



Making Social Care
Better for People

inspection report

Fostering Services

Banya Family Placement Agency

286A - 288 Croxted Road

Croxted Mews

London

SE24 9DA

11th,20th,26th,27th, 28th October & 1st
,2nd.3rd,4th,11th November 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?

NO

Name of Authority

Address

Local Authority Manager

Tel No:

Address

Fax No:

Email Address

Registered Fostering Agency (IFA)

YES

Name of Agency

Banya Family Placement Agency

Tel No

020 8678 5330

Address

Units 1,6,7 286A - 288 Croxted Road, Croxted Mews,
London, SE24 9DA

Fax No

020 8678 5343

Email Address

paul.soper@banyanet.com

Registered Number of IFA

G020000400

Name of Registered Provider

Banya Family Placement Agency Organisation

Name of Registered Manager (if applicable)

Ms Elspeth Devlin

Date of first registration

12th June 2003

Date of latest registration certificate

12th June 2003

Registration Conditions Apply ?

NO

Date of last inspection

22-4,27th October 20th
21st25th November 2003

Date of Inspection Visit		11th October 2004	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Maggie Edwards	137174
Name of Inspector	2	Alan Thomas	
Name of Inspector	3	Rossella Volpi	
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 Representatives at the time of inspection		Mr Paul Soper; Ms Elspeth Devlin	

Introduction to Report and Inspection

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Part B: Inspection Methods & Findings

(National Minimum Standards For Fostering Services)

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

Banya Family Placement Agency is an independent fostering agency. The office in Herne Hill, South London deals with the central administration of the organisation, and is the premises for the London branch of the operation. At the time of the inspection, the agency had a regional branch in Eastbourne but there were plans for this to become a separate organisation. At the time of the last inspection the agency had had a branch in Boston, Lincolnshire but this had now ceased to operate. The south London branch is responsible for the supervision and support of 74 foster families providing placements for 111 children. The agency's fostering panel is based in London, and is currently responsible for the approval, reviews and de registration of foster carers from the London and Eastbourne branches. The agency is a company with two directors. Paul Soper represents the company as the responsible individual. Nyasha Gwatidzo takes the lead in developing the service, and is the agency's designated decision maker. The day-to-day management of the fostering service is delegated to Elspeth Devlin.

Banya was established, over seven years ago, to recruit, approve and support foster carers for looked after children needing substitute family care. It provides planned and emergency placements for children and young people looked after by local authorities, This includes long term, bridging, respite and remand care placements, as well as a supervised contact service.

It aims to provide high standards of care for children and young people, including young parent and baby placements, and sibling groups, and endeavours to ensure that everybody who comes into contact with the fostered child or young person promotes their welfare and safeguards their interests. The agency aims to work closely with the child or young person's family and placing authority.

PART A SUMMARY OF INSPECTION FINDINGS

Inspector's Summary

(This is an overview of the inspector's findings, which includes good practice, quality issues, areas to be addressed or developed and any other concerns.)

This inspection took place over a period of nine days between 11th October and 11th November 2005. The inspectors viewed documents relating to the policies and procedures of the agency and also viewed case files and minutes of team meetings and panel meetings. The inspectors held individual interviews with all senior members of staff and with the newly appointed Human Resources Officer and one Supervising Social Worker. They met with the remaining supervising social workers as a group. The inspectors visited a total of six foster care homes and attended a training session for carers and a carers' support group. They also observed a panel meeting and carried out a telephone interview with the chair of the panel.

The inspection demonstrated that the agency places great emphasis on providing appropriate nurturing for placed children. The majority of carers interviewed spoke warmly of the support which they received and some made particular reference to the fact that the development officer, who has a qualification in therapeutic work with children, had taken steps to ensure that carers developed skills in communicating with placed children many of whom have suffered emotional and psychological trauma. The inspectors were also impressed by the enthusiasm of the staff team for the recent development of children's support groups. Visits to foster carers' homes during the inspection demonstrated that placed children were well cared for and appeared happy and secure.

However, although the majority of standards have been assessed as being met with only minor shortfalls, the inspection did raise a number of important issues which gave cause for concern. The deficiencies in practice relate mostly to the lack of appropriate quality assurance and monitoring systems which strongly affect a number of areas including the maintenance of case files; the monitoring of visits to carers and children; the omission by the agency of the submission to the Commission of Schedule 8 information; the supervision and training of staff and the functioning of the assessment process for people applying to become foster carers. A small number of standards have been assessed as being unmet. These shortcomings reflect a number of issues which affect a number of standards. This has resulted in a long and detailed report with a large number of requirements and a comprehensive summary. The 'core' issues are;

- The fostering manager, although well qualified and experienced and always available to staff, has been unable to set up the necessary quality assurance and monitoring systems or to allocate time for regular structured staff supervision.
- This difficulty appears, in part, to have arisen from the demands on her time resulting from the lack of other suitably qualified and experienced staff and the expansion in the numbers of carers and children for whom the agency now has responsibility.
- Other senior staff, although well motivated to implement the nurturing 'Banya Family' ethos of the agency, do not have extensive relevant experience of the statutory requirements of working with Looked After Children. This appears to have contributed to the lack of attention to detail with respect to areas of agency functioning which are crucial to ensuring the full monitoring of placements and the full recognition of the need to be pro-active in ensuring the ongoing development of the skills of supervising social workers. There is also a need to further develop appropriate financial procedures.

The concerns cited above have contributed to issues raised outside the inspection concerning complaints made to the Commission by a foster carer and a placing authority against the agency and allegations made against one of the agency's foster carers. Details of these are contained within this report. After investigation the Commission

upheld the complaints. The agency co-operated fully with the investigation.

The Registered Provider and the Fostering Manager also re-acted constructively to an extensive verbal feedback from the inspectors at the end of the inspection. The inspectors ,whilst acknowledging the positive qualities of the agency, expressed grave concerns in relation to the affects of the deficiencies demonstrated by the inspection on the agency's ability to ensure the safety and welfare of placed children. As requested , the Registered Provider supplied the Commission with a written feedback within one week of the inspection in which he again acknowledged the validity of the inspectors' concerns and provided information about constructive steps to be taken quickly by the agency to address the deficiencies identified..

Failure to ensures full compliance with all requirements contained in this report is a serious matter and can lead to the Commission taking enforcement action. It is hoped that appropriate compliance with the requirements combined with the existing nurturing approach of 'The Banya Family' will enable the agency to move forward positively.

Standard 1: Statement of Purpose.

Viewing of documents demonstrated that this standard was met to a basic satisfactory level. However although the Statement of Purpose provides clear details of the essential aims and objectives of the service there was a lack of provision of full information as required by the National Minimum Standards and The Fostering Services Regulations 2000. The Children's Guide is presented in the form of a document/form which is not specifically designed to attract the attention of children or young people. The inspection did not demonstrate that the guide is available in a range of languages other than English. This report contains two requirements which address the deficiencies in these documents.

Standards 2 – 3 : Fitness To Provide Or Manage a Fostering Service.

These standards were assessed as being met to a basic satisfactory level. However the inspectors did have some concerns.

Inspection of documents and interview with the Fostering Manager demonstrated that she has a professional qualification relevant to working with children and that, prior to her employment by the agency, she had extensive experience of statutory childcare and experience of working in another Independent Fostering Agency including working as a Senior Practitioner. She has recently successfully completed a qualification in management at NVQ4 Level. However the findings of this inspection demonstrated that she has not been able to devise and implement appropriate quality assurance systems which would enable herself and other senior staff to effectively monitor the provision of the service on a regular and frequent basis. This has resulted in inconsistencies and inadequacies in certain areas of provision which are reflected throughout this report and have resulted in this report containing a large number of requirements which relate to the need for management to exercise more stringent quality assurance and monitoring systems.

Viewing of documents demonstrated that the agency has correct policies in place to ensure that appropriate procedures are followed in the taking up of references and the acquiring and monitoring of Criminal Records Bureau checks for senior posts but that there had been a lack of attention to detail in the case of one senior staff member. This was immediately addressed by the Registered Provider.

Interviews with the Registered Provider who is also the Service and Finance Director , and

with the Development Manager, who has a qualification in the field of therapeutic work with children and with the Operational / Educational Manager demonstrated that, although motivated to provide a 'therapeutic' and nurturing experience for placed children none have any extensive experience of work within the field of statutory child care. The inspectors concluded that many of the shortcomings demonstrated in this inspection resulted from this lack of experience and consequent lack of true recognition of the statutory basis and responsibilities underlying the work of an Independent Fostering Agency. These concerns were communicated to the Registered Provider as a matter of urgency during extensive verbal feedback at the end of the inspection. He acknowledged the validity of these concerns and, as requested, provided a swift written response to the Commission in which he stated that in order to address these weaknesses the skills and competencies available within senior management will be assessed, management roles and responsibilities will be defined and clarified, gaps identified and action taken accordingly. He also acknowledges that management needs to make good its previous failure to ensure that all National Minimum Standards are being fully met.

This report contains a requirement compliance with which will demonstrate that the Registered Provider has taken steps to ensure that all members of senior management receive training which will ensure that they have the particular skills necessary to manage a fostering agency paying especial attention to the National Minimum Standards and legislation relevant to Looked After Children.

Standards 4- 5: Management Of The Fostering Service.

The inspection did not demonstrate satisfactory compliance with standard 4. Insufficient attention has been given to the need to develop and maintain quality assurance systems which will enable management to accurately monitor the activities of the service. As stated in the previous section this has resulted in inconsistencies and inadequacies in certain areas of provision which are reflected throughout this report and have contributed to the report containing a large number of requirements.

This problem had been highlighted prior to the inspection by the two separate situations described in the introduction to this summary i.e a complaint from a foster carer and the local authority which placed the foster child in her care and a case in which a carer is alleged to have subjected a foster child to emotional abuse.

The agency has also now produced a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers. The Registered Provider was required, at the time of the inspection, to provide documentary evidence of the implementation of this monitoring system to the Commission by 14th January 2005. This requirement had been satisfactorily met at the time of completion of this report.

Although the inspection demonstrated that, in response to a requirement of the last inspection, there has been some clarification of the roles and responsibilities of other senior management figures and some clarification of the lines of accountability, social work staff remain quite confused about these areas.

Standard 5 which relates to the effective and efficient management of the agency was assessed as being met to a basic satisfactory level. The inspectors are of the opinion that compliance with this standard may be increased if, as planned at the time of the inspection, the agency is successful in the recruitment of a Senior Practitioner. An appointment to this post should result in the Fostering Manager being enabled to devote more time to her management role including the development and maintenance of quality assurance systems

and the regular, recorded appropriate supervision of supervising social workers. Compliance with the requirement referred to in the preceding section concerning the training of senior management, will also contribute further to the improved efficiency and effectiveness of the management of the agency.

Standards 6 – 14: Securing And Promoting Welfare

All standards in this section ,with the exception of one, were assessed as being met to a basic satisfactory level.

Visits to a total of six foster care homes demonstrated that carers provided warm, adequately furnished and decorated homes and that all were maintained to a good standard of cleanliness and hygiene. The inspection demonstrated that all the carers visited provided appropriate physical, emotional and psychological care for the children placed in their homes and that carers were conscientious in attempting to ensure that the educational and health needs of the children were addressed. Carers understood the importance of enabling contact visits and spoke highly of the training they had received from the agency to enable them to develop their skills in communicating with placed children including the need to be aware of the often complex emotional and psychological backgrounds of the children.

However the inspectors could not assess a number of these standards as being met to other than a basically satisfactory level because of inconsistency in the maintenance of written records. This report contains a number of requirements which relate to this issue.

Attendance at a training session for foster carers demonstrated that comprehensive training is provided in order to enable carers to recognise signs of abuse and in caring for a child/young person who has been abused. Viewing of documents demonstrated that the agency has an appropriate written policy and guidelines to be used in circumstances in which it is suspected or alleged that a child/young person is the subject of abuse.

However the inspection did not demonstrate that Standard 9 which relates to the protection of children and young people from abuse and neglect was met to a satisfactory level. This was because the inspection demonstrated that there had been inconsistency in the monitoring of placements; concern with regard to the ability of the agency to satisfactorily monitor and support the placement of children in a foster home in a rural area some distance outside London and that the agency had failed to appropriately submit schedule 8 information to the Commission thus failing to fulfil a requirement from the previous inspection report. **Failure to comply with requirements is a serious matter and can lead to the Commission taking enforcement action.** The requirement is repeated in this report.

However there was some indication of inconsistency of support. This could be corrected by the introduction and maintenance of quality assurance and monitoring systems. The inspection did not clearly demonstrate whether the agency has a clearly defined training programme for people applying to become foster carers and some carers interviewed did not seem to fully understand that, where two partners are approved as carers both must engage in training.

This report contains requirements and recommendations relevant to this group of standards.

Standards 24- 25: Records.

Viewing of documents demonstrated that the agency has systems in place to enable the maintenance of a permanent, private and secure record for each placed child and for each foster carer. Viewing of documents also demonstrated that the agency maintains records of the outcome of all legally required checks and references with regard to staff and carers.

However standard 24, which relates to case records for placed children, was assessed as not being met. Although the inspection demonstrated a number of instances of good foster care practice evidenced by verbal communication and observation in Foster Carers homes, viewing of documents demonstrated severe shortcomings in the consistency of adequately maintained case records. In one instance the case file was devoid of almost all necessary information although a visit to the Foster Carers which included the inspector meeting with the three very young placed children, demonstrated that the carers were providing an

excellent service, including the maintenance of appropriate written records, and they spoke very highly of the support which they were receiving from the agency.

There was also a lack of consistent evidence of attempts made by the agency to acquire the Looked After Children Documentation from placing authorities.

These issues were discussed as a matter of concern during verbal feed back with the Registered Provider and the Fostering Manager at the end of the inspection. They acknowledged the validity of the inspectors' concerns and, as requested, provided a swift written response which contained assurances that immediate steps would be taken to address the shortcomings.

Standard 26: Premises.

This standard was assessed as being met to a satisfactory level. The inspection demonstrated that the agency has identifiable office premises to which staff and others with a legitimate interest have access during normal office hours. The office premises consist of two adjacent units on two levels. The main office has appropriate facilities for the secure retention of records in a lockable room. There is access to a separate unit which is used for training and for panel meetings.

Observation demonstrated that the office used by supervising social workers is of an adequate size to accommodate the size of the current number of staff. However the inspection did not demonstrate how the agency will adequately accommodate the proposed increase in numbers of supervising social workers.

The inspectors discussed, with the Fostering Manager and the Registered Provider, the fact that the Statement of Purpose gave the address of the agency as being 11 Romola Road SE24 7BA when this was in fact only a correspondence address with the service actually operating from Units 1,6 and 7 in Croxted Mews, Croxted Road SE24 9BA and the company address being Spectrum House, Bromells Road SW4 0BN. As requested the Registered Provider has written to the Commission since the inspection confirming that the Registered Provider's address is now Spectrum House and that the Romola Road address is no longer in use.

Standards 27-29 :Finances

The annual accounts of the agency for the year ended June 2003 were viewed demonstrating that they had been certified by an appropriately qualified accountant and that the agency was financially viable. In interview the Registered Provider stated that he would ensure that the Commission was provided with up to date accounts at the earliest opportunity.

Interviews with the Fostering Manager, the Registered Provider, supervising social workers and foster carers demonstrated that the agency attempts to ensure that all carers receive an appropriate allowance and agreed expenses which cover the full cost of caring for placed child or young person, that payments are usually made promptly and at an agreed time and that allowances and fees are reviewed annually.

However the inspection had demonstrated that there were a number of issues, relating to the financial processes of the agency, which required clarification in order to ensure full compliance with the requirements of this group of standards. These shortcomings have resulted in two of the three standards in this section being assessed as having minor shortfalls and one standard being assessed as unmet. The main issues to be addressed are;

- The inspection did not demonstrate whether the agency has procedures in place to deal with situations of financial crisis.
- The inspection did not clearly demonstrate that the agency has clearly documented financial arrangements for control and supervision of its financial affairs and powers.
- The inspection did not demonstrate that the agency has a clearly written set of principles describing the financial procedures and responsibilities to be followed by all staff, consultants, professional experts, directors and any manager.
- The inspection demonstrated that some carers experienced confusion with regard to the system whereby the agency had incorporated respite two weeks respite payment into foster carers fees for 2003/4 in which financial year the carers did not then receive an annual increase in their basic fees.
- Some carers expressed concern that they had had, on occasion, to wait for a long period to receive funding for certain essential items. This delay had resulted in their experiencing considerable financial problems as they had paid for the required items out of their own funds. Such problems usually arose as a result of a delay in the placing authority paying the agency. This situation was discussed with the Registered Provider at the initial verbal feedback following this inspection. Both at that time and in a written response received by the Commission a week after the conclusion of the inspection, the Registered Provider stated that delays in payment to foster carers can occur when there is doubt as to whether reimbursement from a local authority. The written feedback also states that ,in order to address a perceived lack of clarity as to what foster carers can and cannot claim, a detailed list is to be sent to all foster carers, with probable costs stated as transparently as possible.
- Prior to this inspection the Commission received a complaint from a team manager of a placing authority concerned that, despite a number of requests, she was experiencing difficulty in obtaining full clarification from the agency with respect to the allocation of an enhanced fee paid by the authority in recognition of the extremely challenging nature of one foster placement. The investigation by the Commission resulted in the complaint being upheld. As a result of the complaints investigation and discussion of this during the inspection, and in response to a request made during verbal feedback at the end of the inspection, the Registered Provider has provided a written statement in which he acknowledges that Banya's fee structure, including enhanced as well as standard fees, needs to be communicated more clearly to placing local authorities . He confirms that the agency will restate the fee structure paying especial attention to transparency over the breakdown of how fees are allocated.

This report contains a number of requirements compliance with which will contribute to ensuring that the standards in this section are fully met.

Standard 30: Panel.

It is a matter for concern that observation and interview during the inspection has resulted in this standard being assessed as unmet. Compliance with this standard is at the core of ensuring that the agency's procedures for the assessment and approval of foster carers is efficient, thorough and demonstrably safe.

Viewing of documents demonstrated that the agency ensures that satisfactory references and Criminal Records Bureau Checks are obtained for all panel members before they commence work with the panel. The chair has a relevant background and expertise at a senior level in fostering and adoption services. The agency has written policies and procedures for the functioning of the panel. The panel has access to medical and educational expertise but the inspection did not clearly demonstrate that the panel has access to appropriate legal advice.

However this standard is assessed as reaching a low level of compliance because of serious concerns raised by the inspectors' observation of a panel in progress. Concerns raised included;

- The Fostering Manager was present as a member of the panel but then left her position to present a review which had been prepared by a supervising social worker who had left the employment of the agency. This raised a number of concerns about the blurring of boundaries in her roles.
- The procedures for the assessment of an applicant couple also raised a number of concerns. The text of the Form F was incomplete and insufficient attention had been given to a number of important areas. The unsatisfactory nature of the Form F demonstrated an inadequacy in the quality assurance and monitoring system of the agency and supervision of social workers preparing Form F assessments. A separate interview with the chair of the panel at a later date demonstrated that she has raised concerns with the Registered Provider on other occasions about the inconsistency of Form F assessments.
- the inspectors were concerned to observe that, contrary to accepted practice, applicants were not asked to leave the room during the panel discussion of their assessment.
- Neither the panel chair nor the vice-chair expressed any concern or proposed adjusting the panel procedure to address any of these issues raised.
- Viewing of documents and observation of a panel meeting demonstrated that there was some confusion concerning the appropriate functions of the decision maker.

The inspectors expressed their concerns about the functioning of the panel during extensive verbal feedback to the Fostering Manager and the Registered Provider at the conclusion of the inspection. They accepted the validity of the inspectors concerns and, as requested, provided a swift written response in which they acknowledged that the shortcomings outlined above were serious flaws which could have a negative impact on the quality assurance function of the panel. They further stated the agency's intention to provide immediate feedback to panel members and to address the issues raised in a joint staff/panel training event to be held in January 2005 to include training on regulations and standards, the roles and boundaries of panel members and on how to question applicants appropriately.

This report contains requirements compliance with which will ensure that the panel operates within the National Minimum Standards and The Fostering Regulations 2002.

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?

NO

If No please list below

STATUTORY REQUIREMENTS

Identified below are areas not addressed from the last inspection report which indicate a non-compliance with the Care Standards Act 2000 and Fostering Services Regulations 2002.

No.	Regulation	Standard	Required actions	
1	FSR 2002 42	FS9	<p>The agency must ensure that it notifies NCSC, without delay, of all events as required under Schedule 8.</p> <p>This requirement remains unmet at the time of this inspection and is repeated in this report.</p> <p>Failure to comply with requirements is a serious matter and can lead to the Commission taking enforcement action.</p>	<p>25.11.03</p> <p>Immediate</p>

2	FSR 2002 21	FS16	<p>The provider must ensure that the roles and responsibilities of individual managers and directors are clearly defined, and that clear responsibilities and expectations are set for the guidance and support of staff.</p> <p>This requirement remains only partially met at the time of this inspection. This report contains a requirement which states that the Registered Provider must supply the Commission with documentation demonstrating the steps taken by the agency to ensure that all staff receive appropriate training supervision and appraisal and are enabled from time to time to obtain further qualifications appropriate to the work they perform.</p> <p>Failure to comply with requirements is a serious matter and can lead to the Commission taking enforcement action.</p>	31.07.04 14 th February 2005
3	FSR 2002 21	FS19	<p>The agency must produce a formal annual training plan for all staff to ensure their ongoing professional development.</p> <p>This requirement remains unmet at the time of this inspection. This report contains a requirement which states that the Registered Provider must supply the Commission with documentation demonstrating the steps taken by the agency to ensure that all staff receive appropriate training supervision and appraisal and are enabled from time to time to obtain further qualifications appropriate to the work they perform.</p> <p>Failure to comply with requirements is a serious matter and can lead to the Commission taking enforcement action.</p>	30.06.04 14 th February 2005

Action is being taken by the Commission for Social Care Inspection to monitor compliance with the above requirements.

COMPLIANCE WITH CONDITIONS OF REGISTRATION (IF APPLICABLE)

(Registered Independent Fostering Agencies only)

Providers and managers of registered independent fostering agencies must comply with statutory conditions of their registration. The conditions applying to this registration are listed below, with the inspector's assessment of compliance from the evidence at the time of this inspection.

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Lead Inspector _____
Second Inspector _____
Locality Manager _____
Date _____

Signature _____
Signature _____
Signature _____

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	FSrR2002 4(a)	FS1	The Registered Provider must take immediate steps to undertake a fully comprehensive review of the Statement of Purpose which recognises the necessity to provide clear detailed information for all areas cited in Standard 1.4 of the National Minimum Standards for Fostering Services and must supply the Commission with a copy of the amended Statement of Purpose.	28 th February 2005
2	FSR2002 4(a)	FS1	The Registered Provider must take immediate steps to ensure that the Children's Guide is redesigned to result in the production of a format which is more appropriate to the ages of the children and young people being placed by the agency and that steps are taken to arrange for the guide to be produced in different formats to meet the needs of different groups of children. The Registered Provider must supply the Commission with documentation demonstrating compliance with this requirement.	28 th February 2005

3	FSR2002 8(2)(a) FS2002 20(3)(b)	FS2	The Registered Provider must supply the Commission with written details of an action plan designed to ensure ; 1)that the skills and competencies within senior management are assessed. 2)that management roles and responsibilities are defined and clarified ,gaps identified and action taken accordingly. 3) that management make good a previous failure to ensure that all senior and social work staff are thoroughly familiarised with the National Minimum Standards and with all Legislation relevant to the placement of Looked After Children in Foster Care.	14 th February 2005
4	FSR2002 44(3)(e)	FS4	The Registered Provider must provide the Commission with documentary evidence that the agency has ensured the provision of public liability and professional indemnity insurance for all staff and carers covering costs which could arise as a result of child abuse claims against staff or carers.	14 th February2 005
5	FSR2002 44(2)(a)	FS4	The Registered Provider must ensure that the Commission receives a copy of the agency's annual accounts, certified by an appropriately qualified accountant,	14 th February 2005
6	FSR2002 40(5)(c)	FS4	The Registered Provider must ensure that the Commission receives a statement of the agency's fee structure ,as provided to placing local authorities, including enhanced and standard fees and a clear illustration of the breakdown of how fees are allocated.	14 TH February 2005
7	FSR 2002	FS4	The Registered Provider was required ,at the time of the inspection, to provide documentary evidence of the implementation of a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers. this monitoring system to the Commission by 14 th January 2005. This requirement had been satisfactorily met at the time of completion of this report.	14 TH January 2005

8	FSR 2002 11(a)	FS6	The Registered Provider must provide documentation to the Commission demonstrating that they have taken steps to ensure that a quality assurance system is introduced and maintained to enable the Fostering Manager to ensure that supervising social workers carry out regular health and safety checks of the foster carers' homes for which they have responsibility and that efficient written records of such checks are maintained.	14 th February 2005
9	FSR 2002 11(a)		The Registered Provider must provide documentation to the Commission demonstrating that they have taken steps to ensure that a quality assurance system is introduced and maintained to enable the Fostering Manager to ensure that supervising social workers ensure that foster carers for who they have responsibility maintain relevant up-to date home and car insurance.	14 th February 2005
10	FSR2002 12(2)(b)(c) (d) FSR 2002 43	FS9	The Registered Provider must ensure that the agency informs the Commission without delay of incidents which qualify as Schedule 8 occurrences. This is a requirement which remains unfulfilled from the previous inspection report. Failure to comply with requirements is a serious matter and can lead to the Commission taking enforcement action	Immediate
11	FSR2002 14	FS10	The Registered Provider must ensure that each placed child's case records contain clear details of any agreed contact arrangements and contains a clear, efficiently maintained record of all contact and related issues.	Immediate
12	FS R2002 15	FS12	The Registered Provider must ensure that all children's case files contain the required basic health records.	Immediate
13	FSR 2002 15;17(3)(a)	FS12	The Registered Provider must supply documentation to the Commission demonstrating that the agency is pro-active in identifying and providing training for foster carers and supervising social workers with respect to special health needs which may commonly be presented by placed children and in identifying and accessing the support of relevant health care agencies.	28 th February 2005

14	FSR 2002 16(2)(c)	FS13	The Registered Provider must provide the Commission with documentation demonstrating that the agency has procedures in place which will ensure that each foster carer receives an allowance and agreed expenses, which cover the full cost of caring for each child or young persons placed with him or her and that payments are made promptly and at the agreed time.	14 th February 2005
15	FSR2002 16	FS13	This report contains a requirement which states that the Registered Provider must ensure that all case files contain efficiently maintained and up-to-date records relating to the educational plans and progress of all placed children.	Immediate
16	FSR 2002 17(1)	FS14	The Registered Provider must provide the Commission with documentation demonstrating that foster carers are provided with clear written requirements of what is expected of them as carers in terms of preparing children and young people for independent or semi-independent living.	14 th February 2005
17	FSR 2002 21(4)(a)(b)	FS19	The Registered Provider must supply the Commission with documentation demonstrating the steps taken by the agency to ensure that all staff receive appropriate training supervision and appraisal and are enabled from time to time to obtain further qualifications appropriate to the work they perform.	14 th February 2005
18	FSR 2002 19(a)(b)	FS17	The Registered Provider must provide documentation to the Commission demonstrating that they have ensured that, having regard to the size of the agency, its statement of purpose and the numbers and needs of the children placed by it and the need to safeguard and promote the health and welfare of children placed with foster parents, there is a sufficient number of suitably qualified, competent and experienced persons working for the purpose of the fostering service.	31 st March 2005

19	FSR 2002 17(3)	FS16	The Registered Provider must provide documentation to the Commission demonstrating steps taken by the agency to ensure that all carers have full access to the range of advice needed to provide a full service for children including appropriate childcare, medical, educational and other professional and legal advice.	14 TH February 2005
20	FSR 2002 17(1)	FS21	The Registered Provider must supply the Commission with documentation demonstrating that foster carers have received written communication which provides a clear outline of the respite protocol and procedures of the agency.	14 TH February 2005
21	FSR 200218(5)	FS22	The Registered Provider, must supply documentation to the Commission demonstrating that the agency has a system whereby complaints are recorded and monitored and the outcome evaluated to inform future provision of services.	14 th February 2005
22	FSR 2002 29(7)(a)(b) FSR 2002 8 FSR 2002 9(a)(b) FSR 2002 10(b0) FSR 2002 12	FS22	The Registered Provider must supply documentation to the Commission by demonstrating that the agency has a clear policy framework which outlines the circumstances in which a carer should be removed from the foster carer register.	14 th February 2005
23	FSR 2002 22	FS24	The Registered Provider must supply the Commission with a copy of a written policy on case recording which establishes the purpose, format and content of files, and clarifies what information is to be kept on the foster carers' files and what information is kept on the children's files.	14 th February 2005
24	FSR 2002 22	FS24	The Registered Provider must ensure that the files of placed children contain all the required Looked After Children documentation and/or a written record of attempts made, by the agency, to acquire such information.	Immediate

25	FSR 2002 44(c0)	FS28	The Registered Provider must supply the Commission with documentation demonstrating that the agency has clearly documented financial arrangements for control and supervision of its financial affairs and powers.	14 th February 2005
26	FSR 2002 44(c)	FS28	The Registered Provider must supply documentation to the Commission demonstrating how Banya clearly communicates its fee structure, including enhanced as well as standard fees, to placing local authorities including transparency over the breakdown of how fees are allocated.	14 th February 2005
27	FSR 2002 44(c)	FS27	The Registered Provider must supply the Commission with documentation demonstrating that the agency has procedures in place to deal with situations of financial crisis.	14 th February 2005
28	FSR 2002 20 (3)(b)	FS30	The Registered Provider must supply the Commission with documentation demonstrating the details of a panel training event to be held in January 2005 to include training on regulations and standards, the roles and boundaries of panel members, how to question applicants appropriately and the role of the decision maker.	14 th February 2005
20	FSR 2002 20 (3)(b)	FS30	The Registered Provider must supply the Commission with a copy of the minutes of the next panel meeting following the implementation of a panel training programme to be held in January 2005.	28 th February 2005
31				
32				
33				

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	FS23	That the Registered Provider ensures that the agency has developed an appropriate training programme to be undertaken by applicants undergoing assessment and an induction programme for newly approved carers.
2	FS23	That the Registered Provider ensures that where there are two adults in one household approved as joint carers, the agency ensures that each understands that they must successfully complete all the training and that each is trained in identified key areas prior to any child being placed in his or her home
3	FS25	That the Registered Provider ensures that the agency has systems in place to ensure that foster carers and placed children are enabled to view their records, in compliance with legal requirements, and that they are encouraged to make additions and comments and record any personal statements including statements of dissent.
4	FS26	the Registered Provider should seek ways of reducing any feeling of division between staff groups brought about by the current office arrangement.

* 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	9
Survey of placing authorities	NO
Foster carer survey	YES
Foster children survey	YES
Checks with other organisations and Individuals	YES
• Directors of Social services	NO
• Child protection officer	NO
• Specialist advisor (s)	NO
• Local Foster Care Association	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	YES
Observation of foster panel	YES
Inspection of policy/practice documents	YES
Inspection of records	YES
Interview with individual child	YES
Date of Inspection	11/10/04
Time of Inspection	10AM
Duration Of Inspection (hrs)	44

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

Viewing of documents demonstrated that the agency has a Statement of Purpose which provides clear details of the essential aims and objectives of the service. However there was a lack of provision of full information as required by the National Minimum Standards and The Fostering Services Regulations 2000 e.g. information about the financial dealings of the agency was extremely vague and limited and although the document contains a detailed list of staff of the agency it does not provide information about their relevant qualifications and experience. In addition the document states that the agency has received complaints but does not, as required by the National Minimum Standards, provide details of the numbers and outcomes of the complaints. The inspectors also discussed, with the Fostering Manager and the Registered Provider, the fact that the Statement of Purpose gave the address of the agency as being 11 Romola Road SE24 7BA when this was in fact only a correspondence address with the service actually operating from Units 1,6 and 7 in Croxted Mews, Croxted Road SE24 9BA and the company address being Spectrum House, Bromells Road SW4 0BN. As requested the Registered Provider has written to the Commission since the inspection confirming that the Registered Provider's address is now Spectrum House and that the Romola Road address is no longer in use. Although viewed documents stated that the Statement of Purpose had been updated and reviewed on 17th September 2004 the confusion about the agency's official address and the lack of consistency in the provision of detailed information lead to the conclusion that the inspection did not **clearly** demonstrate whether this document was formally approved by the Registered Provider nor whether it was reviewed, updated and modified on a regular basis.

Viewing of the agency's Children's Guide demonstrated that it provides only very basic information and is presented in the form of a document/form which is not designed to attract the attention of children or young people. The inspection did not demonstrate that the guide is available in a range of languages other than English.

This report contains a requirement which states that the Registered Provider must take immediate steps to undertake a fully comprehensive review of the Statement of Purpose which recognises the necessity to provide clear **detailed** information for **all** areas cited in Standard 1.4 of the National Minimum Standards for Fostering Services and must supply the Commission with a copy of the amended Statement of Purpose by 28th February 2005.

This report contains a requirement which states that the Registered Provider must take immediate steps to ensure that the Children's Guide is redesigned to result in the production of a format which is more appropriate to the ages of the children and young people being placed by the agency and that steps are taken to arrange for the guide to be produced in different formats to meet the needs of different groups of children. The Registered Provider must supply the Commission with documentation by 28th February 2005 demonstrating compliance with this requirement.



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?	2
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Inspection of documents and interview with the Fostering Manager demonstrated that she has a professional qualification relevant to working with children and that, prior to her employment by the agency, she had extensive experience of statutory childcare and experience of working in another Independent Fostering Agency including working as a Senior Practitioner. She has recently successfully completed a qualification in management at NVQ4 Level. Observation during the inspection, interviews with supervising social workers and viewing of documents demonstrated that the Fostering Manager is extremely dedicated to attempting to lead and manage the social work team in a manner which will ensure that the fostering service delivers the best possible child care. However the findings of this inspection demonstrated that she has not been able to devise and implement appropriate quality assurance systems which would enable herself and other senior staff to effectively monitor the provision of the service on a regular and frequent basis and has instead operated an 'open door' policy of staff support and supervision. Staff interviewed stated that they felt very well supported but the inspectors are aware that this style of management has resulted in inconsistencies and inadequacies in certain areas of provision which are reflected throughout this report and have resulted in this report containing a large number of requirements which relate to the need for management to exercise more stringent quality assurance and monitoring systems.

Interviews with the Registered Provider who is also the Service and Finance Director, and with the Development Manager, who has a qualification in the field of therapeutic work with children and with the Operational / Educational Manager demonstrated that, although well motivated to provide a 'therapeutic' experience for placed children none have any extensive experience of work within the field of statutory child care. The Service and Finance Director and the Operational/Educational Manager have a number of years experience of working in higher education and have been involved with Banya since its inception in 1997 but neither have experience of working extensively in any childcare setting. The inspectors concluded that many of the shortcomings demonstrated in this inspection resulted from this lack of experience and consequent lack of true recognition of the statutory basis and responsibilities underlying the work of an Independent Fostering Agency. This has led to a further lack of true recognition of the skills and experience needed by the supervising social workers some of whom stated that they felt there was an uncomfortable division between themselves and the senior management. These concerns were communicated to the Registered Provider as a matter of urgency during extensive verbal feedback at the end of the inspection. He acknowledged the validity of these concerns and, as requested provided a swift written response to the Commission in which he stated that in order to address these weaknesses

the skills and competencies available within senior management will be assessed ,management roles and responsibilities will be defined and clarified, gaps identified and action taken accordingly. He also acknowledges that management needs to make good its previous failure to ensure that all National Minimum Standards are being fully met.

In order to ensure full compliance with Regulation 8 (2)(a) of the Fostering Services Regulations 2002 which states ‘if the Registered Provider is an individual he shall undertake from time to time such training as is appropriate to ensure that he has the experience and skills necessary for managing a fostering agency’ this report contains a requirement which states that the Registered Provider must supply the Commission ,by 14th February 2005 2005, with written **details of an action plan** designed to ensure ;

- 1) that the skills and competencies within senior management are assessed.
- 2 that management roles and responsibilities are defined and clarified with gaps identified and action taken accordingly.
- 3) that management make good a previous failure to recognise the need to ensure that **all** senior and social work staff are thoroughly familiarised with the National Minimum Standards and all legislation relevant to the placement of Looked After Children in Foster Care.

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?

2

Viewing of documents and interviews with members of the management team demonstrated that there are systems in place to attempt to ensure that the agency receives appropriate written references and evidence of Criminal Records Bureau checks on all staff undertaking senior roles within the service. However the inspection did demonstrate shortcomings in the personnel details of one senior staff member. The person’s file did not contain photographic evidence of identity, the application form for the Criminal Records Bureau check was missing and the information provided about the date of birth was confusing. These matters were raised during the inspection and the Registered Provider took immediate steps to rectify the deficiencies.

Viewing of documents also demonstrated that referees for the same senior member of staff could confirm their ability to nurture students in higher education but could not confirm their organisational skill, their ability to relate to children or vulnerable people or their knowledge of welfare matters. These issues relate to the concerns expressed in Standard 2 about the extent of relevant statutory and professional child welfare knowledge amongst the senior management group. The requirement contained in standard 2 is relevant to this standard.

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

The inspection demonstrated serious deficiencies in the requirements of this standard which have had a significant impact on satisfactory compliance with a wide range of other standards. Insufficient attention has been given to the need to develop and maintain quality assurance systems which will enable management to accurately monitor the activities of the service.

This problem had been highlighted prior to the inspection by two separate situations.

Prior to the inspection the Commission had received complaints from a foster carer and from the local authority which placed the foster child for whom she was caring. The child had been diagnosed with Autism, Attention Deficit Hyperactivity Disorder and a Sleep Disorder. The foster carer and the placing authority complained that the supervising social worker from Banya had not visited the carer and the child with the required regular frequency and that the agency had not seemed to fully comprehend the nature of the child's special needs and therefore the particular challenges of the placement. Interviews with staff and with the complainants and viewing of case records demonstrated that management had not ensured that the foster carer and child were being visited with the required basic frequency. The complaints were upheld. However the inspection demonstrated that some supervising social workers were extremely conscientious in accessing full and appropriate support and advice for foster carers whose placed children have special needs.

In another case prior to the inspection, one of the inspectors had attended complex strategy meetings held because of allegations of emotional abuse made by a young person in the care of one of Banya's foster carers. The young person and their siblings were subsequently removed from the placement and a child protection investigation was to be undertaken. Inspection of documents did not demonstrate that the foster carer had been visited and the children seen within the acceptable framework of the Fostering Services Regulations. The Commission only became aware of the allegations of abuse when notified by the independent reviewing officer who was chairing the complex strategy meetings. The agency did not made the required schedule 8 notification to the Commission until reminded by the inspector attending the meetings despite the last inspection report containing a requirement which stated that the agency must ensure that the necessary procedures were followed.

The inspectors were also concerned to find that a child in the care of one foster carer visited during the course of the inspection had been involved in a road accident outside the carer's home which had resulted in the child sustaining a severely broken ankle. The carers had taken all necessary steps to ensure that the child received appropriate treatment and had promptly informed the agency and the placing authority. However the agency had not notified the Commission under the requirements of Schedule 8. The inspectors were also concerned that the foster carers live some distance outside London and that, although having experience from working with another agency, still require the necessary regular

contact through visits and telephone calls. The inspection did not demonstrate that such contact was being implemented and maintained.

In interview the Registered Provider stated that it was hoped that the forthcoming introduction of the use of the 'Foster Track ' computer system will ease the appropriate maintenance of necessary records. The agency has also now produced a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers. The Registered Provider was required ,at the time of the inspection, to provide documentary evidence of the implementation of this monitoring system to the Commission by 14th January 2005. This requirement had been satisfactorily met at the time of completion of this report.

The annual accounts of the agency for the year ended June 2003 were viewed demonstrating that they had been certified by an appropriately qualified accountant. In interview the Registered Provider stated that he would ensure that the Commission was provided with up to date accounts at the earliest opportunity.

The inspection also included further examination of financial issues arising from the aforementioned complaint concerning the placement of the child with multiple special needs described in the second paragraph of this standard. Both the foster parent and a manager of the placing authority had complained to the Commission about lack of openness on the part of the agency with respect to the details of the allocation an enhanced fee paid by the placing authority in recognition of the challenging nature of the placement. The placing authority manager was particularly concerned about the fact that Banya would not provide a clear breakdown of the agency's use of the portion of the enhanced fee retained by the agency .The Commission's investigation resulted in this aspect of the complaint being upheld. As a result of this complaint procedure and of concerns raised by some foster carers about confusion about allocation of money for some essential expenses, the Registered Provider, in response to a request made during verbal feedback following the inspection, has provided written confirmation of the agency's acceptance that the agency's fee structure, including enhanced and standard fees needs to be communicated more clearly to placing authorities including transparency over the breakdown of how fees are allocated. The Registered Provider has also provided written confirmation that a detailed list is to be sent to all foster carers with probable costs stated as transparently as possible.

The inspectors did not view documentary evidence demonstrating that the agency has ensured the provision of public liability and professional indemnity insurance for all staff and carers covering costs which could arise as a result of child abuse claims against staff or carers.

This report contains a requirement which states that the Registered Provider must provide the Commission, by 14th February 2005, with documentary evidence that the agency has ensured the provision of public liability and professional indemnity insurance for all staff and carers covering costs which could arise as a result of child abuse claims against staff or carers.

This report contains a requirement which states that the Registered Provider must ensure that the Commission receives, by 14th February 2005, a copy of the agency's annual accounts, certified by an appropriately qualified accountant, for the year ending June 2004.

This report also contains a requirement which states that the Registered Provider must

ensure that the Commission receives, by 14th February 2005, a statement of the agency's fee structure, as provided to placing local authorities, including enhanced and standard fees and a clear illustration of the breakdown of how fees are allocated.

Number of statutory notifications made to CSCI in last 12 months: 2

Death of a child placed with foster parents.	X
Referral to Secretary of State of a person working for the service as unsuitable to work with children.	X
Serious illness or accident of a child.	1
Outbreak of serious infectious disease at a foster home.	X
Actual or suspected involvement of a child in prostitution.	X
Serious incident relating to a foster child involving calling the police to a foster home.	X
Serious complaint about a foster parent.	1
Initiation of child protection enquiry involving a child.	3

Number of complaints made to CSCI about the agency in the past 12 months: 2

Number of the above complaints which were substantiated: 2

Standard 5 (5.1 - 5.4)

The fostering service is managed effectively and efficiently.

Key Findings and Evidence	Standard met?	2
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Interviews with the Fostering Manager demonstrated that she had clear ideas about what was needed to ensure effective and efficient management of the fostering service and a strong motivation to put good practice into place. It was clear that her work for Banya was not compromised by any other high level duties or responsibilities outside the agency. Interviews with supervising social workers and with carers demonstrated that they felt well supported by the Fostering Manager. However, although the inspection demonstrated that, in response to a requirement of the last inspection, there has been some clarification of the roles and responsibilities of other senior management figures and some clarification of the lines of accountability, social work staff remain quite confused about these areas.

The expansion of the agency combined with a shortage of staff, including the lack of a Senior Practitioner to assist the Fostering Manager and the lack of experience of statutory childcare work amongst other senior management staff, has resulted in the demands on the Fostering Manager being such that it has been difficult for her to 'stand back' from the day-to-day preoccupations of the agency in order to develop her quality assurance and monitoring roles. This has then had a negative impact on the efficiency and effectiveness of management. This situation will hopefully be resolved if the agency is successful in its current recruitment drive to employ a Senior Practitioner and further social work staff and if senior management follow through the requirements contained in standard 2 which will ensure that they fully comprehend the full scope of the statutory framework within which an Independent Fostering Agency must operate including the National Minimum Standards for Fostering Services, The Fostering Regulations 2002 and all associated Child Care Legislation.

Securing and Promoting Welfare

The intended outcome for the following set of standards is:

- The fostering service promotes and safeguards the child/young person's physical, mental and emotional welfare.

Standard 6 (6.1 - 6.9)

The fostering service makes available foster carers who provide a safe, healthy and nurturing environment.

Key Findings and Evidence	Standard met?	2
<p>Visits to a total of six foster carers demonstrated that each home was warm, homely, adequately furnished and maintained to a good standard of cleanliness and hygiene. All homes visited were free of avoidable hazards and contained equipment appropriate to the placed children's ages, development and levels of ability. Documents viewed demonstrated that the foster carers' preparation and training cover health and safety issues. Interviews with carers indicated that supervising social workers carried out regular health and safety checks of the carers homes.</p> <p>However inspection of carers' files did not demonstrate a consistent recording of such health and safety checks. Inspection of carers' files also demonstrated inconsistency in the presence of up-to –date home insurance documents and motor insurance.</p> <p>This report contains a requirement which states that the Registered Provider must provide documentation to the Commission by 14th February 2005 demonstrating that they have taken steps to ensure that a quality assurance system is introduced and maintained to enable the Fostering Manager to ensure that supervising social workers carry out regular health and safety checks of the foster carers' homes for which they have responsibility and that efficient written records of such checks are maintained.</p> <p>This report also contains a requirement which states that the Registered Provider must provide documentation to the Commission by 14th Febuary 2005 demonstrating that they have taken steps to ensure that a quality assurance system is introduced and maintained to enable the Fostering Manager to ensure that supervising social workers ensure that foster carers for who they have responsibility maintain relevant up-to date home and car insurance.</p>		

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

Interviews with management staff and foster carers, viewing of documents and visits to foster carers' homes demonstrated that the agency attempts to ensure that foster carers provide care which respects and preserves each child's ethnic, religious and cultural background. However attendance at the staff meeting demonstrated that some supervising social workers were dissatisfied with what they perceived as a lack of pro- active action on the part of management to ensure that the agency was fully aware of relevant cultural events and support in the area.

Interviews with staff and foster carer and viewing of case files demonstrated an inconsistency between supervising social workers with respect to the extent to which they were prepared to go to ensure that foster carers received comprehensive information and appropriate support when caring for children with special needs. Prior to the inspection the Commission had received complaints from a foster carer and from the local authority which placed the foster child for whom she was caring. The child has been diagnosed with Autism, Attention Deficit Hyperactivity Disorder and a Sleep Disorder. The foster carer and the placing authority complained that the supervising social worker from Banya had not visited the carer and the child with the required regular frequency and that the agency had not seemed to fully comprehend the nature of the child's special needs and therefore the particular challenges of the placement. Interviews with staff and with the complainants and viewing of case records demonstrated that management had not ensured that the foster carer and child were being visited with the required basic frequency and that management were not pro-active in ensuring that they acquainted themselves with comprehensive information about the special needs of the child and were thus unable to offer appropriate guidance to the supervising social worker. The complaints were upheld.

However the inspection demonstrated that some supervising social workers were extremely conscientious in accessing full and appropriate support and advice for foster carers whose placed children have special needs.

The inspectors are of the opinion that the shortcomings in the fulfilment of the requirements of this standard reflect the need for more stringent quality assurance procedures and for regular supervision of each supervising social worker in order to ensure consistency of service across all placements. In response to the complaints investigation the agency has produced a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers. The Registered Provider was required This requirement has been satisfactorily met at the time of the completion of this report

This report also contains a requirement which states that and that efficient records of each session are maintained and signed by the supervisor and the social worker the Registered Provider must provide documentation to the Commission by 28th February2005 demonstrating that each supervising social worker is receiving regular supervision sessions.

This report also contains an requirement which states that the Registered Provider must provide documentation to the Commission by 28 February 2005 demonstrating steps taken to ensure that supervising social workers receive appropriate training to ensure that they are able to provide appropriate support to foster carers under their supervision who are caring for children with special needs.

This report also contains a recommendation that the Registered Provider takes steps to ensure that the agency is pro-active in accessing information about resources in the local community relevant to issues of ethnicity and of health education.

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

Interviews with management, staff and carers and visits to carers and placed children demonstrated that the agency attempts to ensure that placement decisions consider each child's assessed racial, ethnic, religious, cultural and linguistic needs and to match these as closely as possible with the ethnic origin, race, religion, culture and language of the foster family. However inspection of carers and children's files demonstrated an inconsistency in the presence of required local authority placement papers and other documentation to evidence the appropriate following of these procedures. One file was almost completely devoid of such official documents or of any recording providing any written information about the placement although a visit to the foster carers demonstrated that highly appropriate placements had been made. Whilst acknowledging that the agency may not always be able to control the provision of the necessary documents by placing authorities it is imperative that records are maintained to evidence good practice.

This report contains a requirement which states that the Registered Provider must provide the Commission, by 14th February 2005, with documentation demonstrating the development of a quality assurance system designed to ensure that all case files contain the necessary Looked After Children documents including ensuring that staff maintain a written record of attempts made to acquire such documentation.

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

Attendance at a training session for foster carers demonstrated that comprehensive training is provided in order to enable carers to recognise signs of physical, emotional, psychological and sexual abuse and in caring for a child/young person who has been abused. Viewing of documents demonstrated that the agency has an appropriate written policy and guidelines to be used in circumstances in which it is suspected or alleged that a child/young person is the subject of abuse.

Viewing of documents demonstrated that the agency has procedures in place to address any instance of bullying and that foster carers are provided with a clear written procedure to use

when a foster child is missing from home. Viewing of documents also demonstrated that the agency provides written information for foster carers stating that corporal punishment and all forms of humiliating treatment or punishment are unacceptable.

However, prior to the inspection, one of the inspectors had attended complex strategy meetings held because of allegations of emotional abuse made by a young person in the care of one of Banya's foster carers. The young person and their siblings were subsequently removed from the placement and a child protection investigation was to be undertaken. It is of concern that, despite a requirement in the last inspection report stating that the Registered Provider must ensure that the agency informs the Commission without delay of incidents which qualify as schedule 8 occurrences, the Commission received no notification from the agency of the allegations made against the foster carer and was only alerted to the situation when invited to a complex strategy meeting by the independent reviewing officer. Interview with the fostering manager demonstrated that concerns had been raised at an earlier stage but had not been officially recognised within the agency. In addition inspection of documents did not demonstrate that the foster carer had been visited and the children seen within the acceptable framework of the Fostering Services Regulations. The agency has now produced a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers.

The inspectors were also concerned to find that a child in the care of one foster carer visited during the course of the inspection had been involved in a road accident outside the carer's home which had resulted in the child sustaining a severely broken ankle. The carers had taken all necessary steps to ensure that the child received appropriate treatment and had promptly informed the agency and the placing authority. However the agency had not notified the Commission under the requirements of Schedule 8. The inspectors were also concerned that the foster carers live some distance outside London and that, although having experience from working with another agency, still require the necessary regular contact through visits and telephone calls. The inspection did not demonstrate that such contact was being implemented and maintained.

This report contains an immediate requirement which states that the Registered Provider must ensure that the agency informs the Commission without delay of incidents which qualify as Schedule 8 occurrences. **This is a requirement which remains unfulfilled from the previous inspection report. Failure to comply with requirements is a serious matter and can lead to the Commission taking enforcement action.**

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

Interviews with management, supervising social workers foster carers and with placed children demonstrated that the agency places emphasis on promoting family contacts and friendships as set out in the individual child's care plan. However compliance with this standard was not consistently evidenced within inspected case records.

This report contains an immediate requirement which states that the Registered Provider must ensure that each placed child's case records contain clear details of any agreed contact arrangements and contains a clear, efficiently maintained record of all contact and related issues.

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

Interviews with individual carers and viewing of training plans demonstrated that Banya places emphasis ensuring that foster carers understand the importance of listening effectively to the children in their care and that carers are supported and trained in listening to and responding to children's views. The agency has established a children's group.

However viewing of case files did not demonstrate consistency amongst supervising social workers in ensuring that they met with placed children within the time frame contained in the Fostering Services Regulations 2002. The agency has produced a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers. The Registered Provider was required, at the time of the inspection, to provide documentation to the Commission by 14th January 2005 demonstrating the actual implementation of the use of this quality assurance procedure including records of supervising social workers meetings, or attempted meetings with placed children. At the time of completion of this report this requirement had been satisfactorily met.

The Children's Guide includes clearly presented information about how to raise a complaint including contact details for the Commission.

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

Viewing of documents and interviews with carers demonstrated that the agency provides appropriate training for carers on the basic health needs of children and young people. Two of the inspectors attended a foster carer's training session in which a carer presented a very informative talk on 'glue ear' her interest having been stimulated by her experience of the condition being undiagnosed in a foster child resulting in the child being referred to a

psychiatrist for exhibiting 'communication difficulties'.

However viewing of case records demonstrated that a significant number of case files did not contain the required basic health records and viewing of records and interviews with carers caring for children with special needs demonstrated an inconsistency in relation to their experiences of support and advice provided by their supervising social workers. The level of such support and advice seemed to depend on the personal knowledge of the individual social worker and on what effort they were prepared to take to educate themselves and the foster carers.

Prior to the inspection the Commission had received complaints from a foster carer and from the local authority which placed the foster child for whom she was caring. The child has been diagnosed with Autism, Attention Deficit Hyperactivity Disorder and a Sleep Disorder. The foster carer and the placing authority complained the supervising social worker from Banya had not visited the carer and the child with the required regular frequency and that the agency had not seemed to fully comprehend the nature of the child's special needs and therefore the particular challenges of the placement. Interviews with staff and with the complainants and viewing of case records demonstrated that management had not ensured that the foster carer and child were being visited with the required basic frequency and that management were not pro-active in ensuring that they acquainted themselves with comprehensive information about the special needs of the child and were thus unable to offer appropriate guidance to the supervising social worker. The complaints were upheld.

This report contains an immediate requirement which states that the Registered Provider must ensure that all case files contain the required basic health records.

The agency has produced a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers. This procedure could be used to ensure that the Fostering Manager is alerted to any special health needs demonstrated by a child in placement thus further ensuring that the agency can identify and implement any required knowledge and special provision. At the time of the inspection the Registered Provider was required to provide documentation to the Commission by 14th January 2005 demonstrating the actual implementation of the use of this quality assurance procedure. This requirement had been satisfactorily met at the time of the completion of this report.

This report contain a requirement which states that the Registered Provider must supply documentation to the Commission, by 28th February 2005, demonstrating that the agency is pro-active in identifying and providing training for foster carers and supervising social workers with respect to special health needs which may commonly be presented by placed children and in identifying and accessing the support of relevant health care agencies.

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

Viewing of policy documents and interviews with carers demonstrated that Banya gives a high priority to helping foster carers meet the educational needs of the children placed in their care. The manager stated that all children placed with the agency are involved in appropriate education. The agency arranges an 'Educational Award' for children which acknowledges their progress and achievements. The inspection demonstrated that foster carers attend Looked after Children's Reviews and school parents ' evenings. Visits to carers' homes provided evidence that carers encouraged children to complete homework and other assignments. Interviews with carers demonstrated that the agency usually ensures that funding is available for basic school uniform and other required equipment.

However some foster carers stated that they had had, on occasion, to wait for a long period to receive funding for certain items needed to ensure that placed children had all the equipment necessary to fully engage in their education placement. This delay had resulted in their experiencing considerable financial problems as they had paid for the required items out of their own funds. Such problems usually arose as a result of a delay in the placing authority paying the agency. This situation was discussed with the Registered Provider at the initial verbal feedback following this inspection. Both at that time and in a written response received by the Commission a week after the conclusion of the inspection, the Registered Provider stated that delays in payment to foster carers can occur when there is doubt as to whether reimbursement from a local authority is going to be agreed but that ,as soon as Banya is sure that a payment will eventually be made, payment to the foster carer is made expeditiously sometimes months before Banya receives that sum from the placing authority. The written feedback also states that ,in order to address a perceived lack of clarity as to what foster carers can and cannot claim, a detailed list is to be sent to all foster carers, with probable costs stated as transparently as possible.

Whilst acknowledging this response this report contains a requirement which states that the Registered Provider must provide the Commission ,by 14th February 2005, with documentation demonstrating that the agency has procedures in place which will ensure that ensure that each foster carer receives an allowance and agreed expenses, which cover the **full** cost of caring for each child or young persons placed with him or her and that payments are made promptly and at the agreed time. Compliance with this requirement will ensure that foster carers receive all funding necessary to ensure that each placed child receives all items necessary to ensure that they can fully partake in an appropriate educational/training programme.

This report also contains a requirement which states that the Registered Provider ensures that the Commission receives, by 14th February 2005, a copy of a detailed list designed to address a perceived lack of clarity as to what foster carers can and cannot claim and with probable costs stated as transparently as possible.

Inspection of case files did not demonstrate consistency in the maintenance of all records relevant to the educational plans and progress of all placed children.

This report contains an immediate requirement which states that the Registered Provider must ensure that all case files contain efficiently maintained and up-to-date records relating to the educational plans and progress of all placed children.

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

Viewing of documents demonstrated that the agency provides training for foster carers designed to enable them to provide effective support and guidance to young people preparing to move into independent or semi-independent living. This included information and guidance on working with placing authorities to ensure the implementation of an effective Pathway Plan.

However meetings with foster carers demonstrated an inconsistency in their understanding of the usefulness of such training and of the importance of recognising the need to prepare themselves and their foster children emotionally and psychologically for the fact that placing authorities would be following the recognised statutory processes relating to foster children's movements towards independence.

This report contains an requirement which states that the Registered Provider must provide the Commission , by 14th February 2005 , with documentation demonstrating that foster carers are provided with clear written requirements of what is expected of them as carers in terms of preparing children and young people for independent or semi-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**

Viewing of documents demonstrated that the agency has clearly written recruitment and selection procedures for the appointment of staff, which follow good practice in safeguarding children and young people. From an examination of a sample of staff files, there was evidence that individuals working for the agency are interviewed, and have references checked to assess suitability before taking on responsibilities. Recording of the content of interviews are undertaken during the process. The service had records of checks and references that had been obtained, and their outcomes. Panel members' files contained CV's of their relevant background skills, and copies of their CRB checks. All staff assessing foster carers had appropriate skills or qualifications consistent with the expectations of the National Minimum Standards. Unqualified staff were only able to carry out social work tasks under the direct supervision of qualified workers. Interview with the recently appointed well qualified and experienced Human Resources Officer demonstrated that they had already acquired a good understanding of the workings of the agency and of the contributions they could make to enable the appointment and retention of suitably qualified staff.

The inspection demonstrated that, with the exception of the Fostering Manager senior management staff did not have previous wide experience in any form of statutory and/or Independent Fostering social work. During the verbal feed back at the end of the inspection the inspectors stated that they had concluded that, although the inspection demonstrated the care and concern of the agency to nurture and support carers and children, many of the concerns raised by the inspection reflected this lack of knowledge and understanding which could have a serious impact on the necessary monitoring and safeguarding of the welfare of placed children. As requested by the inspectors, the Registered Provider and the Fostering Manager provided a written response to the feedback within a week of the inspection. They acknowledged the validity of the inspectors' comments and stated that the skills and competencies within senior management are to be assessed and that management roles and responsibilities will be defined and clarified with gaps identified and action taken accordingly. They further acknowledge that management need to make good a previous failure to recognise the need to ensure that the agency fully meets all the National Minimum standards and that all staff will be further familiarised with the National Minimum Standards.

This report contains a requirement which states that the Registered Provider must supply the Commission ,by 14th February 2005, with written **details of an action plan** designed to ensure ;

- 1) that the skills and competencies within senior management are assessed.
- 2) that management roles and responsibilities are defined and clarified with gaps identified and action taken accordingly.
- 3)that management make good a previous failure to recognise the need to ensure that **all** senior and social work staff are thoroughly familiarised with the National Minimum Standards and all legislation relevant to the placement of Looked After Children in Foster Care.

Total number of staff of the agency:

16

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

2

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?

1

Interviews with the Fostering Manager and inspection of documents demonstrated that she has extensive experience in the field of statutory child care and had substantial past experience of working at a senior level in another Independent Fostering Agency before taking up her current post. She has recently completed a relevant course in management. Interviews with supervising social workers demonstrated that, although they understood the role of the Fostering Manager and felt well supported by her, they were very unclear about the actual roles and responsibilities of other senior management staff. This issue was raised at the last inspection resulting in a requirement in the last inspection report which stated that 'The registered provider must ensure that the roles and responsibilities of individual managers and directors are clearly defined'. **The current inspection did not demonstrate that this requirement has been fully met and so it is repeated in this inspection report. Non – compliance with requirements is a serious matter and can result in the Commission taking enforcement action.**

Although supervising social workers stated that they felt well supported and supervised by the Fostering Manager inspection of records did not demonstrate that recorded formal supervision took place on a regular, frequent basis, the manager and staff stating that she operates an 'open door' policy which means that she is always available for consultation on an 'ad hoc' basis. However the inspection demonstrated that this mode of operation combined with a lack of relevant knowledge at other levels of senior management and the expansion of the number of foster carers has had a negative impact on the efficiency of management and monitoring systems within the agency. This in turn has contributed to two instances in which the Fostering Manager did not ensure that appropriate action was taken.

Prior to the inspection the Commission had received complaints from a foster carer and from the local authority which placed the foster child for whom she was caring. The child has been diagnosed with Autism, Attention Deficit Hyperactivity Disorder and a Sleep Disorder. The foster carer and the placing authority complained the supervising social worker from Banya had not visited the carer and the child with the required regular frequency and that the agency had not seemed to fully comprehend the nature of the child's special needs and therefore the particular challenges of the placement. Interviews with staff and with the complainants and viewing of case records demonstrated that management had not ensured that the foster carer and child were being visited with the required basic frequency and that management were not pro-active in ensuring that they acquainted themselves with comprehensive information about the special needs of the child and were thus unable to offer appropriate guidance to the supervising social worker. The complaints were upheld.

Prior to the inspection, one of the inspectors had attended complex strategy meetings held by a local authority because of allegations of emotional abuse made by a young person in the care of one of Banya's foster carers. The young person and their siblings were subsequently removed from the placement and a child protection investigation was to be undertaken. It is of concern that, despite a requirement in the last inspection report stating that the Registered Provider must ensure that the agency informs the Commission without delay of incidents which qualify as schedule 8 occurrences, the Commission received no notification from the agency of the allegations made against the foster carer and was only alerted to the situation when invited to a complex strategy meeting by the independent reviewing officer. Interview with the fostering manager demonstrated that concerns had been raised at an earlier stage but had not been officially recognised within the agency. In addition

inspection of documents did not demonstrate that the foster carer had been visited and the children seen within the acceptable framework of the Fostering Services Regulations.

Attendance at a meeting of the panel demonstrated that an inadequate Form F assessment, prepared by a member of staff from the Eastbourne office, had not been appropriately monitored before presentation at panel.

The agency has now produced a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers and the Fostering Manager has expressed her wish to develop other quality assurance procedures. However the inspectors felt it necessary to further discuss their concerns about these issues during an extensive verbal feedback session with the Fostering Manager and the Registered Provider at the conclusion of the inspection. They stated at that time that they acknowledged the validity of the inspectors concerns and, as requested, supplied the Commission within a week of the close of the inspection with written confirmation of the following steps to be taken to constructively address the identified shortcomings;

- The agency is actively seeking to appoint a Senior Practitioner. It is proposed that this person will undertake the supervision of supervising social workers thus freeing the Fostering Manager to develop and monitor comprehensive quality assurance procedures and to more fully address other managerial responsibilities.
- The skills and competencies within senior management are to be assessed and that management roles and responsibilities will be defined and clarified with gaps identified and action taken accordingly.

Viewing of documents, observation of a foster carer training session and interviews with carers demonstrated that the agency is developing and refining its training provision for carers including the provision of NVQ training. Those carers who had been with the agency since it's beginning were particularly impressed with what they perceived as an increasing sophistication of training provision.

The inspection demonstrated that social work staff could be involved in joint training with carers. However, although one of the inspectors viewed a document circulated to staff in order for them to identify their individual training needs, staff interviews and viewing of staff files did not demonstrate that the agency is pro-active in accessing and encouraging the separate professional training and development of the supervising social work staff who are at the centre of the professional functioning of the agency. This concern was addressed during the verbal feedback at the conclusion of the inspection in response to which, as requested, the Registered Provider and the Fostering Manager have provided written confirmation to the Commission stating the agency's recognition of the fact that the training needs of staff need to be pushed forward and that a pro-active direction is to be taken to identify training needs and courses to meet them ,with urgent attention to the need to address the need for supervising social workers to undertake Post-Qualifying Qualifications. Interview with the newly appointed Human Resources Officer had indicated that they had a clear understanding of the need to establish efficient and relevant training profiles for all staff.

This report contains a requirement which states that the Registered Provider must supply the Commission, by 14th February 2005, with documentation demonstrating the steps taken by the agency to ensure that all staff receive appropriate training supervision and appraisal and from time to time are enabled to obtain further qualifications appropriate to the work they perform.

Attendance at a staff meeting, interviews with the Fostering Manager and with staff and viewing of documents as well as consideration of the complaints detailed above demonstrated an inconsistency between supervising social workers with respect to the extent to which they were prepared to go to ensure that foster carers received comprehensive information and appropriate support especially with respect to special health and educational needs. This inconsistency is another shortfall which could be avoided by effective monitoring and supervision but also reflects the need for the agency to be pro-active in ensuring that carers have full access to the range of advice needed to provide a full service for children.

This report contains a requirement which states that the Registered Provider must provide documentation to the Commission, by 14th February 2005, demonstrating steps taken by the agency to ensure that all carers have full access to the range of advice needed to provide a full service for children including appropriate childcare, medical, educational and other professional and legal advice.

Standard 17 (17.1 - 17.7)

The fostering service has an adequate number of sufficiently experienced and qualified staff and recruits a range of carers to meet the needs of children and young people for whom it aims to provide a service.

Key Findings and Evidence

Standard met?

2

Viewing of documents and interviews with the Fostering Manager, supervising social workers and a number of foster carers demonstrated that the agency has a recruitment policy and strategy aimed at recruiting a range of carers to meet the needs of the children and young people for whom it provides a service. However viewing of records and of panel meeting minutes and interview with the chair of the panel indicated that there could be inconsistency in the standard of the Form F assessment process.

This inconsistency is another instance of a concern which could be addressed by the Fostering Manager applying and monitoring good quality assurance systems. Interview with the Fostering Manager and other observations during the inspection indicated that this shortfall again partially reflects the lack of appropriate professional social work support for the Fostering Manager at a senior level. During verbal feedback at the conclusion of the inspection the Fostering Manager and the Registered Provider expressed recognition of the fact the current social work staffing levels are not sufficient to address the needs of the agency which has greatly expanded its numbers of foster carers from the original twenty to a current level of sixty with responsibility, at any one time, for about one hundred placed children. In the subsequent requested written feedback the Registered Provider confirmed that the agency has advertised for a Senior Practitioner and for additional supervising social workers and sessional workers.

This report contains a requirement which states that the Registered Provider must provide documentation to the Commission, by 31st March 2005 demonstrating that they have ensured that, having regard to the size of the agency, its statement of purpose and the numbers and needs of the children placed by it and the need to safeguard and promote the health and welfare of children placed with foster parents, there is a sufficient number of suitably qualified, competent and experienced persons working for the purpose of the fostering service.

Standard 18 (18.1 - 18.7)

The fostering service is a fair and competent employer, with sound employment practices and good support for its staff and carers.

Key Findings and Evidence

Standard met?

2

Interviews with the Fostering Manager, supervising social workers and foster carers and viewing of documents demonstrated that there is inconsistency in implementation of sound practices with respect to carer supervision, appraisal and support. Some carers spoke very positively of the regularity and frequency of contact with their supervising social workers and reported a high level of support. However inspection of case records did not always provide the evidence to support these statements and the inspection demonstrated one foster care family which had originally been under the supervision of Banya's Boston office had experienced very little contact since that office closed and the London office had become responsible for their supervision and support. It was not clear whether the agency had been pro-active in ensuring contingency plans in the event of a crisis occurring for this family who live in a quite remote rural area.

As cited in relation to standard 7 prior to the inspection the Commission had received complaints from a foster carer and from the local authority which placed the foster child for whom she was caring. The child has been diagnosed with Autism, Attention Deficit Hyperactivity Disorder and a Sleep Disorder. The foster carer and the placing authority complained the supervising social worker from Banya had not visited the carer and the child with the required regular frequency and that the agency had not seemed to fully comprehend the nature of the child's special needs and therefore the particular challenges of the placement. Interviews with staff and with the complainants and viewing of case records demonstrated that management had not ensured that the foster carer and child were being visited with the required basic frequency and that management were not pro-active in ensuring that they acquainted themselves with comprehensive information about the special needs of the child and were thus unable to offer appropriate guidance to the supervising social worker. The complaints were upheld. The agency has now devised a quality assurance form which will enable the Fostering Manager to monitor the visits to carers carried out by the supervising social workers.

At the time of inspection the Registered Provider was required to provide documentation to the Commission, by 14th January 2005, demonstrating the actual implementation of a quality assurance form which will enable the Fostering Manager to monitor the visits to carers carried out by the supervising social workers. This requirement has been satisfactorily met at the time of the completion of this report.

Staff and the majority of carers interviewed stated that the agency provides an out of hours management and support service.

Viewing of documents demonstrated that the agency operates a sound health and safety policy for carers, children and staff. Viewing of documents also demonstrated that the agency has a grievance procedure which is made known to all staff and carers. However the Local Authority manager who had supported the complaint cited in this and other standards by one of Banya's foster carers had stated that the agency's internal complaints protocol was not very clear. The Registered Provider has responded by producing a new, clearer

written Complaints and Representation Procedure

The inspectors did not view documentary evidence demonstrating that the agency has ensured the provision of public liability and professional indemnity insurance for all staff and carers covering costs which could arise as a result of child abuse claims against staff or carers. This report contains a requirement which states that the Registered Provider must provide the Commission, by 14th February 2005, with documentary evidence that the agency has ensured the provision of public liability and professional indemnity insurance for all staff and carers covering costs which could arise as a result of child abuse claims against staff or carers.

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?	1
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The inspection demonstrated that social work staff could be involved in joint training with carers. However, although one of the inspectors viewed a document circulated to staff in order for them to identify their individual training needs, staff interviews and viewing of staff files did not demonstrate that the agency is pro-active in accessing and encouraging the separate professional training and development of the supervising social work staff who are at the centre of the professional functioning of the agency. This concern was addressed during the verbal feedback at the conclusion of the inspection in response to which, as requested, the Registered Provider and the Fostering Manager have provided written confirmation to the Commission stating the agency's recognition of the fact that the training needs of staff need to be pushed forward and that a pro-active direction is to be taken to identify training needs and courses to meet them with urgent attention to the need to address the need for supervising social workers to undertake Post-Qualifying Qualifications. Interview with the newly appointed Human Resources Officer had indicated that they had a clear understanding of the need to establish efficient and relevant training profiles for all staff.

This report contains a requirement which states that the Registered Provider must supply the Commission, by 14th February 2005, with documentation demonstrating the steps taken by the agency to ensure that all staff receive appropriate training supervision and appraisal and are enabled from time to time to obtain further qualifications appropriate to the work they perform.

Standard 20 (20.1 - 20.5)

All staff are properly accountable and supported.

Key Findings and Evidence

Standard met?

2

Viewing of documents and interviews with staff demonstrated that all staff have the opportunity to attend regular staff and team meetings.

Although supervising social workers stated that they felt well supported and supervised by the Fostering Manager inspection of records did not demonstrate that recorded formal supervision took place on a regular, frequent planned basis, the manager and staff stating that she operates an 'open door' policy which means that she is always available for consultation on an 'ad hoc' basis. The inspection did not clearly demonstrate that all staff receive regular planned appraisals.

This report contains a requirement which states that the Registered Provider must supply the Commission, by 14th February 2005, with documentation demonstrating the steps taken by the agency to ensure that all staff receive appropriate training supervision and appraisal and from time to time are enabled to obtain further qualifications appropriate to the work they perform.

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**

Interviews with management, supervising social workers and foster carers and general observation demonstrated that the majority of carers are well supported by their supervising social workers and by the agency as a whole. The inspection confirmed that the agency provides out- of-hours support, a well structured and supportive foster carers' support group, a foster carers' self help forum and that it is continuing to develop and refine the training and development programme for carers which includes access to NVQ training. Most carers stated that their supervising social worker visited on a monthly basis, maintained frequent and regular telephone contact , ensured that annual reviews were carried out and were pro-active in providing assistance and advice with regard to other relevant services e.g. health and education.

However, the inspection demonstrated that, although consultation with foster carers demonstrated that most did feel well supported there was some significant inconsistency in the level of support offered by supervising social workers and in the maintenance, by social workers, of records demonstrating an appropriate level of support. Prior to the inspection the Commission had received complaints from a foster carer and from the local authority which placed the foster child for whom she was caring. The child has been diagnosed with Autism, Attention Deficit Hyperactivity Disorder and a Sleep Disorder. The foster carer and the placing authority complained the supervising social worker from Banya had not visited the carer and the child with the required regular frequency and that the agency had not seemed to fully comprehend the nature of the child's special needs and therefore the particular challenges of the placement. Interviews with staff and with the complainants and viewing of case records demonstrated that management had not ensured that the foster carer and child were being visited with the required basic frequency and that management were not pro-active in ensuring that they acquainted themselves with comprehensive information about the special needs of the child and were thus unable to offer appropriate guidance to the supervising social worker. The complaints were upheld.

In response to a request made by the inspectors during verbal feedback at the conclusion of the inspection the Registered Provider and the Fostering Manager provided a written response to the Commission in which they stated that the agency recognises that visits by supervising social workers to carers need to be feasible at all times and that Banya's supervising social workers realise that they need to be available and to be highly flexible over this need. They also state that supervising social workers are to be reminded that they should meet requests for unscheduled meetings in carer's homes and that they should maintain frequent telephone contact as part of their commitment to foster carers and children in placement .

The agency has recently produced a quality assurance form which will enable the Fostering Manager to monitor the visits carried out by the supervising social workers. The Registered Provider was required, at the time of the inspection, to provide documentation to the Commission by 14th January 2005 demonstrating the actual implementation of the use of this quality assurance procedure. This requirement had been satisfactorily met at the time of the completion of this report.

The inspection also demonstrated that there is a need for the agency to further refine the documented strategies relating to the proposed training programme which should clearly demonstrate a need to enable carers to recognise the statutory framework within which they operate, the encouragement of the foster carers' self help group and protocol and

procedures designed to ensure that management is pro-active in ensuring that the agency can offer information, advice and assistance to carers with respect to the more complex issues which may arise in a placement e.g special educational or health needs.

This report contains a requirement which states that the Registered Provider must provide documentation to the Commission, by 14th February 2005, demonstrating steps taken by the agency to ensure that all carers have full access to the range of advice needed to provide a full service for children including appropriate childcare, medical, educational and other professional and legal advice.

Some carers expressed confusion with regard to the respite protocol and procedures. This was discussed with the Registered Provider and the Fostering Manager during verbal feedback at the end of the inspection. The Registered Provider assured the inspectors that the agency would take steps to ensure that foster carers received further clarification of this issue.

This report contains a requirement which states that the Registered Provider must supply the Commission, by 14th February 2005, with documentation demonstrating that foster carers have received written communication which provides a clear outline of the respite protocol and procedures of the agency.

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

Viewing of documents and interviews with staff and with foster carers demonstrated that ,at the time of the inspection, each approved foster carer was supervised by a named appropriately qualified social worker and that ,in the majority of cases, the carers reported that they had excellent access to adequate social work and other professional support and information and advice which enabled them to provide consistent, high quality care for the children and young people placed in their home. Most carers confirmed that they received regular visits from their supervising social worker and could contact them by telephone when necessary. However, as detailed in standards 7,18 and 21 the inspection did demonstrate that there was some inconsistency in the level of support offered by supervising social workers which has led the inspectors to conclude that it is of urgent importance that the agency develops appropriate quality assurance and monitoring systems which should include the regular recorded supervision of supervising social workers.

The agency provides out of hours management support and most carers interviewed stated that they could access support from their supervising social worker at any time including outside normal office hours. However the inspection demonstrated that there was again inconsistency with regard to the level of such support offered with some carers stating that they have sometimes had only telephone contact with their social worker when dealing with serious situations in which they would have felt more appropriately supported by a home visit. This issue was discussed with the Fostering Manager and the Registered Provider during extensive verbal feedback at the end of the inspection. They acknowledged the validity of the inspectors' concerns and ,as requested , provided a swift written response in which they stated that supervising social workers were to be reminded that they should meet

all requests for unscheduled meetings in carers' homes . This issue again raises the importance of the agency ensuring that supervising social workers receive regular focussed supervision which includes the use of an appropriate recording system consistent across all social work intervention by the agency which will enable senior staff to ensure that they maintain a clear picture of the work of the supervising social workers.

Viewing of documents, interviews with foster carers and visits to foster carers ' homes demonstrated that carers are given a handbook which covers policies, procedures, guidance and legal information including information about complaints procedures and information about procedures to deal with investigations into allegations of abuse.

Viewing of documents and interviews with management and with foster carers demonstrated that the agency does provide a respite service although some carers expressed confusion about the system.

The inspectors did not view documents demonstrating that complaints are recorded and monitored and the outcome evaluated to inform future provision of services. The inspectors did not view documents demonstrating that there is a clear policy framework which outlines the circumstances in which a carer should be removed from the foster carer register.

This report contains a requirement which states that the Registered Provider , must supply documentation to the Commission by 14th February 2005, demonstrating that the agency has a system whereby complaints are recorded and monitored and the outcome evaluated to inform future provision of services.

This report contains a requirement which states that the Registered Provider must supply documentation to the Commission by 14th February 2005, demonstrating that the agency has a clear policy framework which outlines the circumstances in which a carer should be removed 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
Interviews with the Fostering Manager,with the Development Manager and with carers, viewing of documents and observation of a foster carers' training session demonstrated that the agency provides an on-going programme of training for foster carers to develop their skills and tackle any weaknesses. The inspection demonstrated that this training fits within a framework of equal opportunities, anti-discriminatory practice and is organised to encourage and facilitate attendance by foster carers by including convenient times and a suitable venue which was undergoing development at the time of the inspection in order to further improve the available facilities. A number of foster carers are currently undertaking NVQ training, provided by the agency which is attempting to encourage all carers to engage in this training. The agency is instigating a support group for the birth children of foster carers. Viewing of carers' files demonstrated that most carers' Annual Reviews included an appraisal of training and development needs which are also documented in the carer's annual reviews. Carers who had worked for the agency since its inception spoke very appreciatively of what they perceived as an increasingly sophisticated approach to training.		

Some carers do have to travel considerable distances from other areas of London in order to access training and one foster care family, who were originally supervised and supported by Banya's Boston office, live in Cambridgeshire in a remote rural area.

Whilst acknowledging the progress which has been made in the development of the of the training programme for foster carers the inspectors are of the opinion that there remains a need for the agency to continue to refine the process paying particular attention to ensuring that applicants undertake a specific training programme during their assessment period .The inspection did not demonstrate that the agency places emphasis on ensuring that ,where there are two adults in one household approved as joint carers , the agency ensures that each understands that they must successfully complete all the training and that each is trained in identified key areas prior to any child being placed in his or her home.

This report contains a recommendation that the Registered Provider ensures that where there are two adults in one household approved as joint carers, the agency ensures that each understands that they must successfully complete all the training and that each is trained in identified key areas prior to any child being placed in his or her home.

This report contains a recommendation that the Registered Provider ensures that the agency has developed an appropriate training programme to be undertaken by applicants undergoing assessment and an induction programme for newly approved carers.

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?	1
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Interviews with Foster Carers demonstrated that the agency ensures that each carer knows why each child placed with them is in foster care and that the carer understands the basis for the current placement, its intended duration and the details of each placed child's legal status. The inspection demonstrated that the agency attempts to ensure that foster carers have access to all relevant information in order to help each placed child understand and come to terms with past events. Foster carers spoke very positively of the advice and support provided by social work staff, especially the Development Officer, with regard to how to communicate with children and encourage them to reflect on and understand their personal history. The positive feedback with regard to this area of the work reflects the Development Officers training in therapeutic work with children. Visits to Foster Carers homes demonstrated that emphasis had been placed, by the agency, on training carers to record significant life events for the child and to the storage of this and formal documents in an appropriately secure manner.

However, although the inspection demonstrated good practice with regard to this standard evidenced by verbal communication and observation in Foster Carers' homes, the standard has been assessed at a low level of compliance. This is because, as recorded in other sections of this report, viewing of documents demonstrated severe shortcomings in the consistency of adequately maintained case records. In one instance the case file was devoid of almost all necessary information although a visit to the Foster Carers which included the inspector meeting with the three very young placed children, demonstrated that the carers were providing an excellent service, including the maintenance of appropriate written records, and they spoke very highly of the support which they were receiving from the agency.

The inspection did not demonstrate that the agency has a written policy on case recording or the acquisition of the required Looked After Children documentation from placing authorities which is essential to the process of establishing appropriate plans for placed children. Whilst recognising that agencies can experience severe difficulties in accessing the required Looked After Children documentation from placing authorities it is important that the agency demonstrates, by records of letters and faxes sent and telephone calls made, that staff have been pro-active in attempting to acquire such information.

Concerns about the shortcomings in compliance with this standard were discussed by the inspectors with the Fostering Manager and the Registered Provider at the conclusion of the inspection. They acknowledged the validity of the inspectors' concerns and, as requested,

provided a swift written response in which they stated that they recognised that the inadequacy of the files indicated a systemic failure to implement good record keeping; that senior management should have laid down clear guidance and procedures for the keeping of files and stated that files in future will contain sufficient and necessary information to ensure that the fostering service is safe.

This report contains a requirement which states that the Registered Provider must supply the Commission, by 14TH February 2005, with a copy of a written policy on case recording which establishes the purpose, format and content of files, and clarifies what information is to be kept on the foster carers' files and what information is kept on the children's files.

This report contains an immediate requirement which states that the Registered Provider must ensure that the files of placed children contain all the required Looked After Children documentation and/or a written record of attempts made, by the agency, to acquire such information.

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

Viewing of documents demonstrated that the agency maintains a permanent, private and secure record for each placed child and for each foster carer. Viewing of documents also demonstrated that the agency maintains records of the outcome of all legally required checks and references with regard to staff and carers.

The inspection did not clearly demonstrate whether the agency has systems in place to ensure that foster carers and placed children are enabled to view their records, in compliance with legal requirements, or whether they are encouraged to make additions and comments and record any personal statements including statements of dissent.

As stated under standard 24, viewing of documents demonstrated severe shortcomings in the consistency of adequately maintained case records. The comments made in standard 24 with regard to this issue and the resulting requirements are also relevant to this standard.

This report contains a recommendation which states that the Registered Provider ensures that the agency has systems in place to ensure that foster carers and placed children are enabled to view their records, in compliance with legal requirements, and that they are encouraged to make additions and comments and record any personal statements including statements of dissent.

Number of current foster placements supported by the agency:			111
Number of placements made by the agency in the last 12 months:			X
Number of placements made by the agency which ended in the past 12 months:			64
Number of new foster carers approved during the last 12 months:			X
Number of foster carers who left the agency during the last 12 months:			X
Current weekly payments to foster parents: Minimum £	X	Maximum £	X

Fitness of Premises for use as Fostering Service

The intended outcome for the following standard is:

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

Standard 26 (26.1 - 26.5)

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

Key Findings and Evidence

Standard met?

3

The inspection demonstrated that the agency has identifiable office premises to which staff and others with a legitimate interest have access during normal office hours. The office premises consist of two adjacent units on two levels. The upper level comprises the administration office and the offices of the Service and Finance Director and of the Development Manager whilst the lower level incorporates the office of the Fostering Manager, the supervising social workers' office which includes some catering facilities and a comfortable informal room used for meetings and groups. This office incorporates toilet facilities. There is a separate unit, accessed by walking across the car parking area, which is used for training purposes and other meetings. This was undergoing refurbishment at the time of the inspection in order to ensure, amongst other developments, the provision of catering and toilet facilities. The main office has appropriate facilities for the secure retention of records in a lockable room.

Observation demonstrated that the office used by supervising social workers is of an adequate size to accommodate the size of the current number of staff. The inspection did not demonstrate how the agency will adequately accommodate the proposed increase in numbers of supervising social workers. Social work staff commented that the current layout of the office premises can be seen to contribute to the feeling of a division between senior management / administration and social work staff with neither group of workers fully appreciating the exact nature of the other group's work.

Whilst acknowledging that it is difficult to envisage how it would be possible, within the layout available, to alter the distribution of staff within the premises, this report contains a recommendation that the Registered Provider should seek ways of reducing any feeling of division between staff groups brought about by the current arrangement.

The inspectors also discussed, with the Fostering Manager and the Registered Provider, the fact that the Statement of Purpose gave the address of the agency as being 11 Romola Road SE24 7BA when this was in fact only a correspondence address with the service actually operating from Units 1,6 and 7 in Croxted Mews, Croxted Road SE24 9BA and the company address being Spectrum House, Bromells Road SW4 0BN. As requested the Registered Provider has written to the Commission since the inspection confirming that the Registered Provider's address is now Spectrum House and that the Romola Road address is no longer in use.

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?

2

The annual accounts of the agency for the year ended June 2003 were viewed demonstrating that they had been certified by an appropriately qualified accountant and that the agency was financially viable. In interview the Registered Provider stated that he would ensure that the Commission was provided with up to date accounts at the earliest opportunity.

The inspection did not demonstrate whether the agency has procedures in place to deal with situations of financial crisis.

This report contains a requirement which states that the Registered Provider must ensure that the Commission receives, by 28th February 2005, a copy of the agency's annual accounts, certified by an appropriately qualified accountant ,for the year ending June 2004

This report also contains a requirement which states that the Registered Provider must supply the Commission, by 28th February 2005, with documentation demonstrating that the agency has procedures in place to deal with situations of financial crisis.

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?

1

The annual accounts of the agency for the year ended June 2003 were viewed demonstrating that they had been certified by an appropriately qualified accountant and that the agency was financially viable. In interview the Registered Provider stated that he would ensure that the Commission was provided with up to date accounts at the earliest opportunity.

The inspectors did not view evidence of the following information required to demonstrate full compliance with the requirements of this standard;

- Documentation demonstrating that the agency has clearly documented financial arrangements for control and supervision of its financial affairs and powers.
- A clearly written set of principles describing the financial procedures and responsibilities to be followed by all staff, consultants, professional experts, directors and any manager.

Prior to this inspection the Commission received a complaint from a team manager of a placing authority concerned that, despite a number of requests, she was experiencing difficulty in obtaining full clarification from the agency with respect to the allocation of an enhanced fee paid by the authority in recognition of the extremely challenging nature of one foster placement. The investigation by the Commission resulted in the complaint being upheld. As a result of the complaints investigation and discussion of this during the inspection, and in response to a request made during verbal feedback at the end of the inspection, the Registered Provider has provided a written statement in which he acknowledges that Banya's fee structure, including enhanced as well as standard fees, needs to be communicated more clearly to placing local authorities. He confirms that the agency will restate the fee structure paying especial attention to transparency over the breakdown of how fees are allocated.

This report contains a requirement which states that the Registered Provider must ensure that the Commission receives, by 14th February 2005, a copy of the agency's annual accounts, certified by an appropriately qualified accountant, for the year ending June 2004.

This report contains a requirement which states that the Registered Provider must supply the Commission, by 14th February 2005, with documentation demonstrating that the agency has clearly documented financial arrangements for control and supervision of its financial affairs and powers.

This report contains a requirement which states that the Registered Provider must supply the Commission, by 14th February 2005 with documentation demonstrating that the agency has a clearly written set of principles describing the financial procedures and responsibilities to be followed by all staff, consultants, professional experts, directors and any manager.

This report contains a requirement which states that the Registered Provider must supply documentation to the Commission, by 14th February 2005, demonstrating how Banya clearly communicates its fee structure, including enhanced as well as standard

fees, to placing local authorities including transparency over the breakdown of how fees are allocated.

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

Interviews with the Fostering Manager, the Registered Provider, supervising social workers and foster carers demonstrated that the agency attempts to ensure that all carers receive an appropriate allowance and agreed expenses which cover the full cost of caring for placed child or young person, that payments are usually made promptly and at an agreed time and that allowances and fees are reviewed annually.

However the inspection did demonstrate that some carers experienced confusion with regard to the system whereby the agency had incorporated respite two weeks respite payment into foster carers fees for 2003/4 in which financial year the carers did not then receive an annual increase in their basic fees.

Some carers also expressed concern that they had had, on occasion, to wait for a long period to receive funding for certain essential items. This delay had resulted in their experiencing considerable financial problems as they had paid for the required items out of their own funds. Such problems usually arose as a result of a delay in the placing authority paying the agency. This situation was discussed with the Registered Provider at the initial verbal feedback following this inspection. Both at that time and in a written response received by the Commission a week after the conclusion of the inspection, the Registered Provider stated that delays in payment to foster carers can occur when there is doubt as to whether reimbursement from a local authority is going to be agreed but that, as soon as Banya is sure that a payment will eventually be made, payment to the foster carer is made expeditiously sometimes months before Banya receives that sum from the placing authority. The written feedback also states that, in order to address a perceived lack of clarity as to what foster carers can and cannot claim, a detailed list is to be sent to all foster carers, with probable costs stated as transparently as possible.

This report contains a requirement which states that the Registered Provider must provide the Commission, by 14th February 2005, with documentation demonstrating that the agency has procedures in place which will ensure that ensure that each foster carer receives an allowance and agreed expenses, which cover the **full** cost of caring for each child or young persons placed with him or her and that payments are made promptly and at the agreed time.

This report also contains a requirement which states that the Registered Provider ensures that the Commission receives, by 14th February 2005, a copy of a detailed list designed to address a perceived lack of clarity as to what foster carers can and cannot claim and with probable costs stated as transparently as possible.

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

Viewing of documents demonstrated that the agency ensures that satisfactory references and Criminal Records Bureau Checks are obtained for all panel members before they commence work with the panel. The chair and vice chair are independent of the agency. The chair has a relevant background and expertise at a senior level in fostering and adoption services. The agency has written policies and procedures for the functioning of the panel. The panel has access to medical and educational expertise but the inspection did not clearly demonstrate that the panel has access to appropriate legal advice.

This standard is assessed as reaching a low level of compliance because of serious concerns raised by the inspectors' observation of a panel in progress. Concerns raised included;

- The Fostering Manager was present as a member of the panel but then left her position to present a review which had been prepared by a supervising social worker who had left the employment of the agency. This raised four concerns;
 - 1) a blurring of her role within the panel – she could not be expected, as a panel member, to objectively assess a review which she herself was presenting.
 - 2) as Fostering Manager, she had been responsible for supervising the social worker who prepared the review – this would further compromise her objectivity as a panel member.
 - 3) her presentation of the review, at a time when a social worker member of the panel was absent, resulted in the panel not being quorate.
 - 4) neither the chair nor the vice-chair alerted the panel to these shortcomings.
- The procedures for the assessment of an applicant couple also raised a number of concerns;
 - 1) the Form F, prepared by a member of staff from Banya's Eastbourne office was unsatisfactory. The text was incomplete and insufficient attention had been given to a number of important areas eg the applicants' own childhoods and parenting experiences and information about their own daughter.

- 2) the unsatisfactory nature of the Form F demonstrated an inadequacy in the quality

assurance and monitoring system of the agency and supervision of social workers preparing Form F assessments .A separate interview with the chair of the panel at a later date demonstrated that she has raised concerns with the Registered Provider on other occasions about the inconsistency of Form F assessments.

- 3) The panel commented on the significant deficiencies in the report but allowed the assessment to continue and granted approval to the applicants instead of proposing a deferral to allow for a more satisfactory assessment to be completed.
 - 3) The inspectors were concerned with regard to what they regarded as inappropriate questioning of the female partner with regard to sensitive medical issues which had already been addressed by the agency's medical advisor.
 - 4) the inspectors were concerned to observe that, contrary to accepted practice, the applicants were not asked to leave the room during the panel discussion of their assessment.
 - 5) Neither the panel chair nor the vice-chair expressed any significant concern or proposed adjusting the panel procedure to address any of the issues raised during the assessment.
- Viewing of documents and observation of a panel meeting demonstrated that there was some confusion concerning the appropriate functions of the decision maker.

The inspectors expressed their concerns about the functioning of the panel during extensive verbal feedback to the Fostering Manager and the Registered Provider at the conclusion of the inspection. They accepted the validity of the inspectors concerns and, as requested , provided a swift written response in which they acknowledged that the shortcomings outlined above were serious flaws which could have a negative impact on the quality assurance function of the panel. They further stated the agency's intention to provide immediate feedback to panel members and to address the issues raised in a joint staff/panel training event to be held in January 2005 to include training on regulations and standards, the roles and boundaries of panel members and on how to question applicants appropriately.

This report contains a requirement which states that the Registered Provider must supply the Commission, by 14th February 2005, with documentation demonstrating the details of a panel training event to be held in January 2005 to include training on regulations and standards, the roles and boundaries of panel members, how to question applicants appropriately and the role of the decision maker.

This report also contains a requirement which states that the Registered Provider must supply the Commission with a copy of the minutes of the next panel meeting following the implementation of a panel training programme to be held in January 2005.

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?
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This standard is not applicable to this agency.

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
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This standard is not applicable to this agency.

PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

Lay Assessor _____ **Signature** _____
Date _____

D.1 Registered Person's or Responsible Local Authority Manager's comments/confirmation relating to the content and accuracy of the report for the above inspection. We are working on the best way to include provider responses in the published report. In the meantime responses received are available on request

We would welcome comments on the content of this report relating to the Inspection conducted on 11th October 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary	<input type="checkbox"/>
Comments were received from the provider	<input type="checkbox"/>
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/>
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	<input type="checkbox"/>

Note:

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

D.2 Please provide the Commission with a written Action Plan by which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.

Status of the Provider's Action Plan at time of publication of the final inspection report:

Action plan was required	<input type="checkbox"/>
Action plan was received at the point of publication	<input type="checkbox"/>
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/>
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/>
Provider has declined to provide an action plan	<input type="checkbox"/>
Other: <enter details here>	<input type="checkbox"/>

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 _____ 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.

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