



*Making Social Care  
Better for People*

# inspection report

## FOSTERING SERVICE

### **Swindon Borough Council Fostering Service**

**Swindon Borough Council  
Euclid St  
Swindon  
Wiltshire  
SN1 2JH**

*Lead Inspector*  
Sophie Barton

*Announced Inspection*  
6th November 2006      10:00

The Commission for Social Care Inspection aims to:

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

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

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

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

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

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

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# SERVICE INFORMATION

<b>Name of service</b>	Swindon Borough Council Fostering Service
<b>Address</b>	Swindon Borough Council Euclid St Swindon Wiltshire SN1 2JH
<b>Telephone number</b>	01793 463000
<b>Fax number</b>	
<b>Email address</b>	familyplacement@swindon.gov.uk
<b>Provider Web address</b>	
<b>Name of registered provider(s)/company (if applicable)</b>	Swindon Borough Council
<b>Name of registered manager (if applicable)</b>	
<b>Type of registration</b>	Local Auth Fostering Service

# SERVICE INFORMATION

## Conditions of registration:

**Date of last inspection** 16<sup>th</sup> January 2006

## Brief Description of the Service:

Swindon Borough Council's Fostering Service is part of a broader Family Placement Team and is located within the Children and Families Division of Swindon Borough Council. The Fostering Service is responsible for the recruitment, assessment and support of foster carers and adopters, and for matching placement requests with available placement resources. The overall responsibility for the management of the Fostering Service lies with the Service Manager however there is a dedicated team manager who takes day-to-day responsibility for the running of the service assisted by two assistant team managers. The team includes 10 (full time equivalent) family placement officers, 2 social service officers and 4 administrative staff. All staff who 'case-hold' have a professional social work qualification and are expected to have a minimum of two years relevant experience. The team traditionally has a low staff turnover and therefore operates from a high skills and experience base; currently the length of service in Family Placement ranges from 2 years to 20 years.

At March 2006 the service had 95 registered foster carers approved for 'general purpose' fostering who were providing placements to approximately 150 children. The service also provides a 'Home and Away' service specifically set up to provide short-term breaks for children with disabilities; 17 carers provide placements for approximately 35 children. The service also supports 'Friends and relatives' carers who provide care to named individual children (13 carers providing placements for 21 children).

The team provide an out-of-hours telephone service for carers and adopters, as well as the Borough's own emergency duty service. The fostering service links very closely with the Health Liaison worker for looked after children (a jointly funded post to focus on improving the health of looked after children) and with the Looked After Children Education Service (an Education Advisor, part time teacher and Personal Education Plan Co-ordinator focusing on improving the educational attainment of looked after children). Swindon Borough Council also joint fund a post within the Child and Adolescent Mental Health Service for a 'family therapist' to provide specific advice and support to foster carers and adopters, to assist them in understanding and managing unusual or difficult behaviours.

The weekly allowance paid to foster carers ranges from £114.87 to £198.11 depending on the age of the child. In addition to this foster carers may also be paid a fee depending on experience and skill level. 'Approved Carers' receive no additional fee, 'Core Carers' receive £21 per week, 'Qualified Carers' receive £50 per week and 'Advanced Carers' receive £120 per week.

# SUMMARY

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

This summary is written for the young people who are looked after in foster care by Swindon Borough Council.

The fostering managers were told in July 2006 that there would be an inspection between the 6<sup>th</sup> and 13<sup>th</sup> November 2006. Two inspectors were involved in the inspection of the fostering service.

The inspectors visited five foster homes, and spoke to the foster carers about how they look after the children living with them. The inspectors also spoke to some of the children living with these foster carers.

The inspectors also met with many other people including:

- Social workers,
- the managers of the fostering team,
- teachers and a nurse who work with children in foster care,
- The independent reviewing officers (a person who isn't your social worker, who makes sure that the plan for your care is checked regularly).
- The person who runs the 'fostering panel'. The 'fostering panel' is where a group of people meet to help decide whether people are suitable to be foster carers,

The inspectors also looked through lots of paperwork, including information on foster carers and records of when people had made complaints against foster carers. One inspector also attended the 'fostering panel'.

To help the inspector to write the report the manager sent the inspector information about the fostering service. He also wrote to the inspector and told her what he thought the service did well and what they could improve.

The inspector sent questionnaires to young people and to foster carers.  
28 were returned from young people,  
21 from foster carers,  
3 from social workers and 5 from other workers (like teachers, doctors).

## What the service does well:

These are some of the good things that the inspector found and was told about:

- The managers are good at making sure carers and fostering social workers look after children and young people properly.
- The service tries very hard to make sure that it listens to children and does what is best for children.
- All the young people said in their questionnaires that they are "always" or "usually" listened to by their carers. A child stated *"my foster carer is nice and she listens to me when I want to talk to her"*.
- Nearly all of the young people said that they "always" feel well cared for in their foster placement which is great to hear. One child stated that their foster carers *"love me and they like me and they treat me nicely with respect"*.
- Foster carers and the nurse make sure children and young people stay healthy. They also check that children are happy or that there is someone they can talk to if they feel sad, angry or lonely.
- There are a group of teachers who work just with children in foster placements and these teachers and foster carers help children do well at school. The fostering service really wants children to be happy at school and to get good exam results.
- The fostering service makes sure foster carers go on many training courses, so that they learn good ways of caring for children.
- The foster carers get regular visits from the fostering workers, who make sure that the carers are looking after the children properly.
- The foster carers the inspectors met were very friendly and cared about the young people very much. Their homes were comfortable and children had nice bedrooms.
- When children needed a foster placement the workers tried very hard to find them carers that the children would get along with well. For example if a child did not like animals the fostering workers would make sure that the child did not go and live with carers who had a dog.



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

The service has made many improvements over a very short space of time.

The manager is now told right away if a child is placed with a carer that either 1) has three other foster children in the house and 2) if the carer is meant to only care for children of a different age. The manager can then check to see if it continues to be suitable for the child to stay with these carers.

Foster carers are now paid more money. This helps foster carers to pay for children to attend sports clubs, go on holiday and also helps to get more people to want to foster children.

Two new social workers are starting in the fostering team soon. This will help the team give more help to foster carers and children as they will not be so busy.

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

Although the fostering service did many things well there were still some things that could make the children a bit safer and happier. The important ones are:

- Some children need a foster home for a long time. This means that they need to live with foster carers until they are adults, and these are called long-term foster carers. Swindon fostering service does not have enough of these long-term carers which mean that some children may have to move from one short-term carer to another. This is not good, so the fostering service must find more long-term carers for children.
- Foster carers need to have more information about the children they are looking after so that they make sure they look after the child properly.
- Even small complaints made about carers should be checked out and taken seriously.
- The fostering team keeps a file on each foster carer. These files were a bit messy and did not include some important information. This meant that new workers would not always know if children had been unhappy about the carer in the past, or why children had moved away from this carer.
- Just before the child moves in with foster carers the carers must be given better information from the social worker. This must include the carers having medical consent – which means that parents or social workers need to agree that carers can give emergency treatment if the child hurts themselves.

- Foster carers must have a 'review' each year. A review involves social workers, young people and other professionals making comments about whether the foster carer is good at looking after the children. Some Swindon foster carers are not being 'reviewed' often enough.

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

The report of this inspection is available from [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk) or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

# **DETAILS OF INSPECTOR FINDINGS**

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# Being Healthy

## The intended outcome for this Standard is:

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

## The Commission considers Standard 12 the key standard to be inspected.

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

12

*Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.*

The fostering service is good at promoting the health and development of children, with children's health well monitored and specialist services provided where necessary.

## EVIDENCE:

Swindon Borough Council joint fund with the Primary Care Trust a Health Liaison Worker for looked after children. This worker is based in the Family Placement Team's offices, which provides for close liaison with family placement workers. Indeed, family placement workers and children's social workers stated that the Health Liaison Worker is accessible and very responsive to requests for support to children and carers. The Health Liaison Worker is responsible for ensuring that looked after children have a health assessment and plan which is reviewed annually. The service provided the inspector with data that stated that 91.5% of looked after children have had an annual health check in the last twelve months.

Evidence from case tracking a number of children in foster placements confirmed that all but one did have a health plan and assessment, although some annual reviews were delayed. Initial Health Assessments are completed by the child's GP which are forwarded to the Health Liaison Worker who completes the health plan, rather than a doctor completing this plan. Annual review assessments are completed by health visitors or school nurses. Although the inspector noted no concerns with the quality of the health plans it is recommended that this system be reviewed to ensure it meets with guidance from the Department of Health. Discussions with carers confirmed that the action identified in health plans is met appropriately by themselves or

specialist services. All children were registered with a GP, dentist and optician where appropriate. There was however a significant delay in one child having an optical test and receiving glasses which was said to have an impact on her education.

The inspector noted very good practice in relation to the monitoring and assessment of looked after children's emotional well-being. Foster carers are required to complete a Strengths and Difficulties questionnaire for 4 – 16 year olds. Files evidenced that this procedure was happening and that there is a prompt response from the Health Liaison Worker if the questionnaire highlights any areas of difficulties for the child. The inspectors also noted that there is close working with the Child and Adolescent Mental Health Service. A full time post is joint funded within the CAMHS service to work specifically with foster carers and adopters around understanding and managing the behaviour of children. Social workers stated that this worker is accessible and that looked after children can be 'fast tracked' to receive support from specialist health services.

The case files for children and carers highlighted that medical consent from a person with parental responsibility was not being obtained for children. Placing social workers were on occasions using a standard proforma asking the person with parental responsibility to sign to say that they agree to their child receiving emergency medical treatment. This form did not name the foster carers. Discussion with workers and carers also stated that carers are not being provided with a written health record for each child (which would be updated during the placement and move with the child).

Foster carers have been given the opportunity to attend training on Understanding Sexual Health, Understanding Child and Adolescent Mental Health, Understanding Drugs and Alcohol. It is further planned to provide First Aid training to carers in 2006, and also Healthy Eating workshops.

75% of the questionnaires received from children and young people stated that they "always" get support and advice about being healthy. Only one child stated that they "never" get support. Over half of the carers that responded stated that they get "excellent" or "good" support in helping the children they care for to be healthy. Six out of twenty replied they get "adequate" support and two stated the support was "poor". Comments ranged from "our link worker always talks to us about the diet and activities we do", to "don't ask for much help as we do it ourselves".

# Staying Safe

## The intended outcomes for these Standards are:

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

## The Commission considers Standards 3, 6, 8, 9, 15 and 30 the key standards to be inspected.

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

3, 6, 8, 9, 15 and 30

*Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.*

Matching is considered very well, with a strong commitment shown to ensuring children are placed with suitable carers, which promotes placement stability.

Children are safeguarded from abuse and neglect, with the service having good policies, procedures and training in place.

The fostering panel is effective, and provides a good quality assurance role in ensuring carers are assessed thoroughly.

The manager and staff are suitable and qualified, with clear knowledge and understanding of how to ensure the best possible outcomes for children. There are good foster carers, where children have safe, healthy and nurturing environments.

## EVIDENCE:

The recruitment files were not examined at this inspection as they were viewed at the fostering inspections undertaken earlier this year. The previous inspections stated that the files contained all necessary information. A shortfall

was noted on the need to apply for Criminal Record Bureau checks for staff from overseas before they commence employment and the Service Manager confirmed that this is now being done. There have been no personnel changes to the fostering team since the previous inspection. The Team Manager has been in post since 1999, has an NVQ 5 in management and a social work qualification. The authorities procedures are for CRB checks on staff and carers to be renewed every three years and the carer's files examined evidenced that this is happening in practice in the majority of cases (one out of five carers case tracked did not have an updated CRB check).

There are ten (full time equivalent) social workers in the team that manage a mixed caseload of fostering and adoption work/or private fostering. The social workers all hold an appropriate qualification in social work, and have or are undertaking post-qualifying training. There are two duty workers who are experienced in child care but do not hold a social work qualification. These workers are closely supervised by the duty manager, and do not formally supervise foster carers.

Five fostering households were visited as part of this inspection. All homes were adequately furnished, clean and tidy. There was space for the children to play, relax, watch TV and do homework. Health and safety assessments were seen on carers' files and these were reviewed annually. The inspector noted however that two health and safety checks identified some action needed (filling in a pond and obtaining a fire blanket). This action had not been followed up by the family placement officer between the annual reviews. However the line manager for the family placement officers had identified this during supervision. All children case tracked had their own bedroom, except for two different sibling groups.

The inspectors noted very good procedures and practice in relation to matching and protecting children from harm and neglect. There are forms and procedures in place to ensure that referral information to the family placement team includes information about the child's needs, behaviours, hobbies and significant relationships. Copies of the Family Placement Request Form and Foster Placement Matching Assessment (Part 1) were seen on children's and carers' files. These are completed by the Placing Social Worker. Initial Assessments are also requested by the Fostering Team and in the majority of cases these are reported as being forthcoming. Swindon Borough Council have a computer system in place that allows the fostering staff to easily access the case notes and assessments for children referred for placements which benefits the quick sharing of relevant information.

Where a placement has been identified for a child the fostering Social Worker completes a Matching Assessment Part 2 which details the positive and also the negative factors of the match and if any extra support is needed to reduce the negative factors. The manager signs to state whether this is appropriate or not. The inspector did note that the matching factors recorded on the Part 2

form related to the carer's circumstances and approval status and rarely mentioned the factors that related to the child's needs and wishes.

A group of children's social workers spoken to stated that the matching of children and carers is child-focused. Indeed, the inspectors noted good practice in the way that the child's social worker is fully involved in the process of choosing the appropriate carers. They consider the 'form f' (assessment) of carers themselves and liaise closely with the fostering social worker. For children needing long term placements the child's social workers have helped them record videos about themselves stating their interests and what type of family they would like to live with. The fostering team identify a dedicated worker 'Home Finder' to work alongside a child's social worker and the child in finding a permanent/ long-term family for them where this is the required plan. This again is a good system as it identifies one person in the fostering team to have responsibility for finding a suitable family, to get to know the child, instead of the request being dealt with on the duty team by several workers. It was commented by other professionals that it would be beneficial for children to see pictures or a video of foster carers that they might be matched with.

The inspector observed a 'Placement Panel' meeting, which consists of multi-disciplinary professionals chaired by the Head of Children's Services, and considers placements that may require additional funding. The inspector observed decisions being made that were very child-centred, and that were based on improving the outcomes for children. Minutes of Fostering Panel and the Placement Panel also evidenced that the Head of Children's Services was very proactive at ensuring the best for children, and promoted child-centred decisions. A range of professionals spoken with also stated that the child's interests and wishes are valued by the senior management team.

There are also clear procedures in place for 'Permanency Planning' meetings and 'Disruption' meetings. These are chaired by the Independent Reviewing Managers. The IRM's each have an individual caseload. This helps with the IRM's getting to know the child, and for case tracking the plan over a length of time.

The fostering service has recognised that it has a shortage of its own carers that can provide the more specialist placements (mother and baby, teenagers with challenging behaviour and remand placements in particular). The service has contracts with a number of Independent Fostering Agencies as 'Preferred Providers' to provide some more specialist foster placements. This is beneficial to ensure that there are a range of carers who can meet specialist needs and can ensure better matching. However the service does have to ensure that they reduce the number of children moved to placements outside of Swindon. The inspector was provided with a 'recruitment plan' and a 'strategic development plan' and although this is still under consultation the service is recognising the need to increase the number of carers. It has identified



through evidenced based research how they intend to do this. These plans follow good practice, and aim to introduce better matching and choice for children.

The service has very clear procedures in place for responding to complaints and allegations against carers. Since February 2006 there have been seven investigations following allegations made against foster carers or members of their households. Five resulted in strategy meetings being held, and child protection procedures followed. As a result of these, four were unsubstantiated, and one involved the carers being given more support with managing children's behaviours. Two allegations were considered to be 'child care concerns' and not child protection. There was a clear record made of this decision making. The file papers for three of the allegations were examined by the inspector. These included clear minutes and details of the strategy meetings held, and evidenced that any action needed was completed by the designated officers. Once the allegations were made the strategy meetings were held very promptly. The fostering manager has kept detailed records of complaints and allegations, making for easy monitoring. However, the inspector did not see clear records on carer's case files of complaints and significant events. The manager confirmed that this will be recorded on the computer system 'SWIFT', but this only covers the last few years.

The fostering service informed the inspector that there have been no formal complaints made against the service since the last inspection in February 2006. The inspector noted however that in the case notes of one child case tracked and by speaking with another child that they had made complaints against foster carers. These were not recorded as complaints by the service, and the files did not evidence what action was being taken. The manager confirmed that these complaints were seen as minor or grumbles, however the inspector considered that for one of the children it was very significant.

It is important to note that out of the twenty eight questionnaires received from children twenty five stated that they are "always" well cared for and the remaining three stated that they are "usually" well cared for. Comments about carers included "because they love me", "I love it where I am living right now!", "they love me and they like me and they treat me nicely with respect". 80% of carers questionnaires stated that the fostering service is "excellent" or "good" at helping them meet children's needs. 78% of carers stated that the service is "excellent" or "good" at supporting children to move in a planned way. Only one carer stated that the service is poor at maintaining placements.

A range of professionals spoken with stated that they were confident that the fostering service is able to challenge carers where appropriate. It was stated that they would promptly address any concerns in how foster carers are practising, and that the team are committed to the children and put the child's interests first.

The inspectors noted that foster carers did not each have adequate 'safe caring guidelines/plan'. It is considered good practice for a safe caring plan to be drawn up with each family, reviewed and amended where appropriate at the start of each placement. Currently the fostering service are using a generic form, and only occasionally completing a section individual to the family and child. This is an area recognised by the service that needs to be improved, and training is to be provided to staff and carers in the new year.

There are written procedures for panel members in relation to its role and main function, principles and values, expectations and how the panel is to operate. The inspector observed a panel session. There was a clear agenda and all panel members took an active part in the decision making and discussions. The panel advisor assisted in making clear the regulatory framework, and the panel chair was effective at ensuring the panel recommendations also included quality assurance feedback where this was necessary. The inspector noted, through discussions with the panel chair and by examining previous panel minutes that the panel is provided with regular management information about number of carers, needs of children requiring placements in the Borough, and any complaints or allegations against carers.

# Enjoying and Achieving

## The intended outcomes for these Standards are:

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

## The Commission considers Standards 7, 13 and 31 the key standards to be inspected.

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

*7, 13 and 31*

*Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.*

The fostering service is addressing issues of equality and diversity well, and is sensitive to and values children's culture, ethnicity and disability.

The service has good links educational, allowing the educational achievement of children to be monitored and promoted well and helping children to reach their full potential.

Children in the shared care scheme benefit from experienced and well supported carers, providing a flexible service to children and their families.

## EVIDENCE:

The looked after children education service (LACES) is based with the family placement team. This has clear benefits for close working, and the family placement workers stated that the education team are accessible and respond promptly to any requests for support for a child or carers. A member of the education service sits on the weekly placement panel and attends all first statutory review meetings for children. LACES also run homework clubs and revision sessions for looked after children. They have also given training to foster carers in helping children with reading and literacy.

LACES and the Health Liaison Worker provide a regular newsletter to carers identifying any education resources available and giving updates on the services, and also provide all carers with leaflets about exclusions, school attendance, changing schools, bullying and special educational needs. This information is excellent and ensures carers are aware of procedures and good practice. The LACES team showed the inspector the monitoring systems in place for tracking a child's educational progress and attainment each year. The education workers liaise closely with schools and designated teachers. They have a budget to provide looked after children with extra resources where appropriate (private tuition, books) and the inspector was shown evidence of this being provided to a number of children. The number of looked after children that gained at least one GCSE in 2005 rose to 73%. This is above the national average. Up to March 2006 there were no children permanently excluded from school.

The questionnaires received from young people showed that 82% stated that they "always" or "usually" receive the right help so they can be successful in their education. Three out of the 28 (11%) who replied stated that they "never" get the right help. 55% of foster carers stated that the service is "excellent" or "good" at supporting them to help the child achieve educationally. 28% stated the service was "poor". Comments ranged from "we are left to it as far as schooling goes", "no support", to "there has been good communication to ensure the best opportunity for the child we care for", and "our link worker supported us when we had meetings at the school".

The service has recently appointed a 'Personal Education Plan' co-ordinator. At present not all looked after children have a Personal Education Plan (less than 50%), therefore this new post should ensure better monitoring and action of PEP's.

The service is actively seeking to recruit carers from black and minority ethnic groups. Recruitment activities have included a stall at an annual event organised by Swindon's Asian community, a poster campaign and talks given to the Multi-Faith group. Currently 12% of carers approved are from diverse ethnic backgrounds (15% of the looked after children are from dual heritage, black, Asian or other minority ethnic backgrounds). Foster carers undertake mandatory training in 'Valuing Diversity' and further training is being planned for foster carers on caring for children from black or ethnic minority backgrounds (looking at diet, skin and hair care).

The majority of foster carers responded in the questionnaires that the service is "excellent" or "good" at addressing issues of diversity and equality (79%).

The service has an established 'Home and Away' service, which provides short breaks for children who have a disability. The inspector did not inspect this part of the fostering service at this inspection, as it was fully inspected earlier on in the year in January 2006. It was assessed as "promoting and supporting

close links between carers and birth parents". There are clear procedures in place and the parents interviewed in January 2006 spoke very highly of the care provided by respite carers. There are currently 17 carers and 35 children receiving these short breaks. Representatives from the child health and disability team confirmed to the inspector that the fostering team work closely with them, in ensuring that the needs of children placed with short break carers are met.

# Making a Positive Contribution

## The intended outcomes for these Standards are:

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

## The Commission considers Standards 10 and 11 the key standards to be inspected.

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

*10 and 11*

*Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.*

Contact with family and friends is well promoted by the fostering service, ensuring young people maintain these links where appropriate.

Children are very well listened to and their opinions valued by staff and carers, and advocacy for, and participation of, children is included in service delivery.

## EVIDENCE:

The files examined of a number of children identified good planning and monitoring of contact. There were clear plans in place for how the contact arrangements are to be met. Carers spoken with showed commitment to the contact arrangements and insight into the benefits and potential conflicts of contact. The matching forms completed by social workers identify the role for carers needed in promoting contact.

Where any risks around contact with family are identified a risk assessment is completed and shared/agreed with foster carers. The inspectors also saw good evidence of thorough assessments being completed by trained professionals (family therapists, psychologists) in relation to sibling contact and whether siblings should be placed together. The service contracts with Sure Start to provide support with contact (supervision and premises).

The children who replied to the questionnaires were very positive about being listened to. Out of the twenty eight who replied, twenty three stated that the carers "always" listen to them and five stated that they are "usually" listened to. None responded that they are never listened to. Twenty two stated that they knew how to make a complaint, five said that they weren't sure and one said they didn't know. The service is encouraging carers to write their diaries alongside the children and to record the children's views.

Each child looked after has been provided with a welcome pack. This includes a "Stand Up and Be Counted: Guide to Being Looked After", a Leaving Care Guide, leaflets on complaints, access to files, information on health check ups, reviews and sleep overs. There is also a guide developed for younger children which includes pictures for colouring and tells a story about what is foster care.

Swindon Borough Council also fund a group of looked after children (the FOCUS group) which is a forum for the children to air their views on the service they receive. In the last year they have produced a DVD which relates to their experiences of the care system which has been shared with elected members, senior managers and front line staff. A participation worker is also employed to ensure the views of looked after children are heard. The service has funded Spurgeons care to provide an independent visiting scheme. This has been used by approximately 10% of children looked after. The service has identified a need for a more comprehensive advocacy service for children, and have commissioned Barnardos to provide this service from 2007.

# Achieving Economic Wellbeing

## The intended outcomes for these Standards are:

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

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

29

*Quality in this outcome area is **adequate**. This judgement has been made using available evidence including a visit to this service.*

Allowances and expenses are sufficient and ensure that carers can provide adequate transport and material goods for the child.

### EVIDENCE:

A new payment for skills scheme was introduced in April 2006, with carers receiving a payment depending on what carer level they are assessed as (approved carers get no fee, core carers £21, qualified carers £50 or advanced carers £120). The levels are dependent on skills and experience of carers. This fee is paid per placement per week. Additional weekly allowances are paid to carers which fall within four age bands of the children placed: 0-4 years £114.87, 5-10 years £130.85, 11-15 years £200.90 and 16-17 years £207.80. These rates meet the recommendation of the Fostering Network, with additional amounts being paid to carers who provide placements to teenagers.

Additional payments are made for loyalty (those that have fostered for the previous year), for completing NVQ 3, and a weeks extra allowance for birthdays and Christmas, and two weeks extra allowance for holidays.

The questionnaires received from carers made no specific comments in relation to payments. All carers visited stated that payments are received promptly.



# Management

## The intended outcomes for these Standards are:

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

**The Commission considers Standards 1, 16, 17, 21, 24, 25 and 32 the key standards to be inspected.**

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

*1, 16, 17, 21, 24, 25 and 32*

*Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.*

The service meets the aims and objectives of the Statement of Purpose and they provide good information to carers, children and other interested parties.

The staff's assessment, supervision visits and support to carers is good, and improvements are leading to better quality reviews and assessments. (However continued poor management of annual reviews of carers could affect the overall rating of this service)

The management team have made improvements to ensure a sufficient level of staff and carers are recruited to meet the needs of children. Overall, the service is well managed, providing a clear and consistent service to carers and children.

Foster carers training is prioritised, with good quality and varied training providing carers with skills to meet the needs of children.

Case records for children and carers have lacked the necessary documentation required by regulation, which affects the quality and accuracy of records held.

### **EVIDENCE:**

The fostering service has a Statement of Purpose which clearly sets out its regulatory responsibility, aims and objectives and the range of services provided. This has recently been updated in October 2006 and gives an accurate account of the service they are currently providing to carers and children. As stated above the children's guides are also well developed and comprehensive. In addition to these documents there is a full range of information available to prospective and approved carers and a policy and procedures handbook for staff.

The inspectors noted a clear management structure. A range of professionals and staff were spoken with and they all confirmed that lines of accountability within the management team are clear. Senior management were considered to be approachable and accessible as well as being supportive and child-centred. There was good morale within the team.

Staff have undertaken post-qualifying training and stated that training opportunities were available. Staff are supervised by Assistant Team Managers. Staff reported that supervision was regular and provided them with professional development, and support with case management. Children's social workers had a good understanding of the fostering team's roles and responsibilities and vice versa. The administrative back up was confirmed as being sufficient.

The team has been understaffed by two full time workers and a further member of staff has been on long term sick leave. This has put pressure on team members to meet their statutory duties, and some areas of the service has been affected because of this. In particular annual reviews of carers have not all been carried out within statutory timescales (this remains a repeated

requirement) and assessments of carers have been slow. The manager is monitoring the reviews of carers and is aware that as of September 2006 only 75% have been completed with only 52.5% completed on time. The manager reported that the review meetings and checks had been carried out in the majority of cases but that the report is outstanding. The percentage of review meetings completed would be 83%. The manager stated that a new review pack has been developed, aimed at increasing the quality of reviews and this has also led to a delay in completing the final review report. However this is a considerable failure to comply with regulations, and continual non-compliance will have an affect on the overall quality rating of this service.

The inspector was informed of one kinship carer being given interim approval in February 2006, but not yet been allocated to a worker to complete a full assessment of their suitability. As a result the carer has not received the support or information needed. The inspector is aware that the plan for these children was to return home after a short period but this has not happened. The manager has employed sessional workers to carry out assessments, and to fill one of the vacancies in the team. Two new workers are due to start (one in December 2006 and one in January 2007) and this should ensure that caseloads are more manageable. These posts were first advertised in June 2006, and therefore the management team have been trying to address the vacancies in the team.

Week beginning 9<sup>th</sup> November 2006 the fostering team's duty log showed 23 children waiting for long term placements. This is a considerable number, which again highlights the lack of long term carers available. A number of children remain in short term placements although the plan is for long term care. The service is actively recruiting carers, with the Assistant Team Manager having designated responsibility for co-ordinating the recruitment campaign. The inspector was shown the recruitment plan, which clearly identifies how carers are to be recruited for children who have more challenging needs, including teenagers. Last year the service managed to recruit more carers than those that were lost through resignation and retirement.

The inspector read four new assessments recently undertaken on prospective foster carers. These were adequate, and appropriate checks were carried out on all members of the household, and full employee and personal references obtained.

The authority have clear procedures in place for assessing, approving, supporting and training kinship carers (family and friends carers). The Family Placement Team undertake the full assessment and family and friends carers receive the same level of support and training as other carers. As stated above there has been a significant delay in fully assessing carers once they have been to panel for interim approval (within six weeks of the start of the placement). The panel chair person confirmed that this is being monitored.

The support and training for carers remains positive and effective. The majority of carers' questionnaires confirmed that the fostering service is "excellent" at supporting them to care for children. Comments included "our link worker will always act on any issue raised", "in the last 12 months we have continued to receive excellent professional support from our link worker and her manager", "our child has had a 110% dedicated social worker", "link worker always there", "I feel very well supported". Training opportunities for carers have included the NVQ 3 caring for children, resilience and attachment, sexual abuse, managing challenging behaviour, safe handling and de-escalation and training specific for home and away carers (autism, administering medication). Of good practice is the out of hours service provided to carers. Team members have volunteered to provide telephone support to carers in evenings and weekends. The emergency duty team are also available to do home calls in emergencies to support carers. Each foster carer automatically becomes a member of Swindon Foster Care Associates who provide regular newsletters and support meetings. Foster carers also have fast-track access to guidance and support from an experienced therapist attached to the Child and Adolescent mental health service.

Carers now have more formal supervision sessions with their link worker. A supervision record is completed after each session which is signed by the worker and carer. Files evidenced that supervision visits are happening regularly and a range of areas are discussed relating to the needs of the child in placement and issues relating to the carers skills, training, development and respite needs.

The inspector examined a number of children's files and carer's files. The inspectors noted that files were not well organised. Some files had several copies of the same document, some misfiling, and wrong dates recorded on assessments and reviews. Files did not clearly identify the children that had been placed with the carers (and the electronic system did not include a reason for the end of the placement). Not all files included a letter from the Service Provider stating their terms of approval. The Foster Care Agreement is in two parts. Part 1 includes the details of the carer's approval status. This was not always attached to Part 2, and therefore not signed by the carer when there had been a change of approval status.

Children's files however did provide for a comprehensive record of their life events and quality of care provided with there being initial assessments, core assessments and chronologies. However, the inspectors did not see evidence of the 'looked after children' documentation being completed fully for each child, and no clear 'foster placement agreement'. One young person and carer showed the inspector photographs and memorabilia of significant events while he has been living with the carer, and social workers confirmed that carers are supported to keep relevant memorabilia.

The majority of carers confirmed that they have been provided with sufficient information about children placed with them. Out of nineteen who replied to the question, one stated that information received was "poor", six stated it was "adequate", seven said it was "good" and five said it was "excellent".

The monitoring of children placed with independent agencies is good. There is a post with designated responsibility to monitor the contractual arrangements, and ensure inspection reports are obtained. The Independent Reviewing Managers also monitor the quality of placements and they confirmed that if any concerns are identified the Service Manager has addressed these promptly.

# SCORING OF OUTCOMES

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

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

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

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

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

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

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

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

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

Are there any outstanding requirements from the last inspection? YES

**STATUTORY REQUIREMENTS**

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

No.	Standard	Regulation	Requirement	Timescale for action
1.	FS21	29(2)	The approval of all foster carers must be reviewed at intervals of not more than a year. All overdue reviews must be completed.  <i><b>(Previous timescale of February 2004 not met)</b></i>	01/03/07
2.	FS24	34	Before making a placement the responsible authority must enter into a written agreement (foster placement agreement) with the foster parent which covers the matters specified in Schedule 6.  <i>In particular this refers to the need to ensure all looked after children documentation is completed, and arrangements for giving consent to medical.</i>	01/02/07
3	FS25	28 and 30	The case record for each foster parent must include: <ul style="list-style-type: none"> <li>• The notice of approval given under regulation 28</li> <li>• A record of each placement, including the</li> </ul>	01/02/07

			<p>name, age and sex of each child placed, the dates on which each placement begun and terminated and the circumstances of the termination.</p> <ul style="list-style-type: none"> <li>• A foster care agreement</li> </ul> <p>(The foster care agreement must be kept updated and include details of the carers approval and agreement to comply with the policies issued under regulation 12 and 13).</p>	
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## RECOMMENDATIONS

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

No.	Refer to Standard	Good Practice Recommendations
1.	FS6	Family Placement workers should ensure that any recommendations from health and safety assessments are actioned promptly.
2.	FS8	The matching forms should clearly record the children's views and wishes, and not only the circumstances of the carers.
3	FS9	<p>All complaints made against carers (including minor complaints) should be recorded clearly on the carers files and addressed promptly.</p> <p>Allegations and complaints should also be clearly recorded on a chronology on carers files, for quick reference and monitoring.</p> <p>A safe caring plan should be developed for each fostering household and specific for each child placed.</p>
4	FS12	Foster carers should have a health record for each child, which is updated during the placement and moves with the child.



5	FS13	<p>Each child should have a Personal Education Plan.</p> <p>The service should consider the significant response from foster carers that 28% of respondents considered the support for children to educationally achieve was "poor".</p>
6	FS17	<p>There should be a continued focus on recruiting more long term carers to ensure children are placed with long term carers as promptly as possible.</p>
7	FS25	<p>Carers' files should be kept well organised.</p>
8	FS32	<p>When interim approval is granted for family and friends carers there should be better monitoring of when the case is brought back to panel for full approval.</p>

## **Commission for Social Care Inspection**

Poole Office

Unit 4

New Fields Business Park

Stinsford Road

Poole

BH17 0NF

National Enquiry Line

Telephone: 0845 015 0120 or 0191 233 3323

Textphone: 0845 015 2255 or 0191 233 3588

Email: [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk)

Web: [www.csci.org.uk](http://www.csci.org.uk)

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