



*Making Social Care
Better for People*

inspection report

FOSTERING SERVICE

Coventry Family Placement Service

**Stoke House
Lloyd Crescent
Coventry
West Midlands
CV2 5NY**

Lead Inspector
Warren Clarke

Key Announced Inspection
30th August 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

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

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

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

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

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

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SERVICE INFORMATION

Name of service	Coventry Family Placement Service
Address	Stoke House Lloyd Crescent Coventry West Midlands CV2 5NY
Telephone number	02476 659009
Fax number	02476 659004
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Coventry City Council
Name of registered manager (if applicable)	Mrs Catherine Swanson
Type of registration	Local Auth Fostering Service

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 20th February 2006

Brief Description of the Service:

The Coventry Fostering Service is part of Coventry City Council children's services provision. It provides accommodation and care for children and young people who are being looked after, either temporarily or on a long-term basis, by the local authority. The service caters for children and young people aged 0 - 18 years of either gender. It makes available a wide range of foster carers in order to respond to the varying needs of those requiring a service.

The service is part of the Children and Families' Placement Service that is based on one site. There is a fostering service manager and a number of team managers who lead various aspects of the service's functions, i.e., four teams including: a recruitment team that undertakes the recruitment, assessment/preparation of potential foster carers; two fostering teams that supervise and support all approved foster carers, including specific workers for family and friend carers; and a placements team that receives requests for placements, whether fostering or residential, and matches requests to placements. Social workers within all four teams undertake the assessment of potential carers and submission of the application to Panel for approval. In addition, there are two adoption teams.

Coventry has established separate adoption and fostering panels. The Fostering Panel is chaired by someone with the necessary professional background and experience and is independent of the Local Authority. The person who makes decisions on the Local authorities behalf whether to approve those who apply to become foster carers is the Children's Services Manager (Placements). Prospective foster carers are invited to attend the Fostering Panel when their applications are to be considered.

The service provides long-term and permanent foster placements, including with family and friends. It also provides emergency and time-limited placements, the latter when workers have identified a particular task, such as preparation for longer-term fostering or adoption, or a twin-track arrangement when the plan is either a return home or adoption. The service offers, on a limited basis, respite placements for children placed with other foster carers or living at home where workers identify that a break from caring will support the placement. Day care is also available in similar circumstances, and to allow

foster carers to attend training or other foster care activities.

There is a specialist scheme for children whose difficulties present a particular challenge. The Council has a contract with a national voluntary organisation to provide short breaks or longer-term care for children and young people with disabilities.

Foster carers' progress through a fee-paid scheme based on their level of experience and skills. The specialist scheme operates separately with carers receiving a flat-rate fee that is higher than the highest rate of the general fee-paid scheme. They also have 28 days' paid leave and retain up to a specified number of days when no child is placed with them.

SUMMARY

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

This announced inspection follows relatively closely on from one that was carried out in February. It therefore takes into account the findings of that inspection and information provided by the manager in a pre-inspection questionnaire and the manager's assessment of the fostering service's performance. Questionnaires were sent to a sample of children and young people, their social workers and their foster carers.

During the inspection visit the inspectors went to four foster homes where, in each case, children of different ages were being looked after. The foster carers were interviewed and some of the children and their views and opinions have been reflected in the report. The method by which the inspection was conducted includes formal interview with the manager and some staff members, examination of records – including a sample of children and young people's files which were closely scrutinised (case tracking). The inspectors also assessed how far the means by which those responsible for the fostering claim that it is being run matches what is happening in reality and whether what is being done is proving beneficial to the children and young people.

The reader should be aware that where 'children' are referred to in the report it means those up to 18 years old.

What the service does well:

The fostering service is good at providing a range of foster care services to meet the various needs of the children and young people in its area. The children and young people who were interviewed and those who gave their views in questionnaires were positive about their foster care experiences. This is captured in the comment of a young person who said of the fostering service: "They are able to give you what your parents sometimes can't – people to listen to you and to sort things out". Similar comments were made at the last inspection, which shows that the quality of service, as experienced by the children and young people is consistent.

What has improved since the last inspection?

At the last inspection suggestions were made about areas where the fostering service needs to make improvements in the quality of information given to foster carers in, for example the Placement Plans and other documents. Work has been done to bring about those improvements and others related to some of the procedures that the fostering service needs to do its work.

Although some of these things have not been put into practice yet, the inspectors were encouraged that work is being done to get them right before they are introduced.

What they could do better:

The fostering service needs to:

i). make sure that foster carers have ready access to a written document authorising foster carers to arrange medical care for the children and young people;

ii). ensure that those who consider whether to approve people to become foster carers have enough information about the people's health; and,

iii). update so that it is in line with the current regulations, the agreement it has with foster carers (the Foster Care Agreement) about what carers can expect of the fostering service and what it expects of them in the care of the children and young people.

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

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

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 rating for the fostering service's performance in this outcome area is **good**.

The fostering service makes acceptable provisions for maintaining the children in good health and responding to any health care needs that they might have. Greater care needs to be taken, however, in ensuring all foster carers have the necessary authorisation to arrange treatment for the children placed in their care and that they fully understand their responsibilities in this regard.

EVIDENCE:

At the last inspection, which was some six months ago, the fostering service was found to have a range of measures in place to promote the health and development of children placed with its foster carers. The children and foster carers confirmed this, but procedurally it was discovered that some fine-tuning was required to ensure that foster carers are given the fullest information about the children's health histories and that when there is information, such as written authorisation for foster carers to arrange routine and emergency medical treatment, this information is easily accessible and understood.

On this occasion there was evidence in children and young people's records, which are held by the fostering service, to show that their health needs are understood and are being met. For their part, foster carers confirmed that they made arrangements for the children and young people to receive dental, optical and GP services both in terms of curative and preventative health care.

There was also evidence in the records and accounts given by foster carers and young people that specialist services, such as Children and Adolescent Mental Health Services are, as relevant, made available to deal with any emotional difficulties. A similar situation was observed with children who have ongoing medical conditions and are under the care of medical consultants and those, with difficulties such as speech delay, who were receiving speech and language services. All the children, who responded to a questionnaire for this inspection, which asked them about their health, said that their foster carers always support them in staying healthy.

The inspectors concluded however, that some of the deficits in procedure, which were highlighted at the last inspection, are still apparent. That is, in two of the foster carers households visited during the inspection, there was a lack of clarity regarding the consent for medical treatment. In these instances, the foster carers did not have consent for treatment delegated to them. In one case the carer relied on being a relative who shared the same surname as the child to usually sign any consent forms – it seems without challenge so far. In another case, that of an infant, it was found that that the foster carer had no authorisation.

The Placement Plan into which the consent is supposed to have been written had only been signed by a social worker and had not been given to foster carers. In yet another case, the department's Placement Plan part 3 stated: "consent already in place", but carers do not have a copy of it. Parent's name had been crossed out and foster carers had signed it instead. Whilst the foster carers did have a copy of LAC document Placement Plan Part 1 this was not signed and the consent had not been delegated to the foster carers.

Balanced against the shortcomings above, were two instances where foster carers, in the sample who were visited, were able to readily produce written authorisation given to them for arranging medical treatment of children and detailed information about the health histories of those children. Whilst the inspectors are satisfied that the health care of the children and young people is being properly tended, there is a need for the service to 'tighten up' on documentation in this regard. The fostering service acting to reduce the numbers of children who are placed with foster carers on an unplanned basis might contribute to remedying this and other procedural deficits. The manager confirmed that there were 104 such arrangements during the year August 2005 to August 2006.

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, 9, 15 and 30

The performance of the fostering service is rated **good** for this outcome area.

Children and young people are, through a range of measures taken by the fostering service, protected from harm and abuse. However, the health and safety checks, which are made of foster carers homes need to be dated so that they better assist the auditing process, which ensures that those checks are being conducted at the correct stages.

EVIDENCE:

Since the fostering service's performance in acting to protect children in its care from harm and abuse was assessed six months ago and was acceptable and the Commission received no information to contrary since then this inspection focused on whether this level of safety and protection was being maintained. With this in mind, the inspectors examined a sample of foster carers' records and found that the assessment of their ability to care for children safely was carried out thoroughly and went through a vetting and approval process in line with the regulations and standards.

All the foster carers households, which were visited on this occasion, as was the case previously, provided a good standard of accommodation for the young people. In only one case, in the sample, were children found sharing a bedroom. It was confirmed that these children were relatives and that a risk assessment had been carried out to inform the acceptability of this arrangement. All foster carers, as confirmed in the cases examined, are assisted by the fostering service to draw up a Safe Caring agreement.

This sets out the steps that the carers and members of their household will take to ensure theirs and the young people's privacy and to reduce opportunities for misunderstandings and abuse. One carer said that though the fostering service provides training in Safe Caring she was not able to secure a place on such training. The senior staff in the fostering service said that this training is part of the annual foster carers training programme and is repeated therefore a carer who does not secure a place on a particular session will have opportunities to do so subsequently.

The foster carers' records showed, and the fostering services written procedures confirmed, that health and Safety checks are made of each foster carer's home during the process of assessing their suitability to become approved carers. This is also done annually thereafter, but they are not dated as indicated on the form and it is difficult to know whether they were undertaken as part of the assessment or if they have been undertaken since. In one case, the relevant document of the annual review of the foster carers indicated that though the carers had been approved in May 2005, the health and safety assessment had not been undertaken until November 2005.

Recognising that some pets might pose a danger to children, it was noted that part of the fostering service services health and safety assessment takes account of this aspect of risk. Where foster carers use their cars to transport children, it was also noted that the fostering service documents this in the health and safety assessment and, as confirmed by foster carers, checks the vehicle documents (MOT, Road Fund Licence and Insurance) as proof of its safety.

One of the ways in which the fostering service seeks to ensure that children and young people are safe, is by seeking to match them carefully with carers. In practice, this was seen to be done using a system that considers the child or young person's age, interests and needs, and balances these against the foster carers' profile. That is, the category for which the carer has been approved, her or his experience, skills, interest, etc.

Offering a view on the matching process one of young people confirmed that the process took full account of this individual's wishes, i.e., the young person was able to consider the carers profiles and was fully involved in an introduction process before decision to be accommodated by the carers was made final. The only critical observation that the inspectors made of this process was that the information that informs the match is not always reflected in the Placement Plan (i.e., the details of what the carer is expected to do in caring for the child).

Checks of the fostering services policies, procedures and guidance about protecting children and young people from abuse, bullying and inappropriate disciplining were, as at the last inspection, found to be acceptable and effective in how they are being applied in practice. For example, though there have been some allegations of abuse, where these are made they are referred to the child protection service and if the fostering service is required to take any action following investigation this is followed up. Evidence from the notification system in which the fostering service is required to inform the Commission of any allegations and investigation of abuse, shows it has acted to ensure the children's safety.

The fostering service has also been seen to act on information that suggest that foster carers might not be properly promoting the welfare of children and to cancel the approval of carers if they are deemed no longer fit to be foster carers.

At the last inspection the children and young people, foster carers and children's social workers who responded to the Commission's questionnaire about the type of punishment, which the fostering service permits foster carers to use, were all satisfied with this. No evidence was found on this occasion to contradict the positive findings of the last inspection about the acceptability and fairness of the sanctions, which foster carers, are permitted to use. Indeed, all the children who completed the questionnaire for this inspection indicated that they are always well looked after in the foster home where they are currently living. This was reinforced by comments such as: My carer "is always there to make sure I'm ok and I have everything I need here".

Recognising the adverse impact bullying has on children's wellbeing and as required by the standards, the fostering service has developed an *Anti-Bullying Policy*. This, together with guidance on how foster carers might support children who are or are suspected of being bullied, is included in the Foster Carers Handbook. None of the children, who were seen on this occasion and indeed at the last inspection, reported any current experience of bullying. In their response to the questionnaire, the young people who wrote comments said: "Not anymore – I sorted it out – it was at school", and "Picked on at school sometimes".

The fostering service has a procedure (The Missing From Care Protocol) that foster carers are expected to follow when children and young people are absent without authority. This procedure continues to be effective in that it takes account of the vulnerability of the children and young people and the proportionate steps that need to be taken to find them.

Although the fostering panel was not observed while in session on this occasion, documents related to its constitution and functions were examined. That is, the numbers and roles of the panel members and how it considers foster carers application for approval, their annual review and matters related to their conduct and performance.

In all these areas the fostering panel was assessed as effective. It was also noted that all reasonable care is being taken to protect children from staff, carers and others associated with the fostering service who might be a risk to them. This is reflected in fostering service staff recruitment and selection procedure and the vetting process for foster carers and fostering panel members. For instance, the fostering service takes steps to verify the identity of the people concerned; it obtains written references and a satisfactory criminal records disclosure before engaging the person in any capacity. Documentation, which the fostering service manager provided, showed that criminal record checks are being repeated every three years as required.

Enjoying and Achieving

The intended outcomes for these Standards are:

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

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

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

7, 13 and 31

The fostering service's performance is rated as **good** in this outcome area.

Children and young people in the fostering service's provisions are being reared in ways that promote their proper development and maximise their potential, talents and interests. At a strategic level, the service has made sound plans to address needs arising from children's race, culture and religion, but needs to ensure that application of the strategy is seen to have the desired impact in all cases.

EVIDENCE:

The Fostering Service has developed a booklet for foster carers to assist young people to develop self-esteem and build their confidence. This assists foster carers to develop clear boundaries with the young people to keep them safe. Records confirmed that one foster carer was using this with positive effect with the young person placed. Information about the annual review of the foster carers includes encouraging comments of how they have dealt with issues of identity, race, disability, sexuality, religion and culture.

None of the young people visited were placed trans-racially or had a disability. It was positive to note that the service has developed support groups for black foster carers and a specialist team to support those who care for young people with disabilities.

These initiatives are likely to enhance skills, promote development in these parts of the service and provide foster carers with the support and training more attuned to their specialist areas. One young woman told the inspector that she was most satisfied with how her foster carers responded to her needs as a female and encourage and support her in her special interests. In the response to the questionnaire a minority, but no less important, view from the children's social workers was that one of the negative things about the child's placement with the carers is that the child is placed with carers of a different race.

Further, that the change needed in the arrangement is for greater promotion of the child's culture. This relates to the matching process referred to earlier, in which any gaps between what the child needs and the foster carer is able to provide should be identified and compensatory measures introduced to fill the gap. This comment was therefore surprising, as the child's social worker and the supervising social worker should have identified the child's cultural needs before the placement was made and set out in the Placement Plan, the actions and resources necessary to meet them.

All the carers who were visited and interviewed, were able to provide evidence of supporting the children and young people's education as might be expected of a good parent. The fostering service works closely with the Local Education Authority, which provides foster carers guidance about how to promote the education of children in their care and about access to local initiatives in this connection. The young people who responded to the questionnaire said that their foster carers always give them the right help to enable them to be successful in their education. This was supported by comments such as: "My carer has done her extreme best to make sure I have an opportunity to get a good education". One of the young people interviewed confirmed this view by saying that though there are often difficulties at school, the foster carers are very good at helping to resolve them.

The inspectors saw evidence in the foster homes of books, toys and games, which are likely to enhance children's learning and, in one case in our sample, that of a foster carer involvement in the preparation of a child's Personal Education Plan (PEP). Puzzlingly, in another case a foster carer claimed not to have been invited to the meeting to discuss the child's PEP. This is contrary to the fostering service's expectations and evidence of other carers, but it needs nevertheless to be mindful of this claim.

One of the children's school reports, which was seen, commented that the young person had made good progress and that she "has had tremendous help and support at home this year", providing further evidence of foster carers acting to promote the children's educational achievements.

The Local authority commissions the provision of its short term break service from a well-established national children's charitable organisation. This

organisation is registered to operate an Independent Fostering Agency locally, and when it was inspected recently it was deemed to fulfil the requirements set out in standard 31. That is to say, its policies and procedure are specially focused on the nature of short-term breaks and the needs of the children and young people who receive the service. The service provides respite care for children with special needs usually at weekends and during school holidays. In these arrangements, the children's parents work closely with the foster carers and there is a clear understanding that the parents retain all their parental responsibilities particularly for the children's health and education.

Making a Positive Contribution

The intended outcomes for these Standards are:

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

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

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

10 and 11

The rating accorded the fostering service's performance in this outcome area is **good**.

Importantly, the children and young people consider that their views and opinions are listened to and that, in nearly all cases, they receive the support that they need to maintain contact with their relatives. The evidence that the inspectors found supports this.

EVIDENCE:

The fostering service and its foster carers recognise the importance of children being able to maintain contact with their relatives and other people who are significant to them. Guidance on the importance of contact features in foster carers preparation programme and is explained in their handbook.

In the sample of children and young people's whose cases were examples, the inspectors found that they were all having contact with their families. Contact arrangements also featured as a criterion in the matching process and in the Placement Agreement, as seen in files, which were examined. Where, as in two of the cases, which were examined, there were some official restrictions on family contact this was clearly stated. However, in one foster carers household the carers informed the inspector that the contact arrangements frequently changed and that children's social workers did not consult them regarding arrangements for contact.

Although in one case where account was taken of risks associated with a child's parents' history of violence and control measures such as withholding the foster carers address was agreed, the foster carers said this was often at risk of being negated. The foster carers believed this to be so because there have been occasions when the contact arrangements have been made without all parties being aware of the need not to cause their address to be disclosed. In these circumstances, the fostering service needs to play a more significant role in ensuring that contact arrangements are clear, understood and adhered to by all those concerned.

The children and young people at this, as at the last inspection, had no major concerns about contact arrangements with their family. One of the young people told the inspector that the social worker could do more to arrange contact with this person's brother and sister. This was in line with what staff reported as a common theme from the Children's Conference last year when they emphasised the importance they place on being able to maintain contact with those significant to them.

Young people who were interviewed and those who responded to the questionnaire were positive in their comments about being consulted and listened to. This reflects views that were given at the last inspection. That is, they consider that they are listened to in routine matters concerning daily living in their foster home, for example, in food preferences. Furthermore their views are sought in the foster carers annual review process and they are enabled to contribute to planning for their future and to be involved in meetings where such plans are discussed, i.e., their case review.

The Local Authority's established complaints, comments and compliments procedure for children, including those in foster care, is rigorously promoted. This enables the children and young people to give feedback – positive or negative – of their experience of foster care with the assurance that their complaints or concerns will be independently looked into and resolved. The complaints procedure is included in the Children's Guide and foster carers are also aware of how they might assist children in their care to make complaints. A much smaller sample than at the last inspection, of the children who responded to the questionnaire, 50%, indicated that they know how to complain while there was an even spread between the rest who indicated: "no" – that they either do not know how to complain or simply that they "don't know". None of the children and young people raised any concerns or complaints directly with the inspectors.

Achieving Economic Wellbeing

The intended outcomes for these Standards are:

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

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

14 and 29

The fostering service's performance has been rated **good** in this outcome area.

Children being looked after in this Local Authority's fostering service benefit from a comfortable standard of living and there is a structure in place to prepare them so that they might be able to secure the means to maintain this standard in adulthood.

EVIDENCE:

In their preparation and foundation training of foster carers the fostering service emphasises the expectation that foster carers will care for the children and young people as though they are children of the family. This includes attending to aspects of their development as will make them gradually more independent and begin to equip them for adulthood.

Young people in foster care in this fostering service benefit from the provisions that the Local Authority has made under the Children (Leaving Care) Act 2000, which require that there is a plan, the Pathway Plan, for each young person who is nearing the time when they will graduate to independent or semi-independent living. Although none of the young people who were visited or interviewed were of an age where they were preparing for independent or semi-independent accommodation there is a clear expectation that foster carers will play a part in both the planning and preparation of the young people for adulthood.

Young people in response to the survey indicated that they were either "always" or "sometimes" helped by their foster carers to think about their future.

They explained this with comments such as: "I am doing the after care plan at the moment and I am always thinking of the future", and "My carer has asked me questions about my future ambitions and makes suggestions about how to achieve them". The foster carers who were seen during the inspection did not raise any concerns about payments and some said that the fostering expense claims are paid promptly. The rates of payment made to foster carers are in line with those recommended by the Fostering Network and none of the fostering households, which were visited presented any signs of impoverishment. One carer in response to the questionnaire said the fostering service had recently made a grant to create an additional bedroom and that this had made a big difference to the lives of foster children who hitherto shared a bedroom.

Management

The intended outcomes for these Standards are:

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

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

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

16, 17, 21, 22, 24 and 32

The rating given to the fostering service performance in this outcome area is **good**.

The organisation, management systems and the leadership of the fostering service culminate in services the acceptable quality of which the major stakeholders – children/young people, foster carers and social workers – attest.

Although there are some weaknesses, they are largely procedural in nature and do not appear to have impeded the outcomes desired in the children and young people's care.

EVIDENCE:

The fostering service is organised such as to demonstrate a clear management structure and accountability. Currently, there are essentially three teams each headed by a Team Leader. There is an administration team that supports the fostering service in all its functions. There is a joint fostering and adoption recruitment team organise such that the supervising social workers are also involved in the recruitment, preparation and assessment of prospective adopters. One of the other two teams of supervising social workers focuses on supporting foster carers who specialise in remand fostering, children with disabilities and some teenagers who are difficult to place. The other team focuses on assessment of carers, Family and friends as carers and those who assume the care of children and young people by Special Guardianship Order under the Children Act 1989.

Organising the service as outlined above means that the management responsibilities are effectively delegated and staff can be assigned to duties best suited to their qualifications, skills and interests. It also enables better prioritisation of the work and development of specialist aspects of the service.

The social work staff members said that they were content with these arrangements and believed that they are working effectively. However, whilst there was widespread enthusiasm about the development and expansion of the fostering service there was equal concern that this is out of sync with the administrative resources to support it. The Administration Manager said that this has the effect of placing her team under intolerable strain – a view shared by some of the social workers who added that because of the gap in administrative resources they too were being deflected from their core duties because they had to sometimes perform some of the administrative duties.

Social workers employed in the fostering service who were interviewed said that they were satisfied with their professional supervision, which is regular. They were also content with the arrangements for their training and development.

The register of staff, which the manager set out in the pre-inspection questionnaire, their qualifications and experience suggest that they provide the appropriate skill mix to enable the fostering service to discharge its functions.

Foster carers consider this to be the case, in that they believe they get a professional service and particularly good support. They cited the current out-of-hours supports arrangements as a positive example. That a significant number of staff members of all levels and roles have been employed in the fostering service for three years or more suggests that it is successful in its staff retention initiatives.

The fostering service uses the BAAF model, which is nationally recognised, for assessing foster carers. The sample of assessment reports, which were examined were considered to be of an acceptable standard. However, the approach to assessment in future might benefit from a more robust analysis of the foster carers skills, which was not evident in those that were seen. Focusing on skills is likely to enable better targeting of post-approval training and development, which, if necessary, might be linked to any conditions on which approval is granted.

It was noted that in one case an assessment did not cover risk associated with the foster carers keeping a tarantula spider though the checks and balances of fostering services systems meant that this was explored when the assessment was presented to the fostering panel. The registered manager recognised and pointed out to the inspectors that currently insufficient information about prospective foster carers' (or applicants) health was being reflected in the assessment. That is to say, though this information is shared between the applicants' GPs and the medical advisor to the fostering service, the only reflection of such information in the assessment process is that there are no reasons from a medical point of view why the medical advisor would not recommend the applicants for approval as foster carers. This will need to be resolved so that those who consider the suitability of prospective foster carers and those who grant final approval are able to do this having regard to the fullest information.

The fostering service has demonstrated that it has a clear strategy for supporting foster carers in, for example, facilitating the Foster Carers' Support Group, the annual training programme and in respite arrangements, which its resources currently struggle to adequately accommodate. The fostering service was advised to consider respite arrangements at the time when foster carers are being assessed so that any resource implications might form part of the assessment and approval.

Foster carers commented that they received good support from their supervising social workers, all whom are professionally qualified. They also explained that if their allocated worker was not available other members of staff were knowledgeable and helpful. There was evidence in the carers' records confirming that supervision takes place on a regular basis. It was not, however, always clear from the information on the files and from talking to foster carers how often supervision was supposed to take place.

There was, in some instances, a disparity between the frequency specified in the supervision contract and that suggested by actual supervision records. For example, in some cases the supervision contract stated that supervision was to be monthly yet the supervision records indicated that it had taken place approximately every two months.

The records of supervision were full, covering a wide range of issues. Foster carers, who were interviewed, except one, said that they receive a copy of their supervision notes. In all cases, they confirmed that they had received a copy of the Foster Carers' Handbook and that their supervising social workers make at least one unannounced visit per year, as was corroborated by the records.

The sample Foster Care Agreement, which is currently being used, on examination was found to be obsolete in that it is underpinned by redundant regulations, i.e., Placement (Children) Regulations 1991, which have been superseded by the Fostering Services Regulations 2002. In light of this, the Agreement does not set out the terms of the foster carer's approval and some essential new requirements such as foster carers co-operation with the Commission. With this in mind the Foster Care Agreement must be amended to reflect the expectations of foster carers as specified in the Fostering Service Regulations 2002. In the Current Agreement not all of that expected of foster carers is set out in full. Instead, they are referred to the Foster Carers' Handbook. This may need to be reconsidered, but the fostering service might wish to retain the conditions for foster carers to undertake core training, and to condition to make it aware at the first sign of any difficulties in any child's placement.

Improvements in the range and frequency of post-approval training that the fostering service makes available to foster carers, continue. There is an annual programme of training, which covers the core topics and others relevant to maintenance and development of the more experienced foster carers' knowledge and skills. One foster carer was noted to have undertaken a wide range of training, but had not had the opportunity to undertake Safe Caring training, which is a core module, due to it being over subscribed on two occasions. Since the Foster Care Agreement makes core training a specific requirement, the courses, which are regarded as core should be programmed into the foster carers' training schedule at the time of approval and review and their names put forward as the priority for places on such courses. Also if those courses are mandatory there ought to be some system for checking that the foster carers have attended them within the agreed timescale.

The inspectors considered that greater focus on training for family and friends carers is merited so that they too are able to develop their knowledge and skills in caring for children. An impression emerged from some of the family and friends carers' records, that whilst training is offered it is sometimes refused. In one case, the carer's review suggests that training was not necessary owing to the carer's status as a family and friends carer. The manager explained that this does not represent the fostering service policy towards the training and development of family and friends who are approved to act as foster carers.

Examination of a sample of children's case records held by the fostering service was found to comply with the standards and regulations except for that which relates to delegated authority to enable foster carers to arrange medical treatment for children. However, the quality of the information could be improved. Some of the documentation presented as hastily completed and brief in content thus making it difficult to get a systematic understanding of children's past, current circumstances and futures plans. This is an area in which the fostering service has been previously assessed as deficient and although significant improvements have been made, as confirmed by some foster carers, there is still scope for further improvements.

The foster carers whose homes the inspectors visited were seen to be provided with the means to store children's records securely and that they were diligent in their practice in this regard.

Establishing a team dedicated to assessing, reviewing and supporting family and friends foster carers has enhanced the profile of this aspect of the service and has ushered in improvements for such carers. For example, a support group specifically for them is being developed and consideration is currently being given to their specific training needs.

SCORING OF OUTCOMES

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

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

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

BEING HEALTHY	
<i>Standard No</i>	<i>Score</i>
12	2

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

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

MAKING A POSITIVE CONTRIBUTION	
<i>Standard No</i>	<i>Score</i>
10	2
11	3

ACHIEVING ECONOMIC WELLBEING	
<i>Standard No</i>	<i>Score</i>
14	3
29	3

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

NO

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

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

No.	Standard	Regulation	Requirement	Timescale for action
1.	FS12	15	The Registered Person must ensure that foster carers have and understand the written authorisation given to them to arrange such medical and dental treatment, as each child placed with them might need.	31/01/07
2.	FS10	14	The Registered Person must ensure that all contact arrangements for children placed with foster carers are clearly set on in the Placement Plan and that the arrangements are not likely to place the children or the foster carers in danger.	31/01/07
3.	FS16	19	The Registered Person must review the workload of the administration team with a view to determining whether additional administrative resources are required and, if so provide such resources. The Observations and concerns expressed by staff employed in the fostering service must be taken into account in the fulfilment of this requirement.	31/03/07

4.	FS17	27	The Registered Person must ensure that the fullest information is made available to those who will consider whether to approve those who apply to become foster carers.	30/11/06
5.	FS22	28	The Registered Person must arrange for the Foster Care Agreement to be updated so as to bring it into line with the Fostering Services Regulations 2002.	31/03/07

RECOMMENDATIONS

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

No.	Refer to Standard	Good Practice Recommendations
1.	FS6	Where health and safety checks are carried out either as part of the foster carers pre-approval assessment or their annual review, the date on which the checks were made should be recorded to facilitate auditing.
2.	FS8	There should be a greater reflection in the Placement Plans of matters taken into account in the matching process and where gaps are identified between the foster carers resources and the child's needs, the compensatory means for bridging the gaps should be clearly set out in the Plan.
3.	FS17	Consideration should be given to placing greater emphasis on prospective foster carers' skills to foster during the pre-approval process so that training resources can be more targeted at skills gaps in the post-approval training programme.
4.	FS24	Work currently being done, to improve the Placement Plan and the quality of information given to foster carers to assist them in the care of each child, should continue.

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