessment process. |
| 13 | FS30 | A protocol should be produced as soon as possible to enable carers the opportunity to attend panel. |

* 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 | 11 |
| Survey of placing authorities | NO |
| Foster carer survey | YES |
| Foster children survey | YES |
| Checks with other organisations and Individuals | YES |
| • Directors of Social services | NO |
| • Child protection officer | NO |
| • Specialist advisor (s) | NO |
| • Local Foster Care Association | YES |
| 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 | YES |
| Observation of foster panel | YES |
| Inspection of policy/practice documents | YES |
| Inspection of records | YES |
| Interview with individual child | YES |
| Date of Inspection | 26/02/04 |
| Time of Inspection | 10.00 AM |
| Duration Of Inspection (hrs) | 78 |

The following pages summarise the key findings and evidence from this inspection, together with the NCSC 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 | (Commendable) |
| 3 - Standard Met | (No Shortfalls) |
| 2 - Standard Almost Met | (Minor Shortfalls) |
| 1 - Standard Not Met | (Major Shortfalls) |

"0" 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.

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?

2

The Statement of Purpose had been reviewed and clearly stated the aims and objectives of the fostering service. A Children's Guide had also been produced. This, with the reviewed Statement of Purpose, was due to go to Council in May for approval. The children's guide was clear and informative. Although the guide included details of the Commission's head office, it should also include the address and phone number for the local office.

Staff were sensitive to the need to ensure communication with all the children placed, and interpreters are used when necessary. This is an area for further development, and it is recommended that the agency consider making the guide available in different languages to meet the needs of all the children and young people placed.

There was a range of comprehensive policies. The policies were also included in Lambeth Foster Carer's Handbook, entitled the Good Practice Guide. However, the policies needed updating, and this was planned for April 2004. See Standard 4.

Lambeth fostering service must ensure that the Statement of Purpose and Children's guide are kept under review, approved by council members, and revised appropriately with any ongoing developments.

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?

3

Since the last inspection, a new service manager had been appointed and the practice manager of the referral and assessment team had become a permanent member of staff. The practice manager for the adoption and long term fostering team had been with the department since 1982. All had appropriate social work qualifications and relevant experience. The authority was aware of the requirement for managers to attain a relevant management qualification by 2005. The competence of the management was evidenced during interviews, discussions with staff and examination of personnel files and documentation. There was evidence of capable leadership from the service unit manager and a commitment to the development of a consistent management approach within the new management team. Interviews with the respective team managers also provided evidence of satisfactory management skills. Discussion with staff showed that they were positive about the quality of the leadership and support received from management.

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?

3

Interviews with managers, references and examination of files gave evidence that managers had undergone statutory standard checks, had relevant experience and confirmed that they were suitable people to be involved in an agency concerned with safeguarding the welfare of children.

Management of the Fostering Service

The intended outcomes for the following set of standards are:

- 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?

2

Individual managers were clear about their own roles and responsibilities. There was a system of regular supervision established that staff considered provided appropriate support and all staff were subject to annual appraisals. A number of permanent staff had been employed since the last inspection, resulting in a period of relative staff stability. There were some monitoring and quality assurance systems in place, including an effective programme of annual carer reviews. The reviewing officer carried out the foster carer reviews and gave a monthly report to the service manager. The manager monitored the numbers of outstanding reviews and highlighted issues to be addressed. The reviewing officer post, which had been established on a short term funding basis, had been made a permanent post. There was a range of comprehensive policies. The policies were also included in Lambeth Foster Carers' Handbook, entitled the Good Practice Guide. However, the policies needed updating and this was planned for April 2004. This was to be carried out by a firm of outside consultants, in consultation with the Fostering Network. The updating process would include all procedures, including the complaints process. The procedures needed to be reframed into a coherent whole, as in some cases the childcare manuals and the Handbook were at variance. The work planned should address these issues. There were financial monitoring procedures in place, but these had not ensured that payments to carers were accurate, or made on time. There was evidence from observation of the short-term fostering panel that the panel continued to exercise a sound quality assurance role. The monitoring component had been developed with the production of the first annual panel report. Recent carer files seen were of a reasonable standard. The service used a clear format for auditing files and there was evidence that audits had been carried out prior to the inspection. Form F reports were checked by an independent person, as well as the relevant manager to ensure a good standard of assessment was maintained. All carer's files seen contained the foster carers agreement form, which outlined the tasks and responsibilities of the carer's role.

The agency provided written information regarding the charges for its fostering services and statements of the amounts paid to carers. The fostering service informed carers and staff of their responsibility to declare any possible "conflict of interest". Carers, staff and young people commented on the need to improve communication between the fostering, leaving care and Looked After Children teams, and there was evidence that supervising social workers were not always informed of children placed with their carers and were not always aware if the children or young person had an allocated social worker.

The provider must ensure that there are clearly established lines of communication between carers, staff in the fostering services, and staff in the LAC teams, as well as others concerned with the welfare of children placed with foster carers.

The provider must also ensure that there are clear procedures in place to monitor and control the fostering service in a way that ensures consistent quality performance.

This was the subject of a previous requirement.

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

2

| | |
|---|----------|
| 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. | 0 |
| Outbreak of serious infectious disease at a foster home. | 0 |
| Actual or suspected involvement of a child in prostitution. | 0 |
| Serious incident relating to a foster child involving calling the police to a foster home. | X |
| Serious complaint about a foster parent. | 1 |
| Initiation of child protection enquiry involving a child. | 1 |
| Number of complaints made to NCSC about the agency in the past 12 months: | 2 |
| 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 |
| Managers had job descriptions that clearly set out the responsibilities involved. Lines of accountability were defined and arrangements were in place to cover management absence. The department planned to create deputy manager posts and expand the remit of senior practitioners in line with the development of the service and the increase in in-house placements. Although the numbers of permanent staff had increased, over half of the social workers employed in both teams were still agency and short-term contracted staff. See Standard 16. Managers had, nevertheless, tried hard to maintain a sense of stability, alongside the recent changes in service delivery. The managers met formally on a regular basis. There were ongoing initiatives to improve recruitment and retention of social workers in the department. | | |

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?

2

Files inspected showed that new assessments, using BAAF Form F, were of a reasonable standard and included health and safety checks. There was evidence, from observation of the short-term fostering panel, that promoting and safeguarding children's welfare was a matter that the members continued to take seriously, with appropriate and high quality discussion of relevant issues regarding the carers' capability to provide a safe, healthy and nurturing environment. The permanency panel was not observed on this occasion, as it was not quorate and therefore cancelled. It was understood, from discussion with managers and the chairs of both panels, that the standard of assessments were improving. The service now had a permanent reviewing officer to ensure that carer's reviews were up to date and to remedy gaps in previous outsourced assessments.

Accommodation seen during visits to carers was of a variable standard. However, there was evidence from carers visited, questionnaires received and examination of files, that carers provided safe, healthy and nurturing environments. It was noted that there had been some difficulty, at times, in providing appropriate equipment to carers. There was also evidence that children becoming looked after in emergency situations were being placed with new carers.

Where little information is available, clear risk assessments must be made when placing children with new carers, particularly where ongoing training is limited. This is subject to a new requirement.

The foster carer agreement states that foster carers are expected to notify their household insurance company of their fostering activity. The inspector would recommend that a carer is asked to request written confirmation from their insurance company that the fostered child or children will be considered members of their household and that a copy of this written confirmation is kept on the carer's file.

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?

3

Discussion with staff and management revealed a clear commitment by the agency to issues of equality and diversity. There was an equal opportunities policy and a section in the Good Practice Guide was devoted to anti-discrimination practice. Carer Agreements reflected this. Panel observation gave evidence of the concepts of fairness and equality being taken seriously. The service needed to maintain its' recruitment campaign to encourage a wide range of applicants to apply in order to enable consistency in meeting the racial, cultural and ethnic needs of the children placed. A much lower number of carers had been recruited in the last two years than expected. Lambeth made much use of independent fostering agencies and was considering formalising agreements with specific agencies to access the

resources which might better meet the diverse range of its placement needs. The agency encouraged carers to provide information about community and leisure activities for the children, but financial support to allow children to pursue interests and talents was said, by carers, to be limited.

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?

2

The fostering service worked with the brokerage team to attempt to match each child with carers. However, referrals received greatly exceeded in-house capacity and Lambeth made much use of independent fostering agencies. A system had been developed to try to ensure that, before a child was placed with an external carer, the proposed carer has been thoroughly assessed by the independent agency and that the quality of that assessment would meet Lambeth's own criteria for approval. The brokerage service used a form to gather information about the child to be shared with potential carers, both in-house and agency. However, there was no agreed system to collate information on external agencies and placements used. Unsatisfactory placements could, therefore, be used again. The brokerage team was about to be brought under the remit of the Service manager, and some of these issues were to be addressed.

The provider, however, must ensure that a system is developed to collate feedback on placements from the social workers, and children and young people involved, and this is the subject of a new requirement.

Managers said that essential information was provided to carers. However, carers indicated that they did not always receive adequate information on children placed with them from district social workers and this continued to impinge on the ability of the service to ensure proper matching and to provide on-going support to carers and children.

The provider must ensure that each child or young person placed in foster care is carefully matched with a carer capable of meeting her/his assessed needs.

Appropriate and sufficient information must also be collated about each child and the carer appropriately informed. This was the subject of a previous requirement, and had not been fully addressed. It is, therefore, restated in this report.

Written evidence of individualised risk assessments being carried out when a child was being considered for placement were not available. See Standard 6

Consideration was given to the child's racial, ethnic, religious, cultural and linguistic needs, but there was recognition that these needs could not always be met. It is recommended that where carers were unable to reflect some of these needs, additional training and support should be given, and identified in the written foster placement agreement at the time of placement. The inspector was informed that, with the exception of emergency placements, there was a period of introduction between child and carer.

| | | |
|--|----------------------|----------|
| 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 |
| <p>There were child protection policies in place and there was evidence that allegations had been referred appropriately for investigation. The Good Practice Guide covered safe care and appropriate sanctions and was a useful tool for carers and social workers. However, there had been no separate child protection training included in the training programme for 2003/2004 year and at the time of inspection, a training programme for 2004/2005 had not been produced.</p> <p>It is essential that an ongoing training programme for carers is developed, and includes issues covering safe caring strategies, child protection and managing challenging behaviour.</p> <p>The fostering service had a clear policy that corporal punishment was unacceptable and carers visited understood this. Complaints and allegation data were collated. Lambeth had clear Missing Children procedures. A number of files examined showed an improvement in the quality of assessments being undertaken on new carers, and observation of the panel showed that it was vigorous in enforcing appropriate checks. There was a section on bullying in the carer's handbook, and carers interviewed showed an understanding of the procedures involved. A 15 year old wrote in a questionnaire "my foster mum is loving and caring. She makes me feel safe and makes me feel at home. I can talk about anything to her". File reading showed regular contact and visits from supervising social workers.</p> | | |
| Percentage of foster children placed who report never or hardly ever being bullied: | X | % |

| | | |
|--|----------------------|----------|
| 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? | 3 |
| <p>There was evidence on files that contact was addressed and recorded during the care planning process, including the development of the care plan at "looked after children" reviews and during the matching process. Discussion with the carers, children and young people visited supported the view that efforts were made to ascertain the views and wishes of the child or young person in relation to contact with their family. The only training provided on contact issues was in carers' pre-approval training, but the need to encourage contact was specified in carers' agreements and reviews monitored the carer's ability to facilitate and promote contact. The supervising social worker visits were expected to monitor contact on a regular basis and record the details on file. It is recommended that workshops on contact issues are included in the general training programme being developed.</p> | | |

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**

Lambeth ensured that the Children's Rights service, run by the Children's Society, was available to all looked after children. It provided an advocacy service and encouraged children and young people to participate in decision-making processes. Carers' agreements emphasised partnership between all parties. The annual carer's review form asked young people a range of questions to trigger feedback and social workers' child visit forms specifically asked children to comment on their safety. Children and families were included in care planning and parents were given a LAC consultation form to complete for their child's review. The children and young people seen during the inspection indicated that they understood how to make a complaint and were confident in doing so if necessary.

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**

The Good Practice Guide for carers included an informative section on the health needs of children looked after. The LAC system routinely monitored health needs. There was a medical advisor available to both short term and permanency panels. Managers recognised that services in borough were over-stretched, but there was also concern expressed as to whether the health needs of children placed out of borough were consistently met. A Children's Mental Health service actively supported parents in the first 13 weeks of their child's accommodation. Communication around health care plans could still be seen as problematic, particularly regarding panel delays. The medical adviser was now notified a month in advance of cases coming to panel, so that checks could be made that the essential medical information would be available by the proposed date. A large section of last year's fostering training programme had addressed health issues, but none had been programmed for this year. Inspection of files showed that information regarding young people's health needs was sought at the time of referral, although not always received. Carers' agreements reflected expectations of carers to meet placement health needs. Management said that all children placed were registered with a GP. There was evidence on file of medical assessments being carried out and the use of some specialist services. Carers were expected to make sure that the child or young person had regular dental and optician check ups, access to a balanced diet and opportunities for leisure activities. The agency also supported carers in advocating for resources to access any health services the children in their care required. Foster carers were expected to attend the child or young person's LAC review to provide information regarding the child or young person's health needs and to contribute to the planning and reviewing process.

The provider must ensure that information is available regarding a child or young person's health is available to ensure appropriate plans are made to address their future medical and emotional needs without unnecessary delay.

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**

The Good Practice Guide had a useful section on expectations of carers as regards education. Children's files scrutiny showed that individual education plans were drawn up and reviewed regularly. The Handbook also addressed the issues involved in arranging schools and in preparing young people for transitions in education. Agreements, reviews and supervising social work visits emphasised the educational needs of the Looked After Child. However, a carer reported that extra tuition funding for a child in her care had been stopped last year. It was an expectation that foster carers should support their foster child or young person educationally and contribute to the assessment of the children's educational needs and progress in the planning and review process, and through attending PEP meetings. There was evidence from files seen and carers and children visited that this was happening. The education department and Social Services had worked to achieve priority for LAC on the waiting list for school places in Lambeth.

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**

Information from management gave evidence of steps taken to support carers in preparing young people in acquiring the necessary skills. Guidelines stated that every 16 year old would be allocated a social worker from the leaving care team and a needs assessment would be completed with the young person and carer. The Good Practice Guide included sections of preparing young people for leaving care, self-care skills and planned goodbyes. The leaving care team attended reviews for 16 year olds. This service was managed separately from the fostering service. The carer's annual review looks at preparation for independence as part of the competencies of caring. Specific training for carers on helping young people prepare for independence was not provided and it is recommended that it be provided in the future. However, carers seen who had teenagers placed were aware of the expectations on them and understood that they need to provide the young people with age and developmentally appropriate opportunities for learning independence skills. The young people spoken to felt they were consulted and involved in the decision making about their future.

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?

2

There was evidence from discussion with managers and inspection of documents that the authority had appropriate written recruitment and selection policies. A list of permanent and agency staff qualifications provided to the inspectors indicated that people working for the service were appropriately qualified. The computer system, for monitoring CRB checks, was checked by the inspectors. The information seen showed that checks were all up to date. However, the paper copies of the actual checks were not available for inspection.

Copies of new CRB checks applied for must be kept for the next annual inspection.

This was part of a previous requirement, which has not been fully met.

The provider must also ensure that follow up telephone enquiries are made to referees, in addition to obtaining written references on new staff. Any gaps in staff, panel members, or carer's CV's should be followed up, and recorded.

All carers, adult household members, and frequent visitors had enhanced CRB checks on the files examined.

Total number of staff of the agency:

21

Number of staff who have left the agency in the past 12 months:

X

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

Prior to June 2002, the fostering service was contracted out. It had proved difficult to deliver a consistent service and the service had been brought back in house and was still in the process of being rebuilt. The fostering service operated through three teams; one dealing with referral and assessment, one covering long-term placements and adoption and a developing team dealing with kinship cases. The teams worked closely together. Social work staff generally said that they felt supported by their managers, who were described as very committed and accessible. There were regular individual supervision sessions, and staff meetings. However, the level of agency and short-term contracted staff within the fostering service was still of concern. Out of fourteen social work staff, eight were agency staff. It was difficult to see how consistency for the carers, effective long-term planning and strategic management could be effectively maintained without a more permanent staff group. The only member of permanent staff employed in the brokerage team, where staff play a crucial role in locating suitable placements, was the practice manager. It was recognised by the

inspectors that the service had been through recent major changes and that the authority had addressed the need to provide a stable management group.

However, the provider must continue to review the current staffing arrangements to ensure a permanent staff group is provided to achieve its aims.

Staff had clearly defined job descriptions and there was evidence, from examination of files and interviews with staff and carers, that there was a good understanding of the different roles and responsibilities and the importance of working effectively together to ensure that the child's welfare and best interests were maintained. The management and supervision systems in place determined staff workloads and helped to ensure that work was prioritised, monitored and tasks delegated appropriately. The agency had appropriate administrative procedures to deal with enquiries from prospective foster carers. File scrutiny indicated that carers' reviews were being carried out systematically.

The business support staff received regular supervision and annual appraisal meetings had taken place. Job descriptions for business support were out of date and needed to be reviewed in light of the changes in the service. All three administrative staff were employed through an agency, although two were considering taking up short-term contracts. Inspectors were informed that a review of administrative support was underway. All staff had access to the staff handbook, which set out the terms and conditions of employment and the agency's staffing procedures.

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?

2

Staff had the appropriate qualifications and experience to provide a suitable service. Staff turnover had stabilised since the last inspection and more members of staff had permanent contracts. However, carer questionnaires identified "lack of continuity of workers" as a significant issue. The department had initiated recruitment drives and plans were underway to advertise for deputy team manager posts. There was difficulty in the recruitment and retention of carers and there was a particular need for carers to take teenagers with challenging behaviour, large sibling groups and babies. The department planned to appoint a training and development officer from within the recruitment team. Although progress had been made, the service was still in the process of development. Twelve carer approvals had been terminated during June to September, but only five new carers had been approved. Managers reported that due to the older age range of many of their carers, two or three carers retired each year. Two young people interviewed also raised this issue and advocated that younger carers should be targeted, as they felt that the generation gap was sometimes too much to facilitate building good relationships. There was, however, evidence that the agency was taking steps to improve the range of carers. There was a strategy for the recruitment of carers, which was attracting some prospective applicants, but the numbers approved were lower than needed to meet demand. Inspectors were informed that 19 carers were in the process of being assessed. Managers were looking at the possibility of appointing a recruitment and marketing consultant to plan their advertising campaign, advise on media issues and design publicity materials.

There was a clear assessment process that defined the fostering task and the skills and competencies required from prospective applicants. The stages, content and timescales of the selection process were made clear and the carers interviewed indicated that they had understood what was entailed in the selection process. The inspector examined a number of assessments of foster carers, which were of a reasonable standard. **Managers must ensure that the service that their recruitment strategy for carers is maintained, and**

developed to meet the demands of the service.

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

Overall there was evidence that this standard was partially met. Discussion with staff and examination of files showed that Lambeth social services carried out sound employment practices and good support to staff. The Children's Strategic Plan identified milestones for increasing the percentages of salaried staff over a three-year period and there was evidence that this was happening. The department had a Whistle Blowing policy, but staff reported that although they had seen posters to highlight awareness of the policy, they had not seen the actual document. Managers should ensure that staff are fully aware of the whistle blowing policy. There were job descriptions for all staff in post. Equal opportunities employment practices in relation to the authority's recruitment and interview process were evident. The service had a satisfactory health and safety policy for carers, children and staff. Foster carer questionnaires returned indicated that the majority of respondents thought that levels of support and supervision continued to improve. One carer wrote "the introduction of the new foster carers' support group is wonderful". Carers who were unhappy cited "the lack of continuity" of staff in both fostering and LAC teams as their main cause of discontent. The department's emergency duty team offered out of hours support to carers. The authority had management systems in place in respect of carer supervision, appraisal and support. This was evidenced through examination of carers' files.

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?

3

There was a clear appraisal system for staff and in service training. The majority of staff were positive about the quality of supervision they received. It was aimed that the training needs of staff would be identified via supervision and that this information would be used to develop the annual overall training plan. In house training opportunities were provided for staff and were said to be good. Members of staff reported that they had attended courses appropriate to their training needs and there was evidence that professional development was actively encouraged, with a number of staff doing Post Qualification Awards. Evidence of personal development plans was found on some personnel files, but inspectors understood that others may have been held on supervision files. There should be a clear policy as to where these plans should be located to ensure outcomes are monitored, and linked to an assessment of training needs.

There was an induction programme for new staff, which took place within an agreed timescale. The manager confirmed that new staff had undertaken this, although it was reported by staff that the standard of the induction varied considerably. The induction

programme for new staff should be reviewed to ensure consistency in standard and quality.

Standard 20 (20.1 - 20.5)

All staff are properly accountable and supported.

Key Findings and Evidence

Standard met?

3

The staff interviewed informed the inspector that they had contracts of employment and job descriptions, although these, particularly for administrative staff, were not all up to date. Management and staff confirmed that supervision occurred regularly and staff interviewed reported that they felt supported in their roles. The annual appraisal scheme provided an opportunity for regular objective setting. Staff also attended regular team meetings and valued peer group support and the sharing of skills and knowledge. There were clear lines of responsibility and separation of roles between the members of the management group. Staff job descriptions should be reviewed and updated where necessary to ensure staff are clear regarding their duties and responsibilities.

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?

2

Discussion with management, inspection of documents and carers comments confirmed that there was an appropriate strategy for working with and supporting carers. Carers reported that on the whole they received good support and supervision and were clear about the role of the supervising social worker. The agency had just started support groups for carers, although these needed to be developed. There was no support group specifically for permanent carers operating at the time of the inspection. Weekend and holiday respite was provided to carers where appropriate. Carers receive regular telephone contact and visits from their supervising social worker. Carers have access to the general out of hours system and a duty system provided by the fostering team during office hours. Support for carers was, however, sometimes impacted upon adversely by staff changes. Carers are supported in their attendance at placement agreement meetings, LAC reviews, health and educational meetings and any other meetings as required. The fostering procedures manual was about to be updated. All carer reviews were up to date.

The provider must ensure that carers are properly supported, including arrangements for an ongoing training programme, access to respite care, necessary equipment, and regular financial support.

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**

All carers received a Fostering Handbook, which contained useful information. Management said that all carers had an allocated supervising social worker and that they received regular visits from their social workers. Carers seen confirmed that they have received good support from their individual workers. Records of these visits were seen on files. Signed copies of carer's agreements were not consistently found on carers' files. Major weaknesses in the system of payments continued, as discussed in more detail in standard 29.

The authority expected each carer's household to receive a monthly visit by a supervising social worker, but this had not always been done, particularly in the permanence team.

Managers were open about the inadequate service provided to a number of carers living at a distance from London, who had not consistently received regular visits.

A system must be developed to ensure that carers receive regular supervisory visits, and that unannounced visits are carried out to all carers, including permanent carers, and those at a distance.

The complaints procedure was a borough wide one, and the agency provided information regarding the complaints procedure to carers, and those carers interviewed were aware of how to make a complaint. There was evidence that the complaints process had, at times, been delayed in achieving a formal outcome. The agency had a system in place to keep a record of any complaints. There was evidence from an examination of the child protection policy and procedures and interviews with staff and carers, that all personnel involved were aware of their role and responsibilities in relation to investigations into allegations of abuse. Managers were aware of the areas in the service that needed to improve and showed continued commitment to addressing concerns.

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?****2**

The new initiatives on foster carer training seen at the previous inspection had not been maintained. Training for carers continued to lack an overall strategy and systematic collation of the developmental needs of carers. New carers attended the Preparation to Foster course and the training programme provided until November 03 had included Promoting Health, Record Keeping, Parenting, Healthy Lifestyles and Moving On. It was not clear whether all carers had received child protection training in line with the fostering service Action Plan target date of January 2004. An appropriate ongoing training programme for all carers was still to be developed. Managers reported that a member of staff had been identified who would take on the role of training and development officer. However, when interviewed, the member of staff said that this decision had not been confirmed with him. Each carer's annual review included an appraisal of the carers' training and development needs. Carers seen were enthusiastic about developing their skills. They were encouraged to keep a record of training attended in preparation for their reviews and in preparing a portfolio for achieving their NVQ qualifications.

A good programme of NVQ training for a limited number of carers was, however, in operation and the service was well on target in achieving their proposed number for the year, and there was evidence that this was working well. No training events were observed by the inspectors.

The provider must ensure that carers are trained in the skills required to provide a

high quality service to the children. The training must include all the areas specified in the national Minimum Standards and Regulations. This is a requirement from the previous inspection, which has not been fully addressed.

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?

2

There were appropriate policies on recording and files examined were reasonably structured. Children's files examined showed that key information and chronologies were not always up to date. All reports should be signed and dated. It was positive that a system of auditing of files was in place, but these had mostly been carried out immediately prior to the inspection and there was no record of any previous audits. Not all carers felt they were given good enough background information on the children they cared for. Carers were encouraged to keep detailed records. Interviews with carers confirmed they were aware of the need to ensure that all information relating to the child or young person was treated confidentially and stored in a secure manner.

Managers must ensure that case files for each young person in foster care provide an up to date, comprehensive record, including copies of all relevant LAC forms.

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?

3

Carers' files were of a reasonable standard, although not always up-to-date. Assessments seen by the inspectors were generally thorough and the introduction of competency-based assessments should continue to improve consistency and quality. Managers were able to provide up to date information from both the children's and carers register, as well as a list of complaints and child protection allegations. Confidential records were securely stored and an appropriate written policy and operating system for administrative record keeping was in place. The administrative records inspected provided a satisfactory record of information required to run the service. The computerised system had appropriate back up and security safeguards. The audit form listed information to be included in case records and the action to be carried out to achieve improvement, but needed to be clearer about the timescales imposed. It is also recommended that carer's files routinely record details of visits during the assessment process. Lambeth has an "Access to Records" Policy, which provides guidance to staff and carers. Service users are able to see their records in compliance with legal safeguards.

| | | | |
|---|-------|------------------|--------|
| | | | |
| Number of current foster placements supported by the agency: | | | 458 |
| Number of placements made by the agency in the last 12 months: | | | X |
| Number of placements made by the agency which ended in the past 12 months: | | | X |
| Number of new foster carers approved during the last 12 months: | | | 5 |
| Number of foster carers who left the agency during the last 12 months: | | | 12 |
| Current weekly payments to foster parents: Minimum £ | 87.18 | Maximum £ | 272.47 |

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

The fostering service operated out of the Social Services Department head office at Mary Seacole House. Staff worked in open plan offices. Files were kept in lockable storage. The building had satisfactory security arrangements. The offices were reported by some staff to be an uncomfortable place to work, with high noise level, poor temperature control and a shortage of rooms for meetings and supervision. Discussions were underway to relocate to a building with more space for the expanding service, but which would retain easy accessibility for users. The agency had appropriate administrative systems, IT and communication systems. Safeguards were in place in relation to the security of these systems. A new IT system was being introduced to better meet the needs of the agency.

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?

3

A large number of placements were still made in the private sector through the brokerage team. There was a strategic intention to reduce spot purchasing and to enhance contract management, while at the same time to recruit more carers, but this plan had still to be developed. There was a commitment to provide better funding for the fostering service, to increase the number of in house placements. The financial monitoring procedure needs to ensure that carers receive their payments on time, as discussed in Standard 29.

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?

3

An examination of documentation and information from managers indicated that the financial processes were regularly monitored by management and by the authority's financial department. The director and the council received ongoing reports on the financial state of the service. Managers were accountable for their individual budgets.

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?****1**

The efficiency of the system of payments to carers was reported to still be very poor. Continued delays with payments were reported in a number of carer questionnaires, although some slight improvement was also reported. The local foster care association had been active in supporting improvements. The department recognised that they were still failing in this respect, but managers were confident that there would be further improvements soon. Brokerage staff were now responsible for notifying finance when a placement was made. However, a new carer visited had only received one payment since the placement began two months ago. An emergency payout had just been provided to her. There was a written policy on carers' allowances and expenses. This was reviewed on an annual basis. Allowances were banded by the age of the child in placement. Managers recognised that the level of allowances needed to be able to compete realistically with the private sector.

The provider must ensure that timely payments are made to foster 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?

3

The short-term fostering panel was observed but although the inspector attended the permanency panel, it was not quorate and could not go ahead. However, discussion took place with chairs of both panels. Both chairs had relevant backgrounds and expertise in child care services. The short-term panel chair was a childcare solicitor and the permanency panel chair had management experience and had worked as an independent review chair. Both were very aware of the legal and child development issues in fostering and this ensured a child-centred approach. The panel had access to legal and medical advice, and the advisers were available for consultation.

The agencies had written policies and procedures for the function and constitution of the panel, including the process followed when all members of the panel were not in agreement. However, these did not include a protocol for carers attending panel and this was the reason given for carers not yet being invited to attend panel. A protocol should be produced as soon as possible to enable carers the opportunity to attend panel.

There had been some changes in the panel membership since last year, but from observation of the short-term panel, it was concluded that the panel was still rigorous and thorough and had retained a high quality of discussion and the ability to pick up salient issues. Discussion with both panel chairs indicated that they, and panel members, took their quality assurance function seriously. An annual report was produced and there were quarterly inter panel meetings with panel chairs, vice chairs, fostering managers, the decision maker and the secretariat.

Training had been provided to social workers on producing competency assessments and quality control measures had been introduced regarding completed F forms being submitted to panel.

Lambeth's Head of Children's Services was identified as the decision maker for recommendations made by the panels. Joint training between panel members and social workers was planned for later in the year. The short-term panel was held fortnightly and the permanency panel monthly. Papers were sent out ten days in advance. The administration, prior to panel, was dealt with by the secretariat. Staff were reported to have good minute taking skills, and minutes were usually sent to the chairs within two days of meetings. Efforts were made to ensure the recommendations of the panel were considered by the decision maker within appropriate timescales.

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? |
|---------------------------|---------------|
|---------------------------|---------------|

| |
|---|
| The fostering service was not providing short-term breaks to children and young people who did not have a disability. |
|---|

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 carers.

Key Findings and Evidence

Standard met?

2

There was evidence of an improving service now being provided to carers who were family and friends of the children placed. A special team designated to kinship carers was in the process of being established. Carers were assessed using the relevant BAAF F Form, but were not expected to attend the pre approval training. References were taken up and reports presented to the fostering panel for approval, to ensure the safety and quality of these arrangements. There were some kinship carers awaiting allocation for a full assessment, although it was planned to take on another member of staff to deal with the increasing work. There was no coherent procedure in place for the support of these placements, but a group was planned which would offer support to permanent and kinship carers.

The increased number of kinship assessments had had a significant impact on the workload of the fostering service. The service was also involved in completing assessments for court as well as panel, but had found it hard to do this within appropriate timescales.

The provider must ensure that further work is carried out on improving services to kinship carers, that resources to achieve a better service are kept under review, and that the special needs of kinship carers are recognised and included in future training programmes.

PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

Lay Assessor

Signature

Date

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 <enter date(s) of inspection here> and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

Lambeth Fostering Service did not receive the Inspection Report until 8th July 2004 almost 4 months following the inspection which was disappointing. We accept most of the findings in the inspection report and have taken actions to address the payments system to Foster Carers and provide courses on Safe Caring and Children Protection for Foster Carers.

Unfortunately, achieving workforce stability in terms of recruiting permanent staff that are suitably skilled and able to work in Lambeth, still remains a huge challenge. Some positive steps have been made in that we have recruited 2 unqualified Social Workers who will be trained over the coming years. In addition, we have been successful in recruiting an able Practice Manager for the newly formed Kinship and Long Term Fostering Team, a Publicity and Marketing Officer to develop our recruitment strategy for new foster carers, and 2 Senior Practitioners (1 for Recruitment & Assessment and 1 for the Kinship team) to drive through new initiatives in the Fostering Service.

We can report that since the inspection a new Financial System for ensuring that Foster Carers receive payments on time was introduced on 1/4/04. Thus all existing foster carers have received monthly payments in advance on the first day of every month since April 2004. We have also set a target of 10 days for payment for all new placements.

Two major training courses for foster carers have taken place; with 37 foster carers in attendance for a 2-day course run by The Fostering Network in June. 2 Child Protection courses have also been commissioned by The Fostering Network and will run in September 2004.

Since the inspection there has been a departmental realignment in which all Children Looked After Services (including Fostering, Brokerage and the District Looked After Teams) are managed by in the same Business Unit and by 1 manager. As part of the realignment the Fostering and Brokerage teams will be relocating to an office with the District Social Workers. This move is planned for September 2004.

Within the Fostering unit, the teams have expanded to take account of the developing service and to improve service provision. The teams are now as follows: Kinship & Long-Term Fostering Team (managed by a new Practice Manager), Recruitment & Assessment Team as well as a Support Team (currently managed by a Practice Manager)

Since the inspection, the Support group for Foster Carers has become a consistent and well-used forum for carers. Sessions have included advice on health, hair care, and outside speakers and trainers have been commissioned. Another important event organised for foster carers was the Foster Carers' Awards Ceremony, which was held in April. Carers were nominated for awards by social workers. All who were nominated were presented with certificates by the Deputy Mayor and Head of Children's Services. The event included live entertainment and food and was very successful in developing a positive relationship with carers.

Action taken by the NCSC in response to the provider's comments:

Amendments to the report were necessary

YES

Comments were received from the provider

YES

Provider comments/factual amendments were incorporated into the final inspection report

YES

Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate

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 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

YES

Action plan did not cover all the statutory requirements and required further discussion

NO

Provider has declined to provide an action plan

NO

Other: <enter details here>

NO

Public reports

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

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 I, Ruth Wise of Lambeth Social Services Fostering Service 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 Service Manager

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.