

inspection report

FINAL REPORT Fostering Services

Pathway Care (Midlands) Ltd

7 The Courtyard
Buntsford Gate
Buntsford Drive
Bromsgrove
B60 3DJ

7th March 2005

Commission for Social Care Inspection

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

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

The role of CSCI is to:

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

Inspection Methods & Findings

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

The 4-point scale ranges from:

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

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

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

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

FOSTERING SERVICE INFORMATION

Local Authority Fostering Service?

NO

Name of Authority

Address

Local Authority Manager

Tel No:

Address

Fax No:

Email Address

Registered Fostering Agency (IFA)

YES

Name of Agency

Pathway Care (Midlands) Ltd

Tel No

01527 834934

Address

7 The Courtyard, Buntsford Gate, Buntsford Drive,
Bromsgrove, B60 3DJ

Fax No

01527 889999

Email Address

mail@pathwaycaremidlands.
org.uk

Registered Number of IFA

E040000366

Name of Registered Provider

Pathway Care Ltd

Name of Registered Manager (if applicable)

Currently vacant

Date of first registration

3rd February 2004

Date of latest registration certificate

7th October 2004

Registration Conditions Apply ?

NO

Date of last inspection

17.11.03

Date of Inspection Visit		7th March 2005	ID Code
Time of Inspection Visit		09:00 am	
Name of Inspector	1	J Dunster	
Name of Inspector	2	K Ward	
Name of Inspector	3		
Name of Inspector	4		
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)			
Name of Establishment Representative at the time of inspection			

Introduction to Report and Inspection

Inspection visits

Description of Fostering Service

Part A: Summary of Inspection Findings

Reports and Notifications to the Local Authority and Secretary of State

Implementation of Statutory Requirements from last Inspection

Statutory Requirements from this Inspection

Good Practice Recommendations from this Inspection

Part B: Inspection Methods & Findings

(National Minimum Standards For Fostering Services)

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

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

Part D: Provider's Response

D.1. Provider's comments

D.2. Action Plan

D.3. Provider's agreement

INTRODUCTION TO REPORT AND INSPECTION

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

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

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

The report will show the following:

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

This report is a public document.

INSPECTION VISITS

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

BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

Pathway Care is an independent fostering agency, established in 1996 as a limited company. The company has four regional offices in Cardiff, Carmarthen, Bristol and the Midlands. The Cardiff office retains senior management, finance and human resources functions.

Pathway Care (Midlands) Ltd was formed in July 2003 and first registered in February 2004. (For the remainder of this report “the agency” or “the fostering agency” should be taken to refer to Pathway Care (Midlands) Ltd.)

Pathway Care’s statement of purpose states that the agency specialises in the placement of difficult to place children, sibling groups, mother and baby assessments, planned and emergency placements, assessment, short term, bridging and long term placements. The agency also undertakes recruitment, assessment, support and training of foster carers.

At present the agency has 23 fostering households and 42 children in placement. The children range from 11 months to 16 years in age. 32 of the children are placed as part of sibling groups.

The agency relocated to new premises in November 2004. The modern building provides office accommodation and meeting space for support groups, training etc.

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.)

The inspection was undertaken over a two-week period in March 2005. It involved inquiries at the fostering agency's office, questionnaires to relevant parties, meetings with foster carers at their homes and at a support group meeting. We also met with foster and birth children. The inspectors were grateful to all who gave of their time and energy to assist the inspection and, in particular, to carers and children.

The fostering agency has faced a challenging year. The assimilation of a large number of foster carers into Pathway Care (Midlands) Ltd from another agency has demanded time and energy. The loss of the registered manager has also had implications for the agency. In these circumstances the inspection identified a large number of regulation and good practice issues which the agency will need to attend to.

The fostering agency should be able to address most of these issues without difficulty and with prompt and robust action this branch of Pathway Care should be able to match the regulatory achievements of its other offices.

STATEMENT OF PURPOSE (Standard 1)

This standard was nearly met.

The statement of purpose and the children's guide need some amendments to comply with this standard.

FITNESS TO PROVIDE OR MANAGE A FOSTERING AGENCY (Standards 2-3)

These standards were not assessed in the absence of a registered manager.

MANAGEMENT OF THE FOSTERING SERVICE (Standards 4-5)

Of the two standards assessed, neither was met.

The fostering agency needs to further develop and utilize its systems for monitoring. The agency needs to employ a registered manager.

SECURING AND PROMOTING WELFARE (Standards 6-14)

Of the nine standards assessed one was met, six were nearly met and two were not met.

The foster homes visited were warm, homely and child-centred. Foster carers in general promote contact and ensure children's health and educational needs are met. The agency provides a training programme for carers. The fostering agency needs to carry out all annual checks on carer households. The matching process should be more robust and placements should never take place without the correct exemption certificate in place. Education and leaving care plans must be used consistently. It is essential that full child protection policies and guidelines are developed and known by staff and that appropriate

safe caring policies are put in place in every fostering household.

RECRUITING, CHECKING, MANAGING, SUPPORTING AND TRAINING STAFF AND FOSTER CARERS (Standards 15-23)

Of the nine standards assessed one was met, seven were nearly met and one was not met.

The fostering agency has well developed recruitment procedures which should be followed. Contingency arrangements should be put in place to protect the supervision needs of staff and carers. A training programme is provided. While it provides a good range of courses a few gaps were identified and its effectiveness should be evaluated fully. The agency needs to develop a more permissive complaints system. The agency considers the needs of birth children and is to establish a support group for them.

RECORDS (Standards 24-25)

Of the two standards assessed both were nearly met.

The fostering agency has a good record of obtaining local authority documentation. Records are kept securely and in accordance with Data Protection legislation. Files which have shortcomings in content and quality should be corrected in accordance with a policy on the purpose, content and format of files. The agency needs to clarify the role of foster carers in life story work.

FITNESS OF PREMISES (Standard 26)

This standard was fully met.

FINANCIAL REQUIREMENTS (Standards 27-29)

Of the three standards assessed all were met.

The fostering agency operates in accordance with sound financial practices and with effective management systems.

Fostering Panels (Standard 30)

This standard was not met.

The agency needs to ensure that all regulations regarding the membership of panel are met. The panel must fulfil its quality assurance role.

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:

Implementation of Statutory Requirements from Last Inspection

Requirements from last Inspection visit fully actioned?

YES

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	
Type of registration		
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Lead Inspector	J Dunster	Signature	_____
Second Inspector	K Ward	Signature	_____
Regulation Manager	Alan Sholl	Signature	_____
Final report	26 May 2005		_____

STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

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

STATUTORY REQUIREMENTS

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

No.	Regulation	Standard *	Requirement	
1	42(1), Sch7	FS4	The fostering agency must ensure that procedures and systems are developed to monitor all matters in Schedule 7.	01/09/05
2	11, 12	FS4	The procedure for child protection concerns must make it clear that such matters must be referred to the area authority as a first priority.	01/07/05
3	43(1), Sch 8	FS4	The agency must ensure that the Commission for Social Care Inspection receives all required notifications.	01/05/05
4	6.2(a)	FS4	The registered manager and not the responsible individual must carry out appraisals and supervising social work functions.	01/05/05
5	11	FS6	The fostering agency must ensure that all annual health and safety checks, unannounced visits and inspections of insurance are carried out and that these are documented to provide evidence of compliance with regulations.	01/08/05
6	11	FS6	The fostering agency must address the concerns and complaints about the ability of one fostering household to safeguard the well being of children placed within it.	On receipt of report

7	S63.12, Sch 7, Children Act 1989	FS6	The fostering agency must ensure that all statutory requirements regarding exemptions are met. There must be no child in placement without the required exemption certificate.	On receipt of report
8	34(3), Sch 6	FS8	The fostering agency must make sure that documents/document comprising a foster placement agreement include all matters in Schedule 6.	01/09/05
9	11(a), 34	FS8	The fostering agency must ensure that a child is only placed in a foster home which meets the matching requirements. The matching process must be carried out and recorded on each child prior to placement.	01/05/05
10	11, 12	FS9	The fostering agency must ensure that the child protection policy and procedures are developed which fully accord with relevant ACPC guidelines and regulations.	01/07/05
11	11, 12	FS9	All households must have safe caring plans. They must be agreed with the child's social worker and clearly explained to the child.	01/08/05
12	16(2)(a)	FS13	The fostering agency must provide evidence of educational achievements.	01/10/05
13	20, Sch 1	FS15	The fostering agency must ensure it records positive proof of identity including a recent photograph.	01/11/05
14	19	FS17	The fostering agency must ensure contingency arrangements are in place to meet staff shortages.	01/08/05
15	21(4)	FS20	The fostering agency must ensure that all staff are appraised in line with agency policy.	01/10/05
16	28(5)(b), Sch 5	FS22	The fostering agency must amend the foster care agreement to comply fully with Schedule 5.	01/08/05
17	17	FS22	The fostering agency must ensure that carers' need for regular supervisory visits is provided for.	01/05/05
18	24(2)	FS30	The fostering agency must ensure that the membership of the fostering panel complies with regulations.	01/05/05

19	25(2)	FS30	The fostering panel must record the reasons for its recommendations.	01/05/05
20	26(2)	FS30	The fostering agency must ensure that the panel carries out its quality assurance role in respect of this particular agency.	01/09/05

GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

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

No.	Refer to Standard *	Recommendation Action
1	FS1	The fostering agency should ensure that the Children's Guide makes it clear that no child will be subject to reprisals for making a complaint.
2	FS1	The Children's Guide should contain a fuller summary of the agency's statement of purpose.
3	FS1	The agency should ensure that records are kept which demonstrate that a child has received a copy of the Children's guide.
4	FS1	The statement of purpose should include the outcome of complaints and information regarding the review of carers.
5	FS1	The Children's Guide should be produced in formats which meet the needs of children with learning difficulties or non-verbal communication.
6	FS4	There should be clear delineation of the roles of the responsible individual and the registered manager.
7	FS4	Contracts of employment should provide a specific duty to declare conflicts of interest.
8	FS6	The fostering agency should ensure that every fostering household has adequate space to comfortably accommodate all those within it.
9	FS7	It is advised that equal opportunities policies are rationalised and further developed.
10	FS7	The agency is advised to give consideration to more effective ways to tackle discrimination to the development of "cover stories".
11	FS8	The agency should develop personalised carer profiles to aid the process of introduction of a child to a potential fostering home.
12	FS9	Risk assessments should be undertaken when it is proposed to introduce an additional child to a household or when concerns arise about particular children.
13	FS9	The agency is advised to subject reports of bullying to the monitoring process.

14	FS10	The Foster Carers' Handbook should outline clear procedures and practice regarding contact. There should be regular post-approval training provided on contact.
15	FS13	The fostering agency should develop written education plans which address the targets outlined in Fostering Standard 13 and Regulation 16.
16	FS13	Guidance should be provided on provision and responsibilities for children excluded from school.
17	FS14	The agency should ensure that each relevant child has a written plan for preparing for independence.
18	FS14	The fostering agency should provide clear written requirements detailing the foster carer's role in preparing young people for independent living.
19	FS15	The fostering agency should comply with its own recruitment and selection policies.
20	FS15	It is advised that the member of staff without previous assessment experience should be closely supervised in this task until fully competent.
21	FS17	The fostering agency should review its staff retention policies.
22	FS17	The fostering agency should develop a recruitment policy which reflects the need to have an adequate range of carers.
23	FS18	The fostering agency should ensure that the probationary process has measurable targets and is completed on time.
24	FS18	Qualified staff should provide out of hours support.
25	FS19	It is recommended that a training strategy be devised and its effectiveness regularly evaluated.
26	FS21	The fostering agency should develop a document encompassing the whole of support provision for carers.
27	FS21	The fostering agency should consider the facilitation of a self-help group for carers.
28	FS22	Foster carers should be consulted on the supervision format. They should be given copies of their supervision notes.
29	FS22	The complaints process should provide for a wholly independent adjudicator at the end of the process.
30	FS24	The fostering agency is advised to discuss with placing authorities whose responsibility it is to undertake life story work and identify the role of the foster carer in this.

31	FS24	Records should be complete and meet a written policy on the format, purpose and content of files.
32	FS24	Children's records should be returned to the relevant authority when the child ceases their placement with the agency.
33	FS25	Where gaps in files are indicated through the auditing process remedial action and a timescale for review should be identified.
34	FS30	Procedures should be devised to address decision making when the fostering panel is not in agreement.

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

PART B**INSPECTION METHODS & FINDINGS**

The following inspection methods have been used in the production of this report

Number of Inspector days spent	11
Survey of placing authorities	YES
Foster carer survey	YES
Foster children survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	YES
• Child protection officer	YES
• Specialist advisor (s)	YES
• Local Foster Care Association	NO
Tracking Individual welfare arrangements	YES
• Interview with children	YES
• Interview with foster carers	YES
• Interview with agency staff	YES
• Contact with parents	NO
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of foster carer training	NO
Observation of foster panel	NO
Inspection of policy/practice documents	YES
Inspection of records	YES
Interview with individual child	YES
Date of Inspection	07/03/05
Time of Inspection	09.00
Duration Of Inspection (hrs)	144

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

The scale ranges from:

- | | |
|-------------------------|--------------------|
| 4 - Standard Exceeded | (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

Pathway Care (Midlands) Ltd has a statement of purpose which outlines the objectives and guiding principles of the agency.

The statement of purpose details the services provided by the agency and meets most of the matters in Fostering Standard 1.4. It should include the outcomes of complaints and information regarding the review of carers.

The agency has a Children's Guide and a Children's Guide workbook for younger children. The Children's Guide requires a fuller summary of the agency's statement of purpose and information on how to acquire an independent advocate. It should also make clear that no one who complains would be made the subject of reprisals.

The inspectors discussed with the agency director the desirability of producing a children's guide in a format suitable for the needs of children with learning difficulties or non-verbal communication. While the inspectors regarded the workbook as a useful tool for working with younger children it would not meet the requirements of Regulation 3.

Five of the nine children who responded through questionnaires and several of those interviewed did not believe they had received a Children's Guide. The agency is recommended to ensure that they keep records to show that a child has received a copy of the guide.

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?

9

Pathway Care (Midlands) Ltd does not have a manager at present, the registered manager having left by mutual agreement with the agency in December 2004. Given this, the standard has not been assessed.

A recent inspection report by The Care Standards Inspectorate for Wales found the responsible individual, Mr Kelvyne Mills, to have the necessary skills, knowledge and experience to supervise the management of the agency efficiently and effectively.

The agency hope to appoint a new manager in the very near future. The standard will be fully inspected at the next inspection.

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?

9

The standard was not inspected in the absence of a registered manager.

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?	1
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Pathway Care has an Assistant Director, Mr David McBride, who is responsible for quality assurance throughout the organisation. This includes monitoring and evaluation.

The inspectors believe that the role of the Assistant Director alongside that of the registered manager for monitoring Regulation 42(1), Schedule 7 matters could be very beneficial for the development of best practice across the agency.

In respect of Schedule 7, matters 1, 5, 8, 9 and 14 were not being fully monitored.

Although restraint and the administration of medication were detailed in daily records and sometimes in supervision notes there was no evidence of systematic oversight of these matters by the person responsible for monitoring and evaluation. The inspectors found more than one incident of restraint, which had not become the subject of any monitoring process.

The Assistant Director does not monitor compliance by carers with the matters which form the foster placement agreements (Looked After Children documentation or the agency's own Foster Placement Agreements).

The Assistant Director for Quality Assurance is currently developing what will be a comprehensive system for monitoring of Schedule 7 and 8 matters. This should include all the matters detailed in the regulations.

Procedures must make it clear that the area authority is informed of child protection concerns as the priority. There is a procedure in place for notifying Schedule 8 events. The proforma in use is very helpful but could include a clear outline of who was informed and when.

Discussions with staff and foster carers found that there has been a blurring of roles within the agency in the absence of the registered manager. One of the Directors has carried out probationary reviews of staff. Staff felt the lines of accountability were no longer clear and, like the foster carers, tended to address issues to the director rather than to the temporary line-manager.

The inspectors advised that it was inappropriate for a company director to be carrying out social work management functions within the agency and that this role should be fulfilled by the temporary manager, Sue Holdaway (registered manager at the Bristol office).

It is important that this confusion regarding roles is rectified. The appointment of a new manager should provide the ideal opportunity to address this.

The fostering agency has a director responsible for financial matters and there is no delegation of financial responsibility. There is a clear and rigorous process for the review of financial procedures and status. Standard 4.4 is clearly addressed.

Staff contracts do not place a duty on the individual to declare a possible conflict of interest. The inspectors advised that the contractual clause relating to conflicts of interest should be reworded to provide a specific "duty to declare".

With respect to the details regarding statutory notifications it should be noted that the Commission for Social Care Inspection (CSCI) did not receive all required notifications. Further, CSCI had received some of which were not contained within the agency's record of Schedule 8 events and notifications. The agency should ensure that procedures are comprehensively and consistently followed.

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

Death of a child placed with foster parents.
Referral to Secretary of State of a person working for the service as unsuitable to work with children.
Serious illness or accident of a child.
Outbreak of serious infectious disease at a foster home.
Actual or suspected involvement of a child in prostitution.
Serious incident relating to a foster child involving calling the police to a foster home.
Serious complaint about a foster parent.
Initiation of child protection enquiry involving a child.

0
0
6
0
0
2
1
4

Number of complaints made to CSCI 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?

1

Pathway Care (Midlands) Ltd has been without a manager since December 2004. Transitional arrangements were agreed with the Commission for the registered manager of Pathway Care's Bristol office to supervise staff at the Midlands on a part time basis. The inspectors found that this arrangement had not operated adequately to allow this standard to be met.

The amount of time Sue Holdaway was able to spend at the Midlands office was insufficient to meet the supervision needs of the staff who described themselves as "self-managed".

Staff expressed serious concerns about their ability to carry out assessments without adequate management oversight and by the limitations placed on their supervision in terms of time and scope.

Staff and carers spoke highly of Kelvyne Mills as a source of support but the agency should ensure that both staff and carers understand lines of accountability and do not circumvent them unnecessarily.

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?

1

During the inspection four fostering households were visited. There was a total of 11 children placed with these families. We were fortunate to be able to meet all the children during our visits. We were also able to meet some birth children within the homes.

All the homes were warm, comfortable and child-orientated. They met the requirements of standards 6.1-6.4.

The inspectors were able to observe the interaction of carers with foster children and were pleased to witness positive rapport. Both the files and the visits to these homes bore testament to the work these carers are undertaking with the children and the efforts they make to ensure the children live within a safe and positive environment. The children interviewed, like those who responded to the questionnaires, spoke highly of their foster carers. Younger children displayed positive attachment to their carers.

The inspectors were, however, very concerned about the ability of one fostering household to meet the demands of this standard. The placing officer, Looked After Children team manager and the Fostering Support Team manager of the relevant local authority expressed considerable concern through questionnaire, telephone interview and copied letters of complaint about the ability of the carers to meet the needs of the children placed with them. These concerns were borne out by reading of the relevant case files. The agency is aware of the concerns which the inspectors have about this fostering household and inspectors have suggested that a rigorous review of it should take place. The local authority is to raise the matters by way of complaint which must be investigated as a matter of urgency.

Evidence was also found of one household which could not comfortably accommodate or respect the need for privacy of all who lived there over a period of time. Again, this has been brought to the attention of the agency and we advise review of the family's approval to consider the demands for adequate accommodation within the standard. Some health and safety checks have been undertaken but there were some gaps in coverage. They should all be carried out and consistent documentation retained to evidence them. This is also the case for unannounced visits and inspection of insurance and MOTs.

Carers have received training in Health and Safety, First Aid and Safe Caring. There are written guidelines on the health and safety responsibilities within the Carers' Handbook.

Foster carers had been informed of the inspection and those visited were aware of their part in the inspection process. They took a positive and active part in the inspection.

It emerged during this inspection that over the past year this agency has, on a number of

occasions, placed children in foster homes without the requisite exemption certificates and in contravention of the legislation concerning the use and achievement of exemption certificates. The agency is now aware of the procedure and legislation governing this area. It must ensure that all staff are aware of the rules. It must also ensure that no child is currently in placement or is placed in the future in contravention of this legislation.

Standard 7 (7.1 - 7.7)

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

Key Findings and Evidence

Standard met?

2

Pathway Care (Midlands) Ltd has a number of different statements regarding equal opportunities within a range of documents. They are not consistent. E.g. One includes sexual orientation but another omits it. The statement of purpose does not demonstrate value placed on diversity in the recruitment of foster carers. It is advised that these policies be rationalised and developed.

However it was observed that a training course is offered on valuing diversity and promoting equality. In one household in which there is a trans-racial placement extra training has been provided to the carers to enable them to meet the specific needs of these children.

The inspectors were able to observe at first hand the way in which carers were enhancing the children's sense of self-worth. As noted in the previous standard there are concerns about one household which have been shared with the agency.

The carers demonstrated their commitment to, and understanding of, this area within discussion in their support group.

The inspectors felt that the advice on devising "cover stories" in the Carers' Handbook could increase a child's sense of shame rather than equipping them to face discrimination.

The agency and carers enable disabled children to live full lives. Disabled and able-bodied children alike are helped to develop their own personal interests.

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**

Pathway Care (Midlands) Ltd's referral document includes matching issues and social workers were clear about what needed to be tested. The development of carer profiles reflecting matching issues could facilitate this process further.

There is considerable evidence of efforts by the agency to acquire all the essential documentation from the local authorities and they have had some success in doing so. It was advised that, even if all the documents were forthcoming, they would need to be supplemented with information addressing gaps in relation to Schedule 6, Parts 4 and 7. The fostering agency has developed a temporary foster placement agreement. With minor adjustments to include Schedule 6, Parts 1(b), (d), and (f) this document would form a comprehensive and useful foster placement agreement. The agency is giving consideration to using this document (as amended) for every placement.

There were two occasions on which the guidance regarding matching was directly contravened. Placements should not be made without full consideration of the matching criteria or in spite of contraindications about the capacity of the placement to meet matching needs.

The referral documentation directly outlines how gaps in matching are to be compensated for. As noted above, a family with a trans-racial placement had extra support and training provided.

Good efforts are made to introduce carers and children before placement, to the benefit of the placement. The agency may wish to develop personalised carer profiles which can be shared with foster children and their families were it is not possible to have introductions prior to placement.

Foster carers were familiar with the process of introduction and their handbook explains the importance of this work.

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?****1**

Staff and carers undertake child protection training

There are strenuous efforts before each placement commences to gain as much information as possible.

The child protection policy is inadequate and inaccurate, failing to provide clear guidance on dealing with child protection issues. On one occasion, the only member of staff available was unable to easily locate agency or ACPC guidelines within the office. The agency must develop a child protection policy which is accurate and reflects the relevant ACPC

guidelines.

The agency needs to take a more rigorous approach to risk assessments. They should be undertaken when considering moving an additional child into a household. On one occasion a risk assessment had not been undertaken despite the request for an exemption certificate stating that it was necessary. Without such assessments it is difficult for foster carers to be able to provide the protection detailed in Fostering Standard 9.7.

Foster carers' training incorporates matters in Fostering Standard 9.2.

There is a lack of consistency on safe caring policies. Although there was evidence that some households have plans and some had included all members of the household in their formulation, practice is inconsistent. All households should have safe care plans, devised with the involvement of all members of the household. These guidelines must be cleared with the child's social worker and explained clearly to the child.

Foster carers are aware that physical punishment is never allowed.

The Assistant Director for Quality Assurance has developed a system for collating information on allegations of neglect or abuse. This will be a very useful tool with a commitment to ensuring comprehensive input of data.

Incidents of bullying are identified through daily records and monthly supervision but need to be monitored more fully by the fostering agency.

There is a clear, written procedure for use if a foster child is missing from home. The Assistant Director for Quality Assurance currently undertakes responsibility for monitoring these incidents.

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

X

%

Standard 10 (10.1 - 10.9)

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

Key Findings and Evidence

Standard met?

2

Foster carers take a positive and proactive approach to contact. The agency needs to reflect this in the handbook which currently takes a very legalistic approach to the subject.

Preparation for Fostering training addresses the issue of contact but there is no subsequent training on the subject.

Foster Carers are assisted in this role through supervision. They are reimbursed transport costs consequent on contact.

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**

Children's views are sought through the review process, activity days and contact with supervising social workers. The Assistant Director for Quality Assurance acknowledges that these views are not brought together for comprehensive evaluation. He is currently undertaking a study of research material in this area with the aim of identifying and implementing the most effective ways of gaining children's views.

Inspectors were able to observe carers seeking the views of children and competency based assessments evaluate skills in this area.

The Children's Guide needs to directly address the process by which a child complains, is heard and is responded to. It ought to suggest a range of ways for a child to express concern taking into account the needs of all children placed by the agency.

The agency offers a course in communicating with children with disabilities. Two carers have attended in the past year.

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?****3**

The inspection found that this standard was fully met.

The Carers' Handbook contains comprehensive healthcare guidelines and carers displayed familiarity with their role in securing health care provision. There is ample evidence of carers acting as advocates for children's health needs.

Staff and carers work with counselling services, CAMHS, speech therapy, orthopaedic and enuresis services, ENT clinics and many others.

Referral and matching address health needs and arrangements for consents. Where there were gaps in written health records efforts were successfully made to fill them.

All children are registered with a doctor and dentist and have relevant health checks.

The agency has the services of a medical adviser and a therapist.

Training is made available in line with Fostering Standard 12.5.

Accidents are recorded and logged via the monitoring systems.

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?****2**

The Carers' Handbook includes guidance on education but needs to include the Education Policy and Expectations so that foster carers are clear about their responsibilities.

The current database allows for the input of exclusions and achievements but the latter is not being completed. This will be necessary to evaluate the success of the agency's work in promoting education.

Guidance is required on provision and responsibilities for children excluded from school.

Foster carers are to be commended for the work which they have undertaken to gain and maintain suitable educational placements for their foster children.

The fostering agency should ensure that each child has an individual written education plan, a copy of which is retained on their file. At present this practice is variable.

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?****2**

The Carers' Handbook should provide information on this area to include the information in this standard. Practice appears inconsistent and the training course has not been attended by any carers.

Case tracking demonstrated the work which carers are undertaking. However guidance needs to outline the responsibilities of the carers and the agency to ensure children in their care develop independent living skills and that their rights under the Children (Leaving Care) Act 2000 are met.

Written plans should be completed for all relevant children and available on their files.

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

Pathway Care (Midlands) Ltd meets virtually all the requirements of Schedule 1. Staff records must contain a copy of photographic evidence of identity.

The fostering agency's own recruitment and selection procedures are not followed. The Human Resources Officer confirmed that interviewers have not been trained. Interviews are not based on person specifications, essential and desirable attributes. Interviews contravene the agency's own demands to avoid subjective judgements. The agency should comply with these policies and procedures.

All staff have undertaken competitive interviews. Telephone verification of references is sought.

Discussion with staff and evidence from their casework indicated that matters in Fostering Standard 15.5 were met.

In respect of carrying out assessments, one member of staff who had no experience of family placement work before employment with the agency was carrying out an assessment without adequate supervision from a responsible person. This member of staff should be provided with social work support and supervision in completing this task in line with Standard 15.6.

The inspectors were unable to inspect the therapist's file and will do so at the next inspection.

Total number of staff of the agency:

7

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

4

Standard 16 (16.1 - 16.16)

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

Key Findings and Evidence**Standard met?****2**

Deficiencies regarding the temporary arrangements for managing staff have been addressed previously.

The standard was otherwise met.

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?****1**

Pathway Care (Midlands) Ltd has recruited two further social workers subject to satisfactory checks. They also hope to employ a manager in the very near future subject to fitness.

At present there is an insufficient staffing complement. Family Outreach Workers have been undertaking qualified social work tasks. One foster family reported receiving no supervision for 10 weeks at a vulnerable period. The use of Family Outreach Workers to address qualified social work shortages is not acceptable. Suitable contingency plans need to be drawn up by the agency for periods of staff shortage.

There has been a high turnover of staff this year. The agency has been advised to review all those matters which might impinge on the retention of staff.

There is no recruitment policy and strategy for foster carers. This needs to be developed to enable the agency to extend its resources for working with the groups of need it has identified.

The processes involved in assessment are clear and are met. The agency uses Fostering Network competency assessments. Those completed were found to be of a very high quality. They provide a very good model for the current staff team.

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?****2**

As indicated in Standard 15 the fostering agency does not meet its own recruitment policies and procedures.

Six-month probationary periods are established in contracts of employment but targets and methods of monitoring progress are not established. The probationary reviews have been completed late and not always by a line manager. In one probationary review the content did not lead to the outcome. The agency needs to develop a probationary process which encompasses measurable targets and is timely.

Out of hours support is available to carers. Foster carers reported that the service is responsive. At present an unqualified member of staff sometimes provides it. This should be avoided.

There are management systems for carer supervision, appraisal and support. Carers spoke highly of the support provided by their supervising social workers.

Matters regarding health and safety, insurance and whistle blowing are comprehensive and known to all concerned.

Standard 19 (19.1 - 19.7)

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

Key Findings and Evidence**Standard met?****3**

There is no training strategy in place for staff but in practice their training is relevant and matched to their individual learning needs.

Induction and in-service training is undertaken.

The training officer confirmed that whilst courses are evaluated by attendees through questionnaires no one evaluates the effectiveness of the training programme as a whole. This should be carried out regularly. A training strategy should be established against which effectiveness can be measured.

Staff and carers take part in and value joint training.

Standard 20 (20.1 - 20.5) All staff are properly accountable and supported.		
Key Findings and Evidence	Standard met?	2
<p>Concerns about the level of support from a line manager have been detailed in this report.</p> <p>All staff have contracts of employment, handbooks, job descriptions, policies and procedures. However there is confusion about where child protection guidance is kept.</p> <p>Staff have a supervision agreement which they hold themselves.</p> <p>As found above, although supervision has continued to be regular in the absence of the registered manager, staff have not found it adequate for their needs.</p> <p>Appraisals have not always been completed by a line/temporary line manager nor completed on time.</p> <p>Staff meetings take place regularly.</p>		

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
<p>Pathway Care (Midlands) Ltd was unable to demonstrate a specific strategy for working with and supporting carers although there was some information in the Foster Care Agreement and the Carers' Handbook. A strategy should be developed which brings together all the matters in Standard 21.2.</p> <p>Foster carers expressed the desire for unsupervised self-help groups in addition to the more formal carers' meetings. The agency will give consideration to facilitating this.</p> <p>The service provides out of hours support, supervision, training, review and respite care by way of support to its carers.</p> <p>Carers and staff are clear about the role of the supervising social worker. Review reports are appropriately prepared and presented to panel.</p> <p>There is evidence from the files and questionnaires of cooperative work between fostering social workers within the agency and local authority children and families social workers.</p>		

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**

The fostering agency provides foster carers with a handbook detailing policies, procedures, guidance, legal information and insurance matters. Carers confirmed that they are sent updates as they become available. There is also a Foster Care Agreement in use. This meets all the matters in Schedule 5 except the carers' terms of approval. These should be stated within this document.

Carers are provided with weekly, fortnightly or three-weekly supervision. Records of these meetings were seen on the files. Carers and staff raised a number of concerns regarding supervision. Both groups felt the supervision proforma should be revised to better reflect the needs of supervision. The agency may wish to carry out a review of the proforma in consultation with staff and carers. Carers would like to receive copies of the notes to aid consistency in their work with the children. In the interests of good practice these should be provided to the carers. The manager should make sure that all staff are aware that these notes do not have to be contemporaneous or signed immediately at the conclusion of supervision.

One foster carer household, as recorded above, had two and a half months without supervision. These shortfalls in the availability of staff must be strategically planned for to avoid a recurrence.

Practical support for carers was found to include matters in Standard 22.7.

The inspectors found that the fostering agency had an overly rigid notion of complaints. Verbal and informal complaints were not recorded and monitored. They should be treated in the same way as written and more formal complaints. Complainants should not be compelled to write their complaints. On the complaint database the outcome box should indicate whether the complaint was substantiated, not substantiated or that there insufficient evidence rather than indicating action taken.

Following the inspection the responsible individual provided a copy of a complaints procedure which post-dated that viewed during the inspection. The new procedure includes timescales. It is recommended that the lack of clarity about the independence of the appeal tribunal be addressed.

Procedures regarding investigations into allegations within the Carers' Handbook and the Children's Guide are not adequate. Within the handbook the order in which authorities should be advised of child protection concerns should be revised. Other concerns about child protection matters have been addressed earlier in the report. Records of allegations are kept within a "Schedule 8" file. The Assistant Director for Quality Assurance presently monitors them.

The Carers' Handbook outlines the circumstances and processes for removal of a foster carer from the foster carer register.

Standard 23 (23.1 - 23.9)

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

Key Findings and Evidence**Standard met?****2**

Foster carers are able to take part in a training programme. It is recommended that this programme also incorporate Contact, Life Story Work and Preparation for Independence.

Prospective carers undertake a Preparation to Foster programme. Existing carers are involved in parts of its presentation and the course is accredited for the purposes of NVQ. All new foster carers undergo induction training.

All carers are expected to undertake core training in First Aid, Safe Caring, Child Protection and Recording.

There is no comprehensive training strategy available for this Pathway Care site. However there is a training statement policy which establishes that all training will be provided within an anti-discriminatory framework. Competency based assessments are used for carers' reviews which facilitate the identification of competencies to be developed and consequent training needs.

Standard 23.4 recognises the importance of specific training in key areas regarding placements. The inspectors found no evidence that a carer who took a child with a history of sexually inappropriate behaviour was given specific training in this area. The placement broke down following an issue in this area. Risk assessments would identify key training needs with reference to specific placements. No men appear to have undertaken the Men who Foster course in the past year.

At present safe caring training is not provided to all members of the fostering household. Advice was given on ways in which this might be facilitated within the individual households.

The inspectors were very pleased with the plans the fostering agency has to set up a support group for children who foster. This should be a useful way of supporting these children and acknowledging their very important role.

The training officer acknowledged that there is not formal or strategic evaluation and review of the effectiveness of training. As stated earlier, this system needs to be put in place.

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 agency works hard to gather all relevant documentation from local authorities. Foster carers reported that they receive the relevant information. Children visited seemed aware of their rights to access records.

The written policy on case recording covers data protection and the foster carer records but does not address the purpose, format and content of files. On one file the placement information was inaccurate.

The fostering agency appears to work with the Local Authorities to establish comprehensive integration of information. The agency was advised that children's records must be returned to the relevant authority at the end of placement. This had not occurred in one case scrutinised.

Evidence was provided by the foster carers of the role they play in life story work. The agency should be clear with placing authorities about the responsibilities for this skilled and potentially therapeutic work to ensure that foster carers understand their role in the process. Foster carers understand the importance of keeping memorabilia and allowing children to talk about their history.

Foster carers have access to relevant information about the child's history. One carer household had been provided with lovely life story books for the children. Consideration could be given to replicating the provision which the Cardiff branch makes of cameras and photo albums to facilitate this work.

Foster carers receive training in recording. They keep daily records and monthly reports on children though there were gaps in these. In one case this covered a critical period in the care of a child which led to the termination of a placement. Records are kept securely and the foster carers are clear about the information that needs to be handed on to the agency. Carers expressed the view that it would be helpful to have a separate place to record information on medication administered, restraint incidents, and accidents. This would also be a helpful tool for the purposes of monitoring.

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?****2**

The fostering agency has a register of foster parents which meets Regulation 31.

It was observed in most files tested that information was missing, documents relating to other carers or children were erroneously present and there were gaps in recording. File audits did not appear to have addressed these shortcomings. The responsible individual informed inspectors that files are now randomly audited through supervision. This audit should identify gaps, remedial action to be taken and the plan for review.

The inspection established that there is a policy on confidentiality and guidance on the Data Protection Act 1998. There is a policy regarding the retention of records, which are securely stored. Record keeping is congruent with the Looked After Children system and checks and references are kept.

Written entries were mostly legible though most handwritten work could now be presented in a word processed form. Fact, opinion and third party information were largely delineated.

There was no evidence to suggest that children and foster carers are "encouraged" to access their records though they are aware that they can do so.

Information regarding complaints and allegations must be copied on all the relevant files. They were often not in the children's files and sometimes not on the carers' files. They should be recorded and easily accessed within these files.

Number of current foster placements supported by the agency:

42

Number of placements made by the agency in the last 12 months:

29

Number of placements made by the agency which ended in the past 12 months:

20

Number of new foster carers approved during the last 12 months:

0

Number of foster carers who left the agency during the last 12 months:

5

Current weekly payments to foster parents: Minimum £

340

Maximum £

742

Fitness of Premises for use as Fostering Service

The intended outcome for the following standard is:

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

Standard 26 (26.1 - 26.5)

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

Key Findings and Evidence

Standard met?

3

This standard was met.

The inspectors advised that a policy and action plan developed by Citation should be fully implemented.

Financial Requirements

The intended outcome for the following set of standards is:

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

Standard 27 (27.1 - 27.3)

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

Key Findings and Evidence

Standard met?

3

The Director responsible for finance, Mr Ballet, provided management accounts for the ten months ended 31st January 2005 which included a trading profit and loss account and balance sheet. Along with the most recent audited accounts this indicated that the agency remains financially viable.

Procedures exist to deal with financial crisis. Mr Ballet accepted that the order of notification of a financial crisis should be changed to reflect the need to prioritise the local authorities in the interests of safeguarding the welfare of children.

Standard 28 (28.1 - 28.7)

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

Key Findings and Evidence

Standard met?

3

Financial processes operate within the requirements of Standard 28. The agency operates a no debt approach to financial management as well as a steady growth approach to development, all of which helps to safeguard its financial stability.

The agency uses Sage financial systems as well as a financial director package which allows a daily printout of finances. The branch leases the premises from Pathway Care's holding company.

The agency publishes its charges and fostering allowances and writes to carers each financial year to detail allowances for the forthcoming year.

Standard 29 (29.1 - 29.2)

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

Key Findings and Evidence**Standard met?**

3

This standard was fully met (see Standard 28). Carers confirmed that payments are made promptly and correctly and are annually reviewed.

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?

1

The fostering agency operates a shared fostering panel with Warwickshire County Council. The inspectors did not have the opportunity to observe the panel but interviewed the chair of the panel, Mr C Hallet.

It was found that the membership of the panel does not comply with Regulation 24(2). In order to comply the responsible individual, a company director, should not act as vice-chair.

Procedures do not cover decision making when members are not in agreement.

The chair of panel indicated that his quality assurance role only operated in relation to Warwickshire County Council but not Pathway Care (Midlands) Ltd. He acknowledged that there were gaps in his overall view of the number of exemptions and changes to approval with which the panel were faced. There was no evidence that disruptions or allegations go before panel. The agency may wish to consider whether the establishment of their own panel would improve their ability to carry out the quality assurance function of the 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?	9
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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?	9

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

Signature

Date

PART D**PROVIDER'S RESPONSE**

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

Please limit your comments to one side of A4 if possible

The provider's response to the report is available on request.

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

Amendments to the report were necessary (as previously advised)

YES

Comments were received from the provider

YES

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

YES

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

YES

Note:

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

D.2 Please provide the Commission with a written Action Plan by 13/05/05 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 – see Other

NO

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

NO

Provider has declined to provide an action plan

NO

Other: Some timescales in the action plan are to be discussed. The action plan will be amended to take account of changes which have been made to the draft of the report.

YES

Public reports

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

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, [Name], of Pathway Care (Midlands) Ltd confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above dateS 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 Pathway Care (Midlands) Ltd 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
dateS for the following reasons:

Print Name _____

Signature

Designation

Date _____

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

Commission for Social Care Inspection
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S0000040373.V203731.R01

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