



*Making Social Care  
Better for People*

# inspection report

## FOSTERING SERVICE

**Wakefield MDC - Family Placement Team**

**6 Springfield Grange  
Flanshaw Lane  
Wakefield  
West Yorkshire  
WF2 9QP**

*Lead Inspector*  
Helen Walker

*Announced Inspection*  
30th January 2006      09:30

The Commission for Social Care Inspection aims to:

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

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

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

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

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

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

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# SERVICE INFORMATION

**Name of service** Wakefield MDC - Family Placement Team

**Address** 6 Springfield Grange  
Flanshaw Lane  
Wakefield  
West Yorkshire  
WF2 9QP

**Telephone number** 01924 302167

**Fax number**

**Email address**

**Provider Web address**

**Name of registered provider(s)/company (if applicable)** Wakefield MDC

**Name of registered manager (if applicable)**

**Type of registration** Local Auth Fostering Service

**Category(ies) of registration, with number of places**

# **SERVICE INFORMATION**

## **Conditions of registration:**

**Date of last inspection**      17th January 2005

## **Brief Description of the Service:**

The fostering service, which is part of Wakefield MDC family placement service is set up to provide foster care for children who are looked after by the Council. Included in the family placement service is the adoption and fostering for permanence service. Foster carers are recruited and assessed by fostering social workers and then considered for approval by Wakefield's fostering panel. The fostering service offers a number of different fostering arrangements, which include: emergency, short term, long term, permanence, Connect, remand and family and friends as carers. The Connect scheme offers short planned breaks to young people and children with disabilities. The fostering service currently has 174 foster households caring for 295 foster children.

The family placement service office is situated in grounds with other social services offices. The office is on two floors with limited disabled access. There is plenty of car parking space available and it is a short bus ride from the City centre.

# SUMMARY

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

Two inspectors carried out this announced inspection over five days. In addition to this a pre-inspection meeting was held, inspectors attended a panel meeting on 27 January 2006 and feedback to managers was given on 13 February 2006.

Barnardos children's advocacy arranged a group discussion for children to give their opinions about the fostering service. Activities and supper were provided for the 11 foster children who came along. Visits were made to 3 foster carers, which included: emergency, short term, long term and connect carers. Telephone contact was made to a sample of family and friends carers.

As the acting manager was unavailable at the time of the inspection, discussions took place with the children's service manager (placements) and adoption and fostering permanence manager. As part of the inspection there were meetings with fostering service staff, foster panel independent member and panel Chair. Completed questionnaires were received from: 28 children, 33 foster carers and 39 placing officers. A sample of files for foster carers, foster children and fostering service records were seen.

## **What the service does well:**

Foster carers, supervising social workers and children's social workers are doing well at making sure children have the health support they need. Children and foster carers are pleased there is a looked after children's nurse, as they find her easy to talk to and very approachable. Children said carers encourage them to eat the rights sorts of food and take part in sports.

There are some well-matched long-term placements for children who have been with carers for a number of years. Children were very happy living with these carers and said, "It's just like a family".

There is good evidence in some of the children's files to show that their social workers and foster carers are making sure they have contact with children's schools, so that they know what level of support is needed.

Foster carers provide excellent support to children for contact arrangements. Foster carers see that contact is important to children and their families and will take them on these visits or often invite parents to the foster home.

## **What has improved since the last inspection?**

Children's social workers are better at providing health information about children, so that foster carers know what the child's health needs are. Foster carers can now contact the looked after children nurse to obtain further information if needed.

Supervising social workers now make a specific annual visit to foster carer's homes to see if it's still a comfortable and safe place for children to live. They are also making unannounced visits to the home.

There have been improvements in children's social workers providing foster carers with information about children they place with them, which helps foster carers know how best to look after the child.

The fostering service now has better arrangements for the initial assessments of family and friends to be overseen by a fostering social worker so that someone who has experience of foster care can supervise this.

The fostering panel has developed more of a quality assurance role, which helps ensure assessments coming to panel contain the right sort of information for them to make a sound recommendation. Panel members have now received training relevant to their role. There has been a change in the level of agency decision maker to someone who is more independent of the fostering service to consider panel recommendations.

There is evidence on children's files to show social workers are requesting and obtaining Personal Education Plans, which help parents, foster carers and social workers know what support children need with education. There is also a REACH team who help support children with their educational needs.

Most of the children seem to be aware of how they can make a complaint or talk to someone if they are unhappy about anything.

There are now independent reviewing officers, which enables annual reviews of foster carers to take place. Fostering social workers said they and the children's social workers were clear about each other's roles.

Foster carers have been provided with secure storage boxes so that confidential information about fostering is kept safe. Sheets giving information about what documents are to be kept in fostering service files have now been developed.

## **What they could do better:**

Supervising social workers need to be more thorough with health and safety risk assessments in foster carer's homes to take account of fire safety and other hazards due to the amount of furniture, toys or equipment in some of the living areas.

There should also be risk assessments to show that consideration has been given to children sharing bedrooms. Some children may wish to have the privacy of their own bedroom and it may be that children's history suggests it is inappropriate they share a room.

Matching of children to placements could be better, especially for emergency placements. Lack of recruitment of foster carers has meant that there are limited carers available and frequent requests for exemptions made so that carers are taking children out of their approval age range and numbers. Foster panel should be made aware of the exemptions for monitoring.

Foster carers have not yet received training and information about any necessary use of physical intervention/restraint on a child. The children's service manager said they were considering the most appropriate type of training for carers.

Risk assessments for individual children should be available to carers so they are aware of the risks involved in caring for and meeting the needs of the children.

The fostering service should look at ways to develop consultation with carers and foster children, so that their views and opinions about the service and matters affecting them are being listened to.

The way in which the foster carers 'payment for skills' scheme operates should be made clear to carers. Many carers are confused about how the scheme works and need to know how they can progress to a higher level of payment.

There should be a monitoring system in place to ensure the fostering service is efficient and providing good quality care. This would include a system to prioritise and monitor staff workloads. Carers should maintain a training portfolio to demonstrate their training needs are met and skills developing.

There should be sufficient staff to adequately meet the needs of the fostering service, as at present there are a considerable number of foster carers who do with no qualified supervising social worker. Current staff said they are struggling with their duties, due they feel to vacancies in the service.

Foster carer's training needs should be identified and training provided so that they can develop their skills. This is the same for foster carers who live out of the Wakefield authority area. The children's service manager said the service is looking into this provision. Support for the needs of sons and daughters of foster carers should also be considered.

Foster carers records need to include details of the children they care for, as well as dates when placements begin and end (and reasons).

The fostering service should look at supporting and meeting the needs of all family and friends carers in the same way as other carers. There are a number of family and friends carers who do not have a supervising social worker to monitor these needs.

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

The report of this inspection is available from [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk) or by contacting your local CSCI office.

# **DETAILS OF INSPECTOR FINDINGS**

## **CONTENTS**

Being Healthy

Staying Safe

Enjoying and Achieving

Making a Positive Contribution

Achieving Economic Wellbeing

Management

Scoring of Outcomes

Statutory Requirements Identified During the Inspection

# Being Healthy

## The intended outcome for this Standard is:

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

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

## JUDGEMENT – we looked at the outcome for Standard:

12

The health and developmental needs of foster children are well met by the fostering service. There is good access to health care and foster carers are good at promoting a healthy lifestyle.

## EVIDENCE:

Foster carers said social workers usually give them health information about a child when they are first placed with them. Sometimes, in emergencies, this information can be delayed but foster carers said social workers are generally good at getting this to them. One foster carer described how she follows the fostering services procedures and makes sure children are registered with the GP. She also said specialist treatment for a child they cared for was continuing and the support they had received from the fostering service and health service was excellent. Children's files show health assessments are being carried out. There is now a named nurse for 'Looked After Children' and there was a positive response from children and carers about the contact they have with the nurse.

Children said their foster carers make arrangements for them to see the doctor, dentist and optician when needed. One of the older children said the foster carer would make the appointments and go with her if she wanted them to. Most of the children's questionnaires and information from the advocacy group say foster carers encourage them to eat healthy food, with children saying their carer "feeds me properly" and "I eat fruit and veg". Children's files show that there is access to more specialist services such as the Child and Adolescent Mental Health Service if required.

## Staying Safe

### The intended outcomes for these Standards are:

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

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

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

3, 6, 8, 9, 15, 30

Staff and foster carers have had appropriate checks to make sure they are suitable to work with and look after children. Risk assessments need to be carried out to show children are looked after in a safe environment. There is good matching of long-term placements, providing children with stability of care

### **EVIDENCE:**

Records show appropriate checks are made on foster carers and staff, to make sure they are suitable to be caring for and working with children.

Records show that supervising social workers make annual inspection visits to foster carer's homes. A visit to a foster home showed health and safety risk assessments weren't very thorough and needed to take account of fire safety and other hazards due to the amount of furniture, toys and equipment in rooms. Homes were seen to be well furnished and comfortable for the children. In one foster home children were sharing bedrooms but there were no written risk assessments to show the children's needs or history had been taken into consideration.

Talking to foster carers, children and supervising social workers it shows there has been good matching of long-term placements. One child said she liked

being with her carers because "it's just like a family". Due to a lack of foster carers the service is hard pressed to provide children with a choice of placement and there was little evidence of matching in emergency placements. Records show children are often initially placed with carers on an exemption certificate with a possibility of another move. There was little evidence of the process used to obtain exemptions or of these situations being considered at fostering panel.

The children's service manager said the fostering service takes into account children's racial, ethnic, cultural and religious needs and provide support to carers to try and make sure the child's needs are met within the authority.

Foster carers receive child protection training as part of their induction and there are safe caring guidelines contained in the foster carers handbook. Most foster carers said they received background information about a child. Foster carers have not yet received training and information about any necessary use of physical intervention/restraint on a child. There was no evidence of risk assessments about individual children, being given to foster carers to enable them to provide appropriate and safe care.

Recruitment and selection procedures are being followed and personnel records of the most recent staff to join the fostering service were fine. The children's service manager and fostering social workers said those involved in the assessment of foster carers have experience of foster care and family placement work and they monitor and supervise family and friends assessments started by field social workers.

The fostering panel was seen to have a diverse membership, including members from minority ethnic backgrounds, councillor, nurse and education. A member said they had been on a training day for the panel and this had been useful. Observation of the panel showed the Chair encouraging members to raise issues that were unclear with presenting social workers and prospective foster carers. The Chair of the Panel said members were taking on the quality assessment role and this continued to be developed, which was apparent at the panel.

# Enjoying and Achieving

## **The intended outcomes for these Standards are:**

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

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

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

7, 13, 31

The fostering service gives consideration to diversity and promotes educational achievement, which is supported by the REACH team. The Connect scheme is a good provision for the benefit of children with disabilities and their families

## **EVIDENCE:**

Foster carers said that as part of pre and post approval training, which is also available to family and friends carers, they cover diversity and anti-discriminatory practice, which helps them understand how to meet children's religion, culture and ethnic needs. Foster placement agreements were seen to contain information about children's different needs. The children's service manager said if a child's needs cannot be met by the fostering service the authority would consider using an independent fostering agency. Most children said their foster carers help them to take part in activities and hobbies like 'horse riding, climbing, dancing and football'. One child said the best thing about fostering was "having a real family life and not looking different".

Foster carers showed a good understanding of the part they play in promoting children's education. They said they attended parent's evenings, if parents can't go or go with them if they request this. The local authority now have a team called REACH, who are available to support the educational needs of looked after children. There was good evidence on some children's files to show that the children's social workers are requesting and obtaining Personal Education Plans so that the parent, foster carer, school and social worker know the level of support the child needs. The authority provides children with

computers to assist them with schoolwork. One child said she is taking GCSE's this year and was pleased to have had help from the REACH team, which the foster carers described as "great".

The fostering service has a 'Connect scheme', which has 20 carers providing respite care for children with disabilities. The supervising social worker for the scheme left the authority last year. An unqualified support worker is now acting as a link person for the scheme. A foster carer, who provides respite care to a specific child and has done for a few years, said she gets on well with the child's and feels that the service allows them to keep the arrangement informal and therefore supportive to the family. The children's service manager said the fostering service is looking at ways in which the Connect scheme could best be supervised and managed. To inform this, the fostering service is awaiting the outcome of the authority's 'placement review'.

## **Making a Positive Contribution**

### **The intended outcomes for these Standards are:**

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

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

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

10, 11

The fostering service promotes contact between children and their families and friends, with excellent support provided by foster carers. There is little to show that foster children and carers are given the opportunity to express their views and opinions about how the service is run or could be improved

### **EVIDENCE:**

The foster carers visited, were doing very well at promoting contact between the foster children and their families. One foster carer said her fostering social worker had been very supportive, making sure arrangements were running smoothly. A fostering social worker said foster carers went out of their way to make sure contact was promoted, for example the child who was taken to see their parent on Christmas Day. Children's written placement agreements show contact arrangements. A foster carer, looking after a baby said they had a 'contact diary', in which the carer wrote things for the parent such as the child's weight, illnesses or teething. The parent could also make comments in the diary, which they had done and the foster carer said it was a good two-way system. A foster child said they had regular contact with their family, sometimes at the foster carer's house.

The majority of children who took part in the advocacy group said their foster carers asked their opinions and some things had become better for them since they went to live with their carers. There was little evidence to show how the service itself consults with foster children and foster carers about the way the fostering service runs. A child said they go to their reviews and have a chance to say what they think about their care. The file of one foster child didn't record a statutory visit had taken place for over 10 months, although there

had been some telephone contact and the supervising social worker visited the carer.

The majority of children in the advocacy group said they were unsure about how to make a complaint but fostering service records show children have made complaints. One child told inspectors how she would make a complaint if needed and was clear about who she would talk to about this.

# Achieving Economic Wellbeing

## The intended outcomes for these Standards are:

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

## The Commission considers Standards 29 the key standard to be inspected at least once during a 12 month period.

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

29

Foster carer payments are made promptly and equipment needed is provided. The 'payment for skills' allowance needs to be reviewed as many carers find the system for progression confusing and need to understand what they must do to progress through the levels.

### EVIDENCE:

The manager and staff said that foster carers receive basic payments and that higher payment levels ('payment for skills' allowances) are achieved by them undertaking courses to increase their fostering skills and knowledge.

Completed questionnaires from foster carers and placing social workers raised queries about the fairness and achievability of this scheme. One foster carer said she was on a basic allowance level, caring for two babies, which barely covered things like food, nappies, washing, clothing and heating. This was a recently recruited foster carer who was seen to provide excellent care but said it was 'obvious they weren't foster carers for the money - they loved caring for the children'. Carers appeared to be unsure how to achieve the next payment level, and said being able to attend training courses was sometimes difficult. Other foster carers said they had applied for training and this wasn't available. Some have done the required training and said they have been told that the local authority doesn't have the money to make the skills level payments. The children's service manager said they were aware of these issues and further development work is to be done to improve the scheme.

Foster carers said their payments and requests for equipment are dealt with quickly. One foster carer said they had needed to purchase equipment at short

notice, gave receipts for this to their supervising social worker and were quickly refunded.

# Management

## The intended outcomes for these Standards are:

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

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

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

2, 4, 16, 17, 21, 22, 23, 24, 25, 32

There have been changes in management and there is an acting manager in post. Monitoring systems need to be put in place to make sure workloads are equitable and that the service is running effectively. The staff morale in the service is low, with staff feeling management aren't consulting or listening to them about staffing levels

## **EVIDENCE:**

The fostering service has an acting manager with a social work qualification and management experience. Records show that the acting manager has started to thoroughly monitor some of the fostering service records. However, there is no clear evidence that the authority has a system for quality assurance or monitoring and controlling the activities of the fostering service.

The acting manager said there had been formal supervision with most staff and she would be looking at developing a system for allocation and monitoring of work. Fostering social workers said they considered they work effectively with the children's social workers although questionnaires from some children's social workers show this could be better. Some foster carers didn't have a training portfolio and said it was difficult to get to training because of training availability, inconvenient times, the distance from their homes and childcare arrangements.

Fostering social workers, support workers and administration staff said they believe the fostering service is understaffed and felt under a great deal of pressure in their work. There is also an impending move of office to the centre of Wakefield. The work force presented as being very low in morale. They said management were not listening to or consulting with them about the situation.

Out of 33 foster carers questionnaires, 29 said they thought there were not enough staff in the fostering service but said 'they do a very good job'. Management said they had consulted with staff about the issues raised. They also said that the outcome of the 'placement review' should assist the fostering service to work more efficiently.

Foster carer assessments show that the process takes into consideration the qualities, competences and aptitudes of prospective foster carers and that health and safety issues are now noted. Records and discussion with foster carers and supervising social workers show annual reviews of foster carers take place chaired by independent reviewing officers.

Records show there are 31 foster carer households without a supervising social worker and the 20 Connect scheme carers have a support worker acting as a link worker. The children's service managers said updated versions of the Foster Care Agreements were sent to foster carers but not all have been signed and returned. Records show supervising social workers are meeting regularly with foster carers and that some of these visits are unannounced. Most foster carers questionnaires stated they have quite good support from their fostering social worker and a placing social worker said that the support workers had been really good at providing practical support and advice to maintain a placement. Some foster carers said the foster carer support groups are helpful.

Assessments show family and friends carers have induction training. The training needs of foster carers are not readily identified in annual reviews, nor recorded in their files. The children's service manager said the provision of foster carer training, including that for carers living outside the service area, is to be developed. Consideration by the fostering service of how they might support the needs of the sons and daughters of foster carers has not yet been organised. One foster carer questionnaire stated 'I think more support for carers children would be good'.

Carers' files contained all the information they should and show that the acting manager has already started to monitor them. Secure boxes were seen in foster carer homes to keep confidential fostering information safe.

Children's and foster carers registers are kept electronically and contain the relevant information. Not all foster carer records show details of all the children who have been placed with them.

Assessments and approvals of family and friends carers show the fostering service recognise the carer's particular relationship with a child. Assessments were seen to be appropriate and adequate. Some established family and friends carers have never had a fostering social worker but records show children placed with them have contact from social workers. A supervising social worker said some of these cases have now been allocated but visits had been daunting because carers and children did not have an understanding of the fostering service role.

# SCORING OF OUTCOMES

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

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

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

<b>BEING HEALTHY</b>	
<i>Standard No</i>	<i>Score</i>
<b>12</b>	3

<b>STAYING SAFE</b>	
<i>Standard No</i>	<i>Score</i>
<b>3</b>	3
<b>6</b>	1
<b>8</b>	2
<b>9</b>	2
<b>15</b>	3
<b>30</b>	3

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

<b>MAKING A POSITIVE CONTRIBUTION</b>	
<i>Standard No</i>	<i>Score</i>
<b>10</b>	4
<b>11</b>	2

<b>ACHIEVING ECONOMIC WELLBEING</b>	
<i>Standard No</i>	<i>Score</i>
<b>14</b>	X
<b>29</b>	2

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

YES

Are there any outstanding requirements from the last inspection?

**STATUTORY REQUIREMENTS**

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

No.	Standard	Regulation	Requirement	Timescale for action
1	FS9	17	Risk assessments to be provided to the foster carer to enable them to provide appropriate care for the child (Previous requirement)	10/04/06
2	FS6	17	Written risk assessments to be carried out to consider the appropriateness of children sharing bedrooms	10/04/06
4	FS25	30	Foster carer records must include details of each placement with foster carer including the name, age and sex of each child placed, when the placement began and ended with reasons for this	10/04/06

**RECOMMENDATIONS**

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

No.	Refer to Standard	Good Practice Recommendations
1	FS2	The authority should appoint a permanent manager to the fostering service.

2	FS8	<p>Matching should reflect this standard and be evidenced in foster carers records</p> <p>Exemptions to place children with foster carers outside their category of approval should be monitored by panel</p>
3	FS9	The fostering service should provide foster carers with training and information about the necessary use of physical/intervention on a child
4	FS11	The fostering service should develop means of consultation with foster carers and foster children
5	FS29	The foster carers payment for skills scheme should be reviewed so that the way it operates and how they can progress is known to carers
6	FS4	There should be clear procedures for monitoring and controlling the activities of the fostering service
7	FS16	There should be systems in place to determine, prioritise and monitor workloads and assign tasks to appropriate staff
8	FS17	There should be sufficient staff to adequately meet the needs of the fostering service
9	FS22	Approved foster carers should be supervised by a named and appropriately qualified social worker
10	FS23	<p>There should be the implementation of a training programme, for foster carers, including those residing outside of the Wakefield area</p> <p>Consideration should be given to any help or support needed by the sons and daughters of foster carers</p>
11	FS32	The support and training needs for family and friends carers to be assessed and met in the same way as for any other carers

## **Commission for Social Care Inspection**

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