



Champions for
Social Care
Improvement

inspection report

Fostering Services

Tameside MBC Fostering Services

Tameside MBC, Social Services
Level 2, Council Offices, Wellington Road
Ashton under Lyne
Lancs
OL6 6DL

2nd to 4th 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

Tameside MBC Fostering Services

Address

Tameside MBC, Social Services, Level 2, Council Offices,
Wellington Road, Ashton under Lyne, Lancs, OL6 6DL

Local Authority Manager

Joy Dunbavin

Tel No:

0161 342 8355

Address

Tameside MBC, Social Services, Level 2, Council Offices,
Wellington Road, Ashton under Lyne, Lancs, OL6 6DL

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 ?

Date of last inspection

10/3/03

Date of Inspection Visit		2 nd – 4 th March 2004	ID Code
Time of Inspection Visit		09:00 am	
Name of Inspector	1	Helen Humphreys	074698
Name of Inspector	2	NA	
Name of Inspector	3	NA	
Name of Inspector	4	NA	
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.		NA	
Name of Specialist (e.g. Interpreter/Signer) (if applicable)		NA	
Name of Establishment Representative at the time of inspection		Joy Dunbavin, Angela Kilgore and Joanne Bradshaw.	

Introduction to Report and Inspection

Inspection visits

Description of Fostering Service

Part A: Summary of Inspection Findings

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

Part B: Inspection Methods & Findings

(National Minimum Standards For Fostering Services)

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

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

Part D: Provider's Response

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

INTRODUCTION TO REPORT AND INSPECTION

Independent and local authority fostering services which fall within the jurisdiction of the 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 Tameside MBC Fostering 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.

Tameside MBC has a dedicated Family Placement Service which is managed by the Unit Business Manager for Looked After Children. Their main purpose is to provide a diverse range of carers to cater for the needs of looked after children in Tameside and, in partnership with other sectors, to ensure the best outcomes for the young people.

The team recruits, assesses, supervises and supports foster carers and is responsible for ensuring that their training needs are met. Services offered by the team include emergency placements, task centred placements, long term or permanent carers, respite care and network care placements, where the aim is to support families before a crisis happens by the provision of day care and respite.

The service is also responsible for kinship care and works with the disability team for respite placements for children with disabilities.

At the time of the inspection there were 179 children and young people in placement and 23 family link carers offering respite care to children with disabilities.

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).

Tameside Fostering Service has been inspected for the second time against National Minimum Standards for Fostering Services.

Since the last inspection the team has continued to develop the service and grow, and there was evidence of many improvements which have been made to the service in the last 12 months.

Statement of Purpose

The statement of purpose has been revised and meets the NMS. The children's guide has also been revised, however this does not contain details of how young people can complain to CSCI and must be amended. However, the team has plans to develop the children's guide further with the use of CD roms.

Fitness to provide and manage fostering service

At the time of the inspection temporary management arrangements were in place and some deficiencies were noted. Tameside MBC must make permanent effective management arrangements shortly. At the time of the inspection there was no effective monitoring system in place which met the Regulation and Schedule 7.

Securing and promoting welfare

There is a clear focus on promoting welfare and meeting the needs of looked after children throughout the service. The arrangements for health, education, leaving care and leisure activities were seen to be satisfactory. However, there was still a lack of complete information for staff in order to make appropriate placements and for carers to enable them to care for the young people in placement appropriately. Tameside MBC must ensure that placing social workers provide adequate and appropriate information.

Recruiting, checking, managing, supporting and training staff and foster carers

The team has a focused and creative recruitment campaign and in the last 12 months have recruited and approved 35 new carers. Carers are well supported through supervision, general support and a well developed training programme.

The process of assessment is thorough and well developed and the carers commented that they were supported throughout the process.

The staff team presented as loyal, enthusiastic and competent to carry out the task. They were supported with a range of policies and procedures.

Records

Work needs to be undertaken to ensure that all complaints which involve the fostering service are collated, regularly maintained and that the record of investigation and outcome is recorded. Some discrepancies on the children's files were noted and there was a lack of Foster Care Agreements both in the file and with cares. Tameside MBC must take action in respect of this matter.

Fitness of premises

The building in which the fostering service works was in the process of refurbishment and change at the time of the inspection. Records are well maintained in an orderly fashion. Administrative support is provided by dedicated staff who understand the needs of the service.

Financial requirements

Not applicable to Local Authority Fostering Services.

Fostering panels

The Fostering Panel does not currently meet the Regulation and NMS in its constitution. Assessments and reviews of carers are scrutinised effectively by a Fostering Panel which is effectively chaired and whose members bring a range of experience and expertise to the process. A number of discrepancies were noted and the Panel Advisor must undertake her role more effectively and efficiently.

Short-term breaks

Tameside has a Family Link service which provides respite care for children with disabilities. This appeared to be a well developed provision which was providing a good service.

Family and friends as carers

The assessment and support for kinship carers had been brought within the remit of the fostering service. A general audit has been undertaken, some discrepancies in relation to assessments and payments, in particular, were noted. Tameside MBC must ensure that all placements made with kinship carers meet the Regulations and that the plans to provide support to these carers should continue.

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:

NO

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:

There was evidence that the temporary management arrangements were not satisfactory and were beginning to have a detrimental affect on the service. This included effective monitoring of the service.

There was no effective system in place to ensure that all looked after children were visited regularly and seen alone by either the placing social worker or supervising social worker.

The Panel had met and undertaken fostering business when not quorate.

There was no social worker from the fostering team on the Panel.

Supervising social workers and carers generally have insufficient information from placing social workers about the young people being placed.

At least one child had been placed with kinship carers prior to the completion of the assessment and presentation at Panel.

Not all carers' annual reviews were being carried out within specified timescales in line with Regulation.

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	
3	20(3)(d) and Schedule 1	FS5FS15	Tameside MBC must ensure that personnel records include all the information outlined in Schedule 1 of Regulations.	November 2003
5	43(1) and Schedule 8	FS4	Tameside MBC must ensure that notification of significant events takes place as appropriate.	October 2003
8	15(1)	FS24 FS12	MBC must ensure that all carers are Tameside provided with appropriate information to meet the needs of young people in their care.	November 2003
12	38	FS32	Tameside MBC must continue with developments to ensure that the placements with Family and Friends Carers meets Regulation and NMS.	December 2003

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	
Not applicable		
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Lead Inspector Helen Humphreys **Signature** _____
Second Inspector NA **Signature** _____
Locality Manager NA **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	3	FS1	Tameside MBC must ensure that the children's guide is revised to meet the Regulation and NMS.	30/7/04
2	10	FS2	Tameside MBC must make permanent effective management arrangements.	30/7/04
3	42 and schedule 7 and 8	FS4	Tameside MBC must implement an effective system to monitor the service and for the notification of significant events.	30/6/04
4	20	FS4	Tameside MBC must create a policy to meet this Regulation regarding the employment of existing staff as carers.	30/7/04
5	17	FS8	Tameside MBC must ensure that placing social workers provide to carers and fostering staff all available information about the young people.	30/6/04
6	34 and Schedule 6	FS8	Tameside MBC must review the use of the LAC Placement Agreement.	30/8/04
7	35	FS9	Tameside MBC must ensure that a system is implemented to ensure that all young people are seen alone on a regular basis.	30/7/04

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	
8	18	FS11	Tameside MBC must ensure that all young people are aware that they can complain to CSCI and are given the means to do so. Tameside MBC must ensure that social workers or fostering service staff regularly check with carers and young people that they are aware of the complaints procedure.	30/6/04
9	17	FS12	Tameside MBC must ensure that all carers have all available information in relation to health of young people and that where there are gaps this information is accessed. All young people must have a written health care record.	30/7/04
10	5	FS15	Tameside MBC must ensure that personnel records include all the information outlined in Schedule 1 of Regulations.	30/7/04
11	17	FS21	Tameside MBC must ensure that each child in placement has a social worker and that they keep in regular contact with carers as required.	30/7/04
12	29	FS21	Tameside MBC must ensure that foster carer reviews are carried out annually.	30/6/04
13	28 and Schedule 5	FS22	Tameside MBC must ensure that all carers have a foster care agreement and are aware of the status of the document.	30/7/04
14	18	FS22	Tameside MBC must amend the complaints procedure for carers so that they are aware that they can complain to CSCI.	30/6/04
15	42	FS22	Tameside MBC must ensure that the record of complaints is maintained and the investigation and outcome is recorded.	30/6/04

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	
16	22	FS24	Tameside MBC must ensure that appropriate records for young people are maintained.	30/7/04
17	22	FS24	Tameside MBC must work with carers so that they understand the relevance and importance of all relevant documents.	30/7/04
18	23	FS26	Tameside MBC must provide suitable accommodation for the staff.	30/12/04
19	24	FS30	<p>Tameside MBC must appoint a social worker from the fostering team onto the Panel.</p> <p>Tameside MBC must ensure that the Panel does not meet when it is inquorate.</p> <p>Tameside MBC must not place a child with carers prior to approval at Panel, unless placed under Emergency Fostering Regulations.</p> <p>Tameside MBC must ensure that the panel advisor undertakes an effective quality assurance role.</p>	30/7/04
20	38	FS32	Tameside MBC must ensure that kinship carers who have children placed with them under Emergency Fostering Regulations are assessed and approved within 6 weeks.	30/7/04
21	17	FS32	Tameside MBC must continue with plans to support kinship carers and continue with the audit of files.	30/7/04
22	28	FS32	Tameside MBC must establish the legal status of all kinship carers.	30/8/04

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	FS7	Tameside MBC should review the policy of payment to carers for the provision of hobbies and interests.
2	FS8	Tameside MBC should ensure that all matching decisions are recorded on file.
3	FS8	Tameside MBC should ensure that placements made in an emergency do not become long term placements without due consideration to the original matching considerations.
4	FS16	Tameside MBC should continue to monitor the sufficiency of admin staff within the team.
5	FS20	Tameside MBC should ensure that staff receive regular supervision, that the records are kept are consistent and that any practice decisions are clearly recorded.
6	FS24	Tameside MBC should provide carers with the means to store paper work safely and securely.
7	FS26	Tameside MBC should continue with plans to provide all staff with access to computers.
8	FS29	Tameside MBC should ensure that there is equality in the payments made to carers and kinship carers.

*** Note:**

You may refer to the relevant standard in the remainder of the report by omitting the two-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	3
Survey of placing authorities	YES
Foster carer survey	YES
Foster children survey	YES
Checks with other organisations and Individuals	YES
• Directors of Social services	NO
• Child protection officer	YES
• Specialist advisor (s)	NO
• Local Foster Care Association	NO
Tracking Individual welfare arrangements	YES
• Interview with children	YES
• Interview with foster carers	YES
• Interview with agency staff	NO
• Contact with parents	NO
• Contact with supervising social workers	NO
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of foster carer training	NO
Observation of foster panel	YES
Inspection of policy/practice documents	YES
Inspection of records	YES
Interview with individual child	YES
Date of Inspection	02/03/04
Time of Inspection	09:00
Duration Of Inspection (hrs)	35

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 for the fostering service was presented for the inspection and has been substantially reviewed since the last inspection. This now meets Regulation and NMS and is due to be formally approved by the elected members on 21st April 2004.

The manager reported that the statement of purpose is regularly updated and subject to review and monitoring. It was reported that there are plans to make this information available on Tameside MBC's website.

The staff reported that they were aware of the document, they had been consulted about the contents and that it reflects practice.

Since the last inspection work has been undertaken on the children's guide. This does not include information about CSCI (or formerly NCSC) and how young people could make a complaint to this organisation. The guide is not suitable for all young people, particularly children under eight, those with communication difficulties and those for whom English is not their first language. The team has plans in place to develop alternative guides, using CD's and other mediums. This work should continue.

Tameside MBC must ensure that the children's guide is revised to meet the Regulation and NMS.

Some of the young people who were interviewed for the inspection reported that they had received a children's guide and had found it helpful.

During the inspection the service appeared to be working in line with the statement of purpose.

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?
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Since October 2003 the manager of the fostering team has been promoted on a temporary basis to the position of unit business manager. The deputy manager of the fostering team had been promoted, also on a temporary basis, to the role of manager. Immediately prior to the inspection the management arrangements had changed and on the day of the inspection two deputy managers were managing the service. However the unit business manager remains involved in the service and supervises the two deputy managers on a regular basis, both formally and informally.

All three managers have appropriate social work qualifications and relevant experience. There are plans in hand for the permanent manager to undertake NVQ Level 4 in management during 2004.

During the inspection some deficiencies were noted in relation to the management of the service. This related to the non-availability of the some records, in particular, the record of complaints and staff meeting minutes.

There were some procedural errors in relation to the Panel business, which had been overseen by one of the deputy managers. (See NMS 30).

The staff who were interviewed and the chair of the Panel indicated that, in their opinion, there was some management weakness and, whilst loyal to the deputy managers, indicated that it was an unsettling time. The staff team are competent and experienced workers, require minimal supervision and were providing a good service. However, the present management arrangements cannot continue for any further length of time.

Tameside MBC must make permanent effective management arrangements for the service.

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

The personnel files for the permanent manager and two deputy managers were inspected. They were found to meet the Regulation and NMS. There was evidence that the permanent manager and one deputy manager, who had been appointed in the last two years, had been appointed using an appropriate recruitment and selection process.

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

A system to meet Regulation 42 and Schedules 7 and 8 has been created but had not been implemented thoroughly. This was confirmed by the deputy managers. Tameside MBC must ensure that this system is implemented and that the service is regularly monitored. This was a requirement of the last inspection.

However, there was evidence that some monitoring activity took place, in particular, in relation to the monitoring of referrals against the availability of places for children and young people. This system was very effective and contributed to the development of the service. In addition to this, performance targets and measures are well developed. There are systems in place for many aspects of management monitoring.

The financial systems were not inspected.

There was evidence that at least one incident had occurred which had not been notified to the NCSC. Tameside MBC must ensure that there is a system in place for the notification of significant events to CSCI (formerly NCSC) and other authorities within the specified timescales. This was a requirement of the last inspection.

Evidence was found that a child had been placed with a staff member of social services, who is now acting as a carer. This had been approved by the head of service. However, this is in contravention of Regulation 20(6)(a). Tameside MBC must create a policy regarding this Regulation and indicate which staff employed by Tameside MBC can be considered as carers.

Number of statutory notifications made to NCSC in last 12 months:	1
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.	1
Serious complaint about a foster parent.	1
Initiation of child protection enquiry involving a child.	0
Number of complaints made to NCSC about the agency in the past 12 months:	0
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?	2
<p>On the day of the inspection it was evident that the service was not being managed effectively and efficiently, although all staff were committed to providing a good service.</p> <p>The job descriptions of the team manager and deputy team manager were submitted for the inspection. They are detailed and provide appropriate information. However, given the present arrangements, the managers were not working completely to the job descriptions.</p> <p>Given the temporary nature of these arrangements, the lines of accountability and delegation were not clearly defined in practice. (See NMS 2).</p>		

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?
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Foster carers' homes were visited by the inspector and were found to be well furnished and decorated and maintained to a good standard of cleanliness and hygiene. The carers presented as providing a good service and as people who were interested in providing good outcomes for young people. The bedrooms inspected were found to be suitable and provided appropriate accommodation. The young people who were interviewed reported that they were satisfied with their accommodation and the service they were receiving.

The Fostering Service has a comprehensive guidance document on the supervision of foster carers. The staff were clear of their expectations of carers in providing an appropriate service, which promotes and supports the welfare of young people placed.

Unannounced visits are undertaken by supervising social workers and staff reported that they found this a useful and informative process. One social worker stated that it provides 'a snap shot of family life' not normally observed during scheduled visits.

Health and safety checklists are completed and are on the foster carers' files. Foster carer training covers health and safety issues and there is written guidance on the carers' responsibilities. The staff could outline what they check when undertaking the visit and good practice was described.

The written guidance for carers includes advice on where to go for specialist services.

The foster carers interviewed by the inspectors were aware of the Commission's role in inspections and were open and welcoming.

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

The manager, staff and records confirmed that diversity and anti-discriminatory practice are covered in foster carer training, both at the pre-approval and post-approval stages. Records of training indicated that this is carried out. Principles of promoting equality and valuing diversity are clearly stated in many of the policies and procedures of the fostering service.

The managers and staff have undertaken many initiatives, with good results, to recruit carers from diverse communities, to recruit carers who can look after children with disabilities and complex need and for carers who can care for young people requiring short term care in an emergency and this is work acknowledged. However, all staff recognise that further work is required and this should continue.

In discussions with staff, good practice was described in relation to meeting the needs of all children, in particular, in relation to children with disability and children from ethnic minority groups, from the point of arranging the placement to continuing to meet needs whilst accommodated. There was evidence that where a child's needs could not be met completely within the placement then additional services were brought in.

The service has a range of resources to help carers with particular needs and staff were clear of other services available to themselves and carers within the community.

In particular, good practice was observed in relation to the placement of an asylum seeker where a placement was being supported with appropriate contact arrangements within another community. There was evidence of good support and co-operation between the placing social worker, supervising social worker and carer.

There was evidence of co-operation between the manager of the Family Link Scheme and the service to meet the needs of children with disabilities.

There was evidence that the carers are encouraged to develop the hobbies and talents of the young people placed. However, some carers directly, and others via the questionnaires, indicated that fees for some hobbies are not provided for adequately, although carers are expected to facilitate this. Tameside MBC should review its policy of the provision of monies available for the pursuant of hobbies and regular activities.

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

There was evidence from discussions with the manager, staff and from inspection of records and observations during the inspection that a high priority is given to making appropriate matching. All staff were aware of the need to make an appropriate match and the difficulties encountered if an inappropriate match is made.

However, all managers and staff recognise that there will occasionally be a time when a placement has to be made which is not entirely suitable, due to the urgency of the placement and lack of placement choice. All staff recognise that despite their highly effective recruitment campaign there is still an insufficient number of carers to meet the demands of the service.

Wherever possible, the staff try to obtain sufficient information in order to make a placement. However this is not always possible, as placing social workers do not always provide information, including referral information and LAC documentation. The majority of carers commented that they have insufficient information about the young people they care for and the reluctance on the part of placing social workers to give this information to carers.

Tameside MBC must ensure that the fostering staff and carers have all available information in order to make an appropriate placement and provide carers with all the information they require in order to care for the child in placement appropriately.

The staff are aware of the need to record all the decisions made in relation to matching and recognise the importance of this for looked after children in later life. However, more work should be undertaken to record matching processes on files.

Matching reports are written, normally by the placing social worker, for children who are to be placed with long-term carers and considered by Panel. There was evidence of this on file.

The service uses the LAC placement agreement as the foster placement agreement, as required by Regulation 34 and Schedule 6. However, this document is not always in place and not always completed in full and does not take into account specific matching arrangements. Tameside MBC must review the policy of using this document as the foster placement agreement. This was a requirement of the last inspection.

Staff, carers and young people in relation to admission to a foster carer described good practice when it is a planned placement. However, this was not universally reported in relation to emergency placements.

There was also evidence that some emergency placements had become long-term placements and that in these cases, the matching considerations had not been as thorough. A few carers reported on their questionnaires comments similar to 'one young woman came in an emergency for two nights and stayed 11 months'.

Tameside MBC should ensure that placements made in an emergency do not become longer-term placements without due consideration to the original matching reasons.

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
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Tameside MBC's policy on child protection has been updated and meets Regulation and NMS.

There is an emphasis in foster carer training on child protection issues and safe caring practices. The training that carers undertake is documented on their files, as is the content of supervising social workers' visits which demonstrate that protection of children and young people is regularly discussed and monitored. The carers interviewed demonstrated a knowledge of safe caring strategies.

There is an appropriate document on safe caring guidelines for foster carers. The family policies are on the individual foster carers' files.

Managing behaviour is part of the mandatory training for carers and the Local Authority has a policy on corporal punishment. Foster carers were clear about appropriate punishments and sanctions. This is clearly outlined on the foster care agreement. Young people who were interviewed reported that, in their opinion, sanctions were fair and acceptable. It was reported that carers would be trained in the use of restraint if it were found to be appropriate. However this was quite rare.

Records of allegations of neglect or abuse of a child in foster care, bullying and absence without authority, need to be centralised to enable the manager to evaluate and monitor incidents, as part of the monitoring of Schedule 7. (See NMS 4).

The policy on anti-bullying has been revised and meets the NMS. Anti-bullying strategies are included in foster carers' training and supervision.

The absence without authority policy has been revised and meets Regulation and NMS.

It was reported that there is no clear policy on ensuring that all young people are visited regularly and seen alone. This is of particular importance when there is no placing social worker. All of the young people reported that they had never been interviewed without their carer by either the foster service staff or placing social worker. This is not acceptable and the foster service staff did not regard this as their role.

Tameside MBC must create a system for ensuring that young people are visited regularly in line with Regulation 35.

Percentage of foster children placed who report never or hardly ever being bullied:	100	%
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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

The fostering service has a policy on contact, which was known to staff. The fostering service guidelines for carers include suggestions for encouraging young people to maintain contact and outlines the need for foster carers to record details of contact. Carers were clear about their roles and responsibilities in regard to contact. The staff reported that they discuss contact arrangements during supervision.

The positive promotion of contact is monitored through supervision of carers, training, statutory reviews, carers' annual reviews and visits to the foster home. Placing social workers are asked to comment on contact in the post-placement questionnaires.

All young people who were interviewed were satisfied with the present contact arrangements.

Contact arrangements for some kinship carers are clearly a difficulty but these arrangements had been made by the placing social workers and not the fostering staff. (See NMS 32).

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?**

2

The young people who were interviewed reported that they were regularly consulted about their daily lives by their carers, including matters relating to daily living and longer term projects like holidays.

Some carers commented that they had been consulted via their supervising social worker, statutory review chair and during training and support groups. All commented that this had been a helpful exercise.

The service has plans to introduce a Foster Carer Forum from March 2004 to consult more formally and regularly with carers.

From 1st April 2004 the service is to launch a new service called the LAC Support Team which will provide support to carers and looked after children and be accessible via phone, including an out of hours service.

Not all of the young people who were interviewed knew how to make a complaint and that they could contact inspectors from CSCI (formerly NCSC). This information is not supplied in the children's guide. However all the young people could outline a range of people they could contact in the event of them requiring outside help or support.

Tameside MBC must amend the children's guide, to include information about how to make a complaint CSCI. Tameside MBC must ensure that placing social workers or fostering service staff regularly check with carers and young people that they are aware of the complaint procedure.

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
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The Local Authority has a LAC nurse and a specific child and adolescent mental health worker with whom the fostering service has close links. A designated worker on the fostering team co-ordinates health information for dissemination to Foster Carers. There was evidence of close links with the health services associated with looked after children.

Health and hygiene and first aid training is available to foster carers. The fostering service makes clear to foster carers what is expected of them in terms of health care and health promotion. Staff reported that they regularly discuss health matters with carers and, in particular, healthy lifestyles, diet and nutrition.

Records are kept by carers of illnesses, accidents and injuries of young people in their care. As stated earlier in this report, there is a need to monitor these activities under Schedule 7.

The staff outlined a recent initiative to encourage young people to attend their boarding out medicals with the use of sports vouchers. The staff reported that these had been well received by young people. In April 2004 the service is launching a campaign on the promotion of children's health to include physical health, dentistry promotion, healthy eating and attending health assessments.

It is important that staff regularly check when making placements that all the health information required by carers, for example, immunisation records, are available to carers or that these are accessed. All carers should have a written health care record for each child in their care. Very few carers had written health care plans or completed action and assessment records and the LAC documentation, which was inspected, contained brief information in relation to health care needs.

Tameside MBC must ensure that carers have all available information for carers in relation to the health care needs of the young people in their care and where this information is not available it is accessed. This matter was raised at the last inspection.

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
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Supervising social workers and foster carers could give examples of good practice in relation to meeting the education needs of young people in foster care.

Staff reported that they routinely ask carers about the education of the young people in placement and that they are aware of homework, school attendance, school events and open days. One carer reported that she is a school governor at the school where her fostered children attend.

The young people reported that they are supported in their education and carers who were interviewed were aware of educational progress.

Foster carers have attended workshops on numeracy and literacy.

The fostering service has strong links with the LAC Education Resource Team and the multi-agency LAC Education Steering Group.

All carers have access to computers for their own homes for the use of the young people.

One of the members of the Panel is from the Education Department and educational needs were highlighted during the discussion.

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
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The authority's Leaving Care team manager provides specific training to carers and it was reported that there are close links with this team.

Information on independence skills training is held in the foster carers' resource library in the fostering unit. Guidelines for carers include, for example, helping young people to manage their own money and personal care. Other sensitive issues are included, such as when it may be appropriate to allow a young person to have a house key and overnight stays at friends' homes.

The manager from the leaving care team is a member of the Panel and highlights the needs of the young people leaving care.

Some carers highlighted, as an important part of their work as carers, preparing young people for independent living.

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

A sample of personnel files were inspected and it was obvious that for more recent appointments, the policy on staff recruitment and selection had been followed. There was evidence of interviews being held, the collation of referees and staff being given adequate information about the post prior to making an application.

The staff personnel files do not completely comply with Regulation 5.7 and Schedule 1 and these must be revised. A copy of the Schedule was provided to the staff member in the personnel department.

Tameside MBC must ensure the personnel records include all the information outlined in Schedule 1 of Regulations.

All staff have a current CRB Disclosure certificate or have applied for one. These are retained by the head of service and the reference number is recorded on the staff member's file.

All social workers (with the exception of one) who are involved in the assessment and support of foster carers have a suitable professional qualification. All have knowledge and skills in family placement. Appropriately qualified and experienced managers supervise all staff.

The staff turnover has been limited in the last three years and there has been no need to recruit additional staff, other than a deputy manager in the last 12 months, which is a new post.

Total number of staff of the agency:

11

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

0

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?

3

At the time of the inspection the team were experiencing some difficulties in relation to lines of accountability and general organisation. This was described as 'unsettling'. (See NMS 2).

The staff who were interviewed were clear about their role and the tasks they carry out. They manage their own workloads and indicated that they were competent to undertake the task.

The service has systems in place to monitor workloads and allocate new work, for example, assessment of new carers. It was reported that there would be scope to appoint additional staff if the workloads of staff became unmanageable.

It was reported that as a result of the effective recruitment strategy, assessments of new carers is a priority for the staff and they are continuing to explore other models to improve practice.

Copies of policies, procedures and good practice guidelines are held in the fostering unit and are readily available to staff.

The service does not use agency staff.

There are opportunities for staff and carers to undertake ongoing training and development.

Since the last inspection there has been an overall improvement in the level of administrative support to the staff. However, the staff reported that this remains insufficient and, in particular, expressed dissatisfaction about the availability of typists for large reports.

Tameside MBC should continue to monitor the sufficiency of admin staff within the team.

The administrative staff were clear on the procedure for dealing with enquiries from prospective carers.

The staff reported that relationships between placing social workers and themselves are generally good and the team has a good reputation for providing reliable carers who deliver a good service.

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?

4

The service has an adequate number of staff with appropriate qualifications and experience to undertake the task. They presented as loyal, committed, enthusiastic and competent to carry out the task.

A number of the staff have PQ and other relevant qualifications and are generally level 3 workers. Staff reported that in the event of staff sickness and leave they cover for each other and from observations throughout the inspection, a general camaraderie was observed with shared tasks and general support for each other observed.

The team are supported by administrative staff who were well aware of the needs of the service and presented as efficient and competent.

The service has a strong, creative, focused recruitment strategy which was well known to all staff. The team has created a 'strong identifiable brand' for the recruitment of carers which is used consistently throughout all the advertisements for carers, which are displayed across the Borough, on various mediums including, banners attached to railings, posters and buses. The campaign has been successful to date, with the recruitment of 30 new carers to the service over the last 12 months.

The team are aware of the needs of the service and are focused on delivering a more targeted campaign over the next 12 months to recruit carers who can work, in particular, with sibling groups and difficult teenagers.

The assessment process is thorough and effective with appropriate safeguards to eliminate unsuitable candidates at an early stage but is supportive to those carers who wish to proceed to the assessment stage. It was reported that it is very rare for prospective carers to proceed to the assessment stage if there are any doubts by the staff member or carer.

The team currently use a combination of the BAAF Form F and the Fostering Network Competency based assessment and the assessment framework material. For kinship carers the assessment is based more on the assessment framework model and concentrates more on the applicant's ability to parent. This would seem to be appropriate and a creative use of available material. The deputy manager who has lead responsibility for assessments was clear about the process and the need for a robust system of assessment. She was clearly up-to-date with current practice and thinking in relation to the assessment of carers.

The assessments which were inspected were found to be thorough, well written and met the NMS and Regulation.

With the exception of one, all carers who were interviewed or returned questionnaires indicated that they were satisfied with the assessment process they had undertaken.

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
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The staff and carers considered, generally, that Tameside MBC was a fair employer. Some carers made comments about payments but generally were satisfied.

There is an out of hours service for carers and general support systems. (See NMS 21).

There is a health and safety policy for carers and staff.

There is a whistle blowing policy which is known to staff, and carers who were interviewed were aware of what they would do if they have concerns.

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
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There are programmes in place for the training of staff. The team has links with Salford University for the delivering of some of the training and development opportunities. In the previous 12 months staff had also taken part in a team-building day and the staff use staff meetings for the sharing of practice developments and other matters.

Tameside MBC has an appraisal scheme in place and all staff had received an annual appraisal in the previous year. The standard of the appraisals varied, but there was evidence that training and developmental opportunities were identified during the appraisal and staff were given opportunities to meet these needs. Letter work could be carried out to ensure that the standard of staff appraisals is consistently achieved.

The staff had undertaken training on legislative changes and were aware of the Regulations and NMS.

There was evidence that training is evaluated and updated regularly and meetings are held with Salford University to evaluate the effectiveness of all training available.

There is joint training for staff and carers and, in particular, the pre-fostering training in delivered by carers and staff jointly.

Within the training department of Tameside social services one training officer has responsibility for the training needs of all staff who work with looked after children.

Standard 20 (20.1 - 20.5)**All staff are properly accountable and supported.****Key Findings and Evidence****Standard met?****2**

All staff have job descriptions and were clear of what was expected of them. They are supported by a range of appropriate policies and procedures which are subject to regular review.

All staff receive supervision from the deputy managers who in turn are supervised by the permanent manager. The standard of the supervision of staff varied, with some receiving regular supervision which was well recorded, with evidence of decision making clearly shown. Other notes inspected were found to contain less detail and did not provide adequate detail. One member of staff had received no supervision in the previous month. Tameside MBC should ensure that all staff receive regular supervision, the standard of supervision is consistent and that records clearly indicate when practice decisions are made.

It was reported that staff meetings are held regularly, however the minutes from these could not be found. (See NMS 2).

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**

The service has a clear strategy for working with and supporting carers. The majority of carers confirmed that they were well supported by the fostering staff. However there was general criticism directed at placing social workers, with examples given of young people having no social worker for many weeks, calls not being returned and help not provided when required. Tameside MBC must ensure that each child in placement has a social worker and that they keep in regular contact with carers as required.

The carers confirmed and the records indicated that carers receive regular supervision, training and development opportunities, general support and advice, that their calls are returned and that the system of annual reviews is supportive.

The arrangement for the out of hours service was being revised and on 1st April 2004 the responsibility for this service would move to the LAC Support Team.

Some carers commented that they feel that carers should be offered more respite care opportunities.

All initial annual reviews and those requiring any change in approval, or where there are concerns, are taken to Panel. Subsequent reviews are considered by the team manager.

The manager reported that, in her opinion, 95% of all annual reviews are undertaken at the appropriate time. The Panel chair indicated that, in his opinion, not all initial annual reviews are coming to Panel. Tameside MBC must ensure that all annual reviews are held within appropriate timescales and that all initial reviews are taken to Panel.

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

From the records inspected it was clear that carers receive regular formal supervision and that carers are sent a copy of the notes taken. Each carer had a named member of staff who was known to them.

It was reported that the foster care agreements had been revised recently to meet the Regulations. However very few foster care agreements could be found on carers' files and the carers who were interviewed were unaware of the status of the document and the majority could not find them. Tameside MBC must ensure that all carers have Foster Care Agreement in respect of each child placed.

The service has foster care handbook which is detailed and provided appropriate information. This is subject to regular review and update.

The service has re-launched the system for support groups and these have proved to be successful and well attended. Carers who attended them reported that they were helpful and enjoyable.

The foster carers' complaints policy and procedure does not include information for carers about the CSCI (formerly NCSC) and how they can make a complaint should they wish to.

Two carers expressed dissatisfaction about the complaint process and one indicated that they did not know that they could make a complaint on behalf of a child.

The record of complaints and records of allegations against carers was found to be poorly maintained and did not record in sufficient detail the outcome of any complaint or the action taken.

Tameside MBC must amend the complaints procedure to indicate that carers can complain to CSCI (formerly NCSC) should they wish to.

Tameside MBC must ensure that the record of complaints is kept up-to-date and records the process of investigation and the outcome.

Information about the procedures to deal with investigations into allegations against carers is known to carers and meet the NMS.

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?

4

The service's foster care training strategy includes the commitment to equip carers with the skills and knowledge necessary to provide a high quality of care. There are five stages to the training:

1. Pre-approval training which takes place six times a year and include evenings and weekends to improve accessibility.
2. Induction training.
3. Foundation training which is commissioned from Salford University. The unit has a target for foster carers to complete this stage of training in their first year of fostering.
4. Continued professional development.
5. NVQ level 3 in Caring for Children and Young People.

The training content is comprehensive, of a high standard and is clearly geared to adult learning principles. Foster carers expressed satisfaction with the training which they described as interesting, relevant and useful.

Observation of carers' attitudes and learning during the pre-approval training is included in the assessment report.

Foster carer training is well developed. The calendar of training is planned ahead. Attendance is monitored and training undertaken and needed is included in foster carers' reviews.

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

The case files of ten children and young people were inspected. These were located in the social work offices and maintained by the placing social worker. The content of the files varied, with some good practice noted. Not all the young people had LAC documentation and matching reports where they had been placed with long-term carers. However, there were copies of Panel minutes, matching reports and detailed chronology on other files. In particular, in the children's files placed with kinship carers there was a lack of detail relating to care proceedings and the decisions taken regarding their placement with present carers.

It would not be possible for all young people in future life to understand, from reading these records, why they were in care and the decisions taken about their placements.

Tameside MBC must ensure that appropriate records for young people are maintained.

Carers generally complained about the lack of information given to them about the young people in their care.

The carers who were visited generally had a lack of paperwork and did not generally understand the status of the various documents. These were not generally stored in appropriate equipment.

Tameside MBC must work with carers so that they understand the relevance and importance of all relevant documents and should provide them with the means to store all paperwork efficiently and safely.

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
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The fostering service keeps administrative records which comply with the Regulations except where otherwise detailed in this report.

Permanent, secure and separate records for carers are kept which can be seen by foster carers. Records for the young people in foster care are kept in other parts of the department and these were made available for the inspection.

Confidential records are stored securely.

At the time of the inspection the storage system for the files was being updated and integrated into a more efficient system. This work was being led by one of the administrative staff who was clear about the process she was undertaking.

Number of current foster placements supported by the agency:	179
Number of placements made by the agency in the last 12 months:	246
Number of placements made by the agency which ended in the past 12 months:	108
Number of new foster carers approved during the last 12 months:	34
Number of foster carers who left the agency during the last 12 months:	7
Current weekly payments to foster parents: Minimum £	163.51
Maximum £	367.10

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?

2

At the time of this and the previous inspection, the premises were undergoing extensive refurbishment and there was considerably more work planned to improve the facilities. The staff were working in temporary accommodation and a further move was planned in the future. The room they were using was secured at night, but open to other visitors during the day, as was observed during the inspection. Tameside MBC must continue with plans to provide appropriate accommodation for the service.

The Fostering Service has dedicated administrative staff who are clear about their roles and responsibilities. They outlined the database which has been designed to allow all training, annual reviews and approval status of foster carers to be logged and monitored. The administrative staff have a manual system for time tracking the approval process for foster carers.

The staff indicated that they would benefit from having additional computers as not all staff currently have access to them. Tameside MBC should continue with plans to provide computer access for all staff.

The Manager, administrative staff and foster carers reported that payments to foster carers are efficiently carried out.

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?
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	9
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Not applicable for a Local Authority

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?
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	9
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Not applicable for a Local Authority Service.

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?

2

There is written guidance for foster carers on allowances and fees and what they cover. Foster carers reported that these were clear and explicit and that they knew how to access funding when necessary. However, there are discrepancies in payments made to kinship carers which is not consistent with those of other carers.

Tameside MBC should ensure that there is a consistent equal payment scheme for all carers.

Fostering Panels

The intended outcome for the following set of standards is:

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

Standard 30 (30.1 - 30.9)

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

Key Findings and Evidence

Standard met?

2

A meeting of the fostering panel was observed. The minutes of the previous Panels were inspected and an interview was conducted with the Panel Chair. One of the deputy managers acts as panel advisor.

The Panel has a good number of independent members and has included access to medical advice, education and leaving care. One of the members had previously been in care as a child.

The Panel Chair is a well-experienced, independent social work practitioner who also chairs the Adoption Panel. He demonstrated his appropriate skills and experience on the day of the inspection. The Panel chair was aware of the needs of the service and the range of carers required to meet the needs.

The Panel has appropriate policies and procedures which included information on decision making when all members of the Panel are not in agreement.

The head of service is the decision maker and her comments are included on the minutes. There was evidence that the minutes are thoroughly read and that not all recommendations are observed. There was evidence of the decision maker asking for additional information. This is a good example of a quality assurance process.

Carers are invited to attend Panel and are seen prior to and after their attendance by the Panel chair who discusses the process and outcomes. Panel members treated carers sensitively.

However some discrepancies were noted.

The membership of the Panel does not meet the Regulations, in that, there is no social worker from the fostering team.

The Panel had met in February and conducted business when it was not quorate.

A child had been placed with a member of Tameside's staff who was now acting as a carer.

A child had been placed with carers prior to their approval at Panel and not under Fostering Regulations.

There were a number of errors on the paper work presented at Panel and the Panel chair indicated that, in his opinion, there should be a greater attention to detail at manager level prior to paperwork coming to the Panel. In particular, one report had been signed by a deputy manager which clearly was not ready to come to Panel and caused some distress to the carers, as this matter could not be considered.

During the observation the Panel had to deal with some very difficult and sensitive issues with carers which they did with diplomacy and skill, with all Panel members trying very hard to convey messages to carers but keeping the interests of children paramount. Some of this distress could have been avoided if the Panel advisor had undertaken her role more effectively and efficiently.

Tameside MBC must appoint a social worker from the Fostering team onto the Panel.

Tameside MBC must ensure that the Panel does not meet when it is inquorate. All business submitted to the February Panel must be re-submitted.

Tameside MBC must not place a child with carers prior to approval at Panel unless they are placed under Emergency Fostering Regulations. (Regulation 38).

Tameside MBC must ensure that the Panel advisor undertakes a quality assurance role and does not sign papers which are not appropriate to be considered at Panel.

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?	3
<p>The manager of the family link scheme from the children with disabilities team was interviewed and a family link carer was visited during the inspection.</p> <p>The Family Link Scheme, which provides short breaks for children with disabilities, is managed separately from the general pool of foster carers in Tameside. This scheme is managed by a dedicated worker and he is managed within the children with disabilities team, whose Manager holds the budget for the scheme. At the time of the inspection there were 23 approved carers and the manager reported that this number is steadily increasing.</p> <p>Referrals to the scheme are made through the children with disabilities resource panel following an assessment of need.</p> <p>Family Link carers have access to the same training as mainstream foster carers and, in addition, specific skills are addressed through clinical skills training. Where appropriate, individual training is provided to equip carers to meet the specific needs of individuals. The majority of carers recruited to this scheme already have skills and experience of working with children with disabilities.</p> <p>The manager of the scheme contributes to the training of all Foster Carers and it was clear to the inspector that the teams work together to raise disability awareness throughout the Fostering Service.</p> <p>There are strong links between the two services and recruitment is a joint activity.</p> <p>The system for payment of the family link carers is separate from that of the Fostering Unit and it was reported that payments are made promptly on a fortnightly basis.</p> <p>The scheme uses the Fostering Network format for assessment which is undertaken by the manager of the family link service and is presented to the fostering panel for consideration. Terms of approval are specified. It was reported that carers were reviewed annually and any allegations or serious complaints would be taken to panel. Evidence from the file indicated that supervision and visits and general support are carried out regularly.</p>		

The Fostering Team is developing a team of carers called 'family first' carers who will provide short term care in an emergency. The aim of this service to encourage young people to maintain contact with birth parents and a rehabilitation home quickly if this is the most appropriate plan. The service aims to recruit more carers to this scheme over the next 12 months from specified communities. The scheme has a dedicated worker.

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

Since the last inspection a member of staff has been appointed to work with kinship carers. This work has been transferred into the fostering team. A thorough audit of all carers and files has been undertaken. This has highlighted where there is a need for support for the carers and where there are discrepancies, for example, some children were found to be placed under different legislation to meet their specific need. More work is required in this area and is ongoing.

Some young people are placed with kinship carers under Emergency Regulations prior to the assessment of carers and this would be appropriate. However, the assessment and approval of carers is not being consistently carried out within the following six weeks, as per Regulation. Tameside MBC must ensure that kinship carers who have young people placed with them under Emergency Regulations are assessed within six weeks and approved at Panel, unless this develops into another form of care and no payment is made.

Kinship carers are approved using material based on the assessment framework and some of the competencies from the fostering network model and considers principally the issue of the applicants ability to parent, promote the interests of the young people and keep them safe. This would seem appropriate. The deputy manager confirmed that the same standards apply to that of mainstream carers.

The home of one kinship carer was visited and the file for the young people placed were inspected. The file highlighted various discrepancies with the care planning and the carers who were providing an excellent standard of care were uncertain of their legal status. This matter was raised by other kinship carers who completed the questionnaires.

Tameside MBC must continue with their work to provide appropriate support to kinship carers.

Tameside MBC must establish the legal status of all their kinship carers.

PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

A Lay Assessor was not used on this occasion.

Lay Assessor NA **Signature** _____

Date NA _____

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 2nd March 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

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

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 7th July 2004, 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

Provider has declined to provide an action plan

Other: <enter details here>

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 _____ of _____ confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.

Print Name _____

Signature _____

Designation _____

Date _____

Or

D.3.2 I _____ of _____ am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:

Print Name _____

Signature _____

Designation _____

Date _____

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