



Making Social Care
Better for People

inspection report

Fostering Services

Torbay Local Authority Fostering Agency

Parkfield House
38 Esplanade Road
Paignton
Devon
TQ3 2NH

8th,9th,10th,14th,17th,18th,21st,22nd,23
rd,24th February 2005

Commission for Social Care Inspection

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

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

The role of CSCI is to:

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

Inspection Methods & Findings

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

The 4-point scale ranges from:

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

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

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

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

FOSTERING SERVICE INFORMATION

Local Authority Fostering Service?

YES

Name of Authority

Torbay Local Authority Fostering Agency

Address

Parkfield House, 38 Esplanade Road, Paignton, Devon,
TQ3 2NH

Local Authority Manager

Ms. Georgina Dunk (Operations Manager)

Tel No:

01803 201201

Address

Parkfield House, 38 Esplanade Road, Paignton, Devon,
TQ3 2NH

Fax No:

Email Address

Registered Fostering Agency (IFA)

NO

Name of Agency

Tel No

Address

Fax No

Email Address

Registered Number of IFA

Name of Registered Provider

Ms.Georgina Dunk, Operations Manager.

Name of Registered Manager (if applicable)

Mrs. Rosie Rayner. (application in progress)

Date of first registration

Date of latest registration certificate

Registration Conditions Apply ?

NO

Date of last inspection

5/03/04

Date of Inspection Visit		8th February 2005	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Christine Freestone	123716
Name of Inspector	2	Jennifer Reed.	
Name of Inspector	3		
Name of Inspector	4		
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)			
Name of Establishment Representative at the time of inspection		Mrs. Rosie Rayner	

Introduction to Report and Inspection

Inspection visits

Description of Fostering Service

Part A: Summary of Inspection Findings

Reports and Notifications to the Local Authority and Secretary of State

Implementation of Statutory Requirements from last Inspection

Statutory Requirements from this Inspection

Good Practice Recommendations from this Inspection

Part B: Inspection Methods & Findings

(National Minimum Standards For Fostering Services)

1. Statement of purpose

2. Fitness to carry on or manage a fostering service

3. Management of the fostering service

4. Securing and promoting welfare

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

6. Records

7. Fitness of premises

8. Financial requirements

9. Fostering panels

10. Short-term breaks

11. Family and friend carers

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

Part D: Provider's Response

D.1. Provider's comments

D.2. Action Plan

D.3. Provider's agreement

INTRODUCTION TO REPORT AND INSPECTION

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

This document summarises the inspection findings of the CSCI in respect of Torbay Local Authority Fostering 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.

This is the second Announced Inspection under the aegis of the Commission for Social Care Inspection of Torbay Council which is a small Unitary Authority in South Devon. The Foster Care Service is a constituent part of the Children's Services provision within Torbay and is based at Parkfield House, Paignton.

The Service provides a range of placements within its' core service and is seeking to develop kinship placements and parent and child placements. The Service also provides a specialist Contract Care service and a newly established Remand bed.

The Service has undergone a restructuring and reorganisation process which has now been completed. The new structure was seen to be understood by staff, carers and young people.

Recruitment to the Fostering Service is managed by both a central Human Resources team and the management / staff teams of the Service areas concerned. Foster carers are recruited to the Service utilising various methods such as newspaper advertisements. Most recruitment is by "word of mouth." Foster carers currently approved, generally enable the Service to provide a variety of placements in terms of gender, age, type.

A broad range of policies and procedures are established within the Authority in relation to the Service provision. Service specific policy and procedural guidance is also in place.

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.)

Service details:

Torbay Local Authority Fostering Service,
Parkfield House, Esplanade Road, Paignton, Devon.

Dates of Inspection Visits:

8th,9th,10th,14th,17th,18th,21st,22nd,23rd,24th February 2005.

Description of the strengths and issues to be addressed by the Service and the Authority:

This second annual Announced Inspection has addressed the progress made by the Service with regard to the issues of the first inspection; highlighted the strengths of the Service and the issues which must be addressed as a result of this inspection process. The inspection was undertaken over 10 days and utilised the following evidence:

- File sampling: 5 children's files;6 Carers' files; 6 personnel files; 5 carers undergoing assessment; training records; register of children; register of foster carers; records relating to accidents, complaints , allegations, child protection; a range of administrative records.
- Visits were made to 5 foster carers and 1 carer support group.
- 3 young people were interviewed.
- Interviews were undertaken with a comprehensive range of staff in both the Service and the Authority.
- A Fostering Panel was attended and an interview carried out with the Chair of Panel.
- Survey responses were received from 20 foster carers,34 placing social workers and 18 young people.

At the time of the inspection the Service was supporting 103 placements with 63 carers.

The report is written to reflect the issues that the "Service " must and can address and those which the "Authority" must and can address. It is written in this way in order to highlight issues which impact upon Service provision but which cannot be wholly controlled by the Service.

This inspection has highlighted two key issues for the Authority:

1. The ongoing issue in relation to the recruitment of social work staff to the Children's teams within the Authority.
2. The impact that the current financial issues within the Authority have on the Service in

terms of financial cuts and frozen posts.

The major strengths of the Service are:

- 1.The stability of the staff team with an apparent culture of an open, communicative style. The appointment of the new Manager of the Service , who also operates in a similar style has reinforced this culture.
- 2.The development of a range of good practice models including a specialist Contract Care carer group, joint initiative with the YOT team in the provision of a Remand bed (which can be flexibly used at other times) , the Foster Force support group / process for the children of carers, access to leisure facilities at reduced rates, an independent advocacy service with the Children’s Society, an Adolescent Support Worker post to specifically support education.
3. The children’s files sampled from the Children’s Team were of a commendable standard with demonstrable good practice documented.
- 4.The plans of the education team to move to an integrated team approach.

In terms of outcomes for young people, responses indicated that they view the service provision as largely positive in their lives. The age range of respondents is aged 8 years to 17 years. Young people recognise the support offered by carers in their everyday living and within the formal processes inherent for Looked After Children. 6 of the respondees commented on their lack of an allocated social worker or frequent changes in this allocation. All commented on how difficult or “cross” this made them.

Qualitative comments received about foster carers included:

- * “..... I don’t know where I would be without them”
- * “..... brilliant – the way I am looked after and cared for.
- * “..... being happy and safe.”

The major issues for the Service are highlighted below:

- 1.Completion of outstanding issues of the action plan of February 2004.
- 2.To develop systems for the monitoring of the functions of the Service.
- 3.To monitor Health and Safety in carers ‘ homes.
- 4.To develop a needs led approach to matching and placing.
5. To develop a transferable health record for young people.
- 6.To ensure the effective, evidenced supervision of foster carers and senior administrative staff.
- 7.To create a budget line for the Adolescent Support Service.
- 8.To update all safe care assessments.

9. To ensure that all carers are up to date with Child Protection training.
10. To make all Authority staff aware of the need for record security.
11. To ensure prompt payment for all carers.
12. To ensure that Panel progresses to full compliance with the regulations and standards.

Summary of standards achieved:

Statement of Purpose (Standard 1.)

1 of 1 standard achieved.

Fitness to Provide or Manage a Fostering Service (Standards 2-3)

1 of 2 standards achieved.

Management of the Fostering Service (Standards 4&5)

1 of 2 standards achieved.

Securing and Promoting Welfare (Standards 6-14)

5 of these 9 standards are met.

Recruiting, Checking, Managing, Supporting, Training Staff and Foster Carers.

(Standards 15-23)

5 of these 9 standards are achieved.

Records. (Standards 24&25)

1 of these 2 standards is achieved.

Fitness of Premises for Use as a Fostering Service. (Standards 26)

1 of 1 standard achieved.

Financial Requirements (Standards 27-29) (Standard 29)

These two standards do not apply to this authority . Standard 29 is not achieved.

Fostering Panel (Standard 30)

This standard is not achieved.

Short Term Breaks (Standard 31)

Not assessed on this occasion.

Family and Friends as Carers (Standard 32.)

Not fully assessed at this inspection.

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:

N/A

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	42	FS4	The Service must develop a clear, auditable monitoring system.	September 1 st 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 Chris Freestone Signature _____
Second Inspector Jennifer Reed Signature _____
Regulation Manager Emmy Tomsett Signature _____
Date _____

STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

Action Plan: The appropriate Officer of the Local Authority or the Registered Person (as applicable) is requested to provide the Commission with an Action Plan, which indicates how requirements 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	11	FS6	The Service must ensure that all foster carer homes meet health and safety requirements and provide comfortable accommodation for each young person placed.	August 1 st 2005
2	11	FS23FS6	The Service must ensure that Safe Care assessments for all foster carers and their homes are updated.	August 1 st 2005.
3	11	FS23	The Service must ensure that all carers receive updated Child Protection training.	December 1 st 2005
4	24	FS30	The Service must ensure that Panel membership meets the requirements of the Fostering Regulations.	September 1 st 2005
5	26	FS30	The Service must ensure that the panel fully fulfils its' quality assurance and feedback function as required by Regulation 26.	September 1 st 2005.

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	FS8	The Service should ensure that foster placement agreements contain reference to specific elements of matching which have been taken into consideration in agreeing a placement.
2	FS8	The Service should ensure that a needs led approach is developed and evidenced with regards to the matching process of placements.
3	FS12	The Service/Authority should ensure that a written and transferable health record is made available for young people in their care.
4	FS13	The Service should ensure that during the process of assessment the expectations of the availability of carers during the day is made clear to them.
5	FS19FS19 FS16	The Service is advised to ensure that supervision is offered to the senior administrative staff which includes specific discussion of the aspects of their work that relate to the process of fostering.
6	FS16	The Service should ensure that all carers maintain a full training portfolio.
7	FS17	The Service should ensure that the motivation of all potential foster carers is thoroughly explored at the assessment stage in order to identify and exclude those for whom fostering is financially led.
8	FS19	The Service should ensure that training programmes for staff are updated annually.
9	FS21	The Service/ Authority should ensure that the budget line under which the Adolescent Support Service functions is clarified.
10	FS22	The Service should ensure that all carers files contain clear records of formal supervision.
11	FS23	The Service/ Authority should ensure that a review of training is carried out in order to identify potential training programmes for more experienced carers.

12	FS23	The Service should ensure that all jointly approved carers both successfully complete all training required.
13	FS25	The Authority should ensure that all staff are aware of the need to hold records securely.
14	FS29	The Authority / Service should ensure that all carers are paid promptly.

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

Number of Inspector days spent	88
Survey of placing authorities	YES
Foster carer survey	YES
Foster children survey	YES
Checks with other organisations and Individuals	YES
• Directors of Social services	YES
• Child protection officer	YES
• Specialist advisor (s)	NO
• Local Foster Care Association	NO
Tracking Individual welfare arrangements	YES
• Interview with children	YES
• Interview with foster carers	YES
• Interview with agency staff	YES
• Contact with parents	NO
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of foster carer training	NO
Observation of foster panel	YES
Inspection of policy/practice documents	YES
Inspection of records	YES
Interview with individual child	YES
Date of Inspection	08/02/2005
Time of Inspection	10AM
Duration Of Inspection (hrs)	88

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?

3

A Statement of Purpose and Function is in place in relation to this standard. Staff interviewed were aware of its purpose and role. This overarching document is due for review by the Authority in March / April 2005.

A Children's Guide is in place. Two versions are available which are age and language appropriate.

Policy and procedural guidance stems from the Statement of Purpose and Function in relation to the fostering service. Other generic policies and procedures are in use which are produced by the Authority e.g. Human Resource policies.

An Authority led restructuring of this service is now complete. At the time of the inspection the new Manager for the Service had been in post for some 4 months.

Evidence base: policies and procedures; Statement of Purpose and Function; Children's Guide; information from the Manager.

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?

3

The Service is managed within the context of an overall Authority structure which has been reviewed and reorganised. This restructuring is now complete.

The Operations Manager for the Authority holds a budget from which several strands are devolved for the fostering service provision. It is anticipated that the new Manager for the fostering service will eventually hold responsibility for some aspects of the budget.

The Manager holds a range of relevant qualifications. The staff team are all well qualified within the field, areas of specific expertise being appropriately utilised within the Service.

Staff interviewed are positive in relation to the restructuring of the Service and are clear with regard to their roles within the Service / Authority.

Observation at the time of the inspection and information from staff confirms that an open , communicative style of management is in place.

Evidence base: policies and procedures; budgetary information; information from the Manager; staff records; direct observation at the time of the inspection.

Standard 3 (3.1 - 3.4)

Any persons carrying on or managing the fostering service are suitable people to run a business concerned with safeguarding and promoting the welfare of children.

Key Findings and Evidence

Standard met?

2

Policies and procedures are in place in relation to this standard.

Sampling of staff files and interviews with relevant staff demonstrates that this standard is achieved.

Notes of dates for CRB renewal three yearly are maintained.

Evidence base: policies and procedures; file sampling; information from the Manager; information from the Operations Manager; information from Human Resources.

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

Policy and procedural guidance in relation to this standard is in place.

The structure and function of the service within the context of the Authority has been restructured. The role of the service is clearly understood by the staff. The annual strategic plan for the Authority drives the annual plan and targets for the Fostering service. The Authority is currently working towards the implementation of a Children's Trust for September 2005.

The new Manager for the service is currently devising a range of systems to monitor the functioning of the service. The Service must ensure that such oversight is in place as identified at the annual Announced Inspection of February 2004. This requirement is outstanding and noted in the report.

No conflicts of interest had been declared at the time of the inspection.

Payments to carers are based upon the number of children placed, nature of placement and complexity. Some carers report that there have been delays in payment, particularly in respect of expenses claims. Five carers are currently Contract Carers for whom a wage is paid. This group of carers deal with young people with the most complex needs. Placements to these carers are carefully considered and the process is led and co-ordinated by a designated senior practitioner.

Evidence base: policies and procedures; annual plan; information from the Manager; payment schedules; information from carers.

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

NA

Death of a child placed with foster parents.

1

Referral to Secretary of State of a person working for the service as unsuitable to work with children.

0

Serious illness or accident of a child.

15

Outbreak of serious infectious disease at a foster home.

0

Actual or suspected involvement of a child in prostitution.

0

Serious incident relating to a foster child involving calling the police to a foster home.

1

Serious complaint about a foster parent.

7

Initiation of child protection enquiry involving a child.

3

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

0

Number of the above complaints which were substantiated:

0

Standard 5 (5.1 - 5.4)**The fostering service is managed effectively and efficiently.****Key Findings and Evidence****Standard met?****3**

Policy and procedural guidance is in place in relation to this standard.

The Service team are clear in their understanding of the revised structure and the role of the Manager. There is clear understanding of accountability at all levels and the deputising / duty system is well understood.

Observation of all aspects of the practice of the Service during the inspection demonstrated that a clear understanding of the structure and accountability in both Service and Authority. It was evidenced during the process of the inspection that the current cuts and frozen posts within the Authority are impacting on the workloads of the team. The team are managing this in an open and mutually supportive manner. This reflects the overall open style within the Service.

Evidence base: policies and procedures; information from the staff; information from the Manager; information from the Operations Manager; direct observation at the time of the inspection.

Securing and Promoting Welfare

The intended outcome for the following set of standards is:

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

Standard 6 (6.1 - 6.9)

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

Key Findings and Evidence	Standard met?
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Key Findings and Evidence	Standard met?
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Key Findings and Evidence	Standard met?
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Policy and procedural guidance is in place in relation to this standard.

At the time of the inspection 103 placements were ongoing supported by some 57 foster carers , 5 Contract Carers and 1 Remand Carer.

Foster carers visited by the inspectors were generally welcoming and openly shared views and opinions in relation to the service. A major issue was identified in relation to home conditions during the inspection. This issue has since been reviewed by the Service Manager and Fostering Social Worker . An action plan has been put in place which is to be monitored by the Service and the Inspector from the Commission for Social Care Inspection.

The Service must ensure that all foster carer homes meet health and safety requirements and provide comfortable accommodation for each young person placed.

File tracking at the time of the inspection demonstrated that some Safe Care assessments needed updating. The Service must ensure that Safe Care assessments for all foster carers and their homes are updated.

At the last inspection it was the intention of the Authority to recruit social workers to the children's teams. This happened , but retention of these staff has been poor. .As a result foster carers again expressed concern in relation to the level of unmet need in the management and support of children placed. This concern was also expressed by young people , one of whom summed up the qualitative views of the young people by saying , " I need to see my social worker and I don't have one!"

The Authority have recently introduced one peripatetic social worker post and this had been noted by carers who had now come into contact with her.

Evidence base: policies and procedures ;information from staff; information from the Manager; information from carers ; information from young people; information from the Operations Manager.

Standard 7 (7.1 - 7.7)

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

Key Findings and Evidence**Standard met?**

3

Policies and procedures are in place in relation to this standard including an Equality of Opportunity policy.

Young people who responded to the inspection questionnaire were positive that relevant and appropriate hobbies and leisure pursuits were supported. These included football, hockey ,rugby, Girl Guides, swimming , athletics, clubs etc. Young people were also positive with regard to the role of the Adolescent Support Worker and leisure/ support time. The Service has continued to develop its' good practice model in relation to access to leisure facilities in the area. These include reduced rates and some free admission to local facilities.

The Service aims to ensure that cultural diversity and all aspects of equality are addressed throughout its' provision. Foster carers and social workers support this stance. Training for foster carers covers issues related to equality and diversity.

The Service supports young people with disability with specific services , equipment and where needed financial support .(This latter is also sought from the Authority for larger projects e.g. room extension to a home.)

Evidence base: policies and procedures; information from young people; information from carers; information from staff; information from the Manager; questionnaire responses from young people and foster carers; observation at the time of the inspection.

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

Policy and procedural guidance is in place in relation to this standard.

The co- ordination and procedure in relation to matching is clear and well understood by the staff team. The Service has a Placement Co-ordinator in post, longer term placements and other matching decisions being made at the weekly team meeting. Emergency placements have necessitated taking some carers over numbers. This has happened on 18 occasions between April 2004 and February 2005.

The Service is trialling a format which should demonstrate the elements of matching which have been taken into account . This will be subject to review at the next Announced Inspection. The Service must ensure that foster placement agreements contain reference to specific elements of matching which have been taken into consideration in agreeing a placement.

Direct observation of a staff meeting at which matching for placements was considered

,demonstrated the strong and informed oral tradition of the team. The tension in the placing of a young person , the responsibility of the Local Authority to place and practice of utilising a vacancy led approach were evident. The Manager is aware of this and will lead the Service to develop a process which is clearly led and evidenced by the needs of the young person to be placed. This process will mirror the move of the Authority into Children’s Trust status and an integrated service provision. The Service should ensure that a needs led approach is developed and evidenced with regards to the matching process of placements.

Qualitative information from foster carers (reported in nine responses) , demonstrated that some carers were not furnished with enough information with regard to the young persons placed. Information which subsequently came to light indicated to them a poor match .

Evidence base: policies and procedures; matching documentation; direct observation of a team meeting;information from carers.

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?	
<p>Policy and procedural guidance is in place in relation.</p> <p>Clear written procedures are available to foster carers with regard to all aspects of protection including: managing behaviour, missing from home without authorisation, promoting self esteem, child protection, Safe Care. Inspection of records demonstrated that Safe Care assessments are not all up to date . The Service must ensure that this is done.</p> <p>Foster carers interviewed were clear in their understanding of the range of sanctions which were acceptable. All were clear that corporal punishment is not acceptable.</p> <p>Foster carers commented that they receive all information available to the service , but that there are often gaps in the information which later become apparent and can impact on the placement.</p> <p>The Service utilises a good practice model in relation to young people absent from home without authorisation – an independent advocacy service can be accessed by the young person.</p>	2	
<p>Percentage of foster children placed who report never or hardly ever being bullied:</p>	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?****3**

Policy and procedural guidance is in place in relation to this standard.

File tracking of both foster carer files and those of young people demonstrated that contact arrangements are clearly documented. Interviews with carers and questionnaire responses illustrates a clear understanding of contact arrangements and that carers are very proactive in facilitating contact. Young people also comment on the support received with regard to contact. (Parents' opinions could not be ascertained as to these arrangements, as the parents contacted were unable or unwilling to take part in this inspection process.)

Foster carers also spoke positively of the role played by the children's social worker in this process. Some carers expressed concern that children in their care had no access to a social worker , the Independent Reviewing process being the young persons' only access to feedback and planning re. contact issues.

The role of the Independent Reviewing Officer is clearly defined and understood within the Authority and Service. At the time of the inspection the caseload of the 1.5 Independent Reviewing Officers was 230 cases. Young people are recognised as being totally central to this process and their voice is clearly heard and recorded in the review minutes. 97% of young people participate in the review process as do 99% of parents. Records kept of the reviews take a clear narrative format in which the young person is clearly heard.

It was noted that some "slippage" in the progress of plans for young people had occurred as a result of recruitment problems within the Children's team.

Evidence base: policies and procedures; information from the Independent Reviewing Officer; file evidence ;information from young people; information from carers; survey responses.

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?****3**

Policy and procedural guidance is in place in relation to this standard.

Various methods are used in order to ascertain the opinions of young people, families and significant others are used by the Authority and the Service. These include: the Independent Review process; information received from parents for reviews; information received from young people; information received from the child's social worker; information received from the fostering social worker; other sources e.g. education.

Foster carers were clear in their understanding of the process of both formal and informal consultation. Young people who responded to the survey were clear that their carers did consult with them with regard to formal reviews and their day to day living .

Evidence base: policies and procedures; information from young people; information

from carers; file evidence.

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

Policy and procedural guidance is in place in relation to this standard. The Authority is committed to the use of the Health Standards and work is ongoing around them.

File evidence, information from foster carers and information from young people demonstrates that the Authority responsibilities in relation to the health care of young people are largely being fulfilled. A broad range of appropriate health services are available to young people, including a range of specialist and therapeutic services. A named GP is in place for young people and the annual medical review process is clearly established.

Feedback from foster carers and examination of files demonstrated that carers do not have a written health record for each young person in their care. The Service / Authority should ensure that such a record is developed and made available to foster carers.

Evidence base: policies and procedures; file evidence; information from foster carers; information from young people; information from the Manager.

Standard 13 (13.1 - 13.8)

The fostering service gives a high priority to meeting the educational needs of each child or young person in foster care and ensures that she/he is encouraged to attain her/his full potential.

Key Findings and Evidence

Standard met?

3

Policy and procedural guidance is in place in relation to this standard.

The current financial issues within the Authority have impacted upon the education service in terms of some cuts and frozen posts. Data in relation to looked after children is available and clearly identifies cohort sizes, key stage results and trends. Support packages are available for young people. At the time of the inspection 7 Looked After Children attended a Pupil Referral Unit (PRU), 7 Looked After Children were receiving interim tuition and 2 Looked After Children were attending a local Further Education College.

The education staff did reflect upon issues arising in relation to young people being placed in Torbay from outside of the Authority. At the time of the inspection some 65 young people

had been placed from outside of the Authority utilising a variety of resources and education support services. The major problem arising in respect of Looked After Children is that placing authorities rarely let the education service know that the young person is in area. This poor disclosure of information means that young people come to the attention of the education service in a fragmented and poorly co – ordinated fashion.

Foster carers were clear in their understanding of the role of education for the young people concerned. All were supportive of the process. It was however noted that there had been some tension in the work commitments of some carers when exclusions occurred for the young people and carers were not available. The fostering service should ensure that during the process of assessment the expectations of their availability is made clear to potential foster carers.

The Fostering Service has developed and implemented a new role within the Adolescent Support Service which has as its' focus education support for young people.

Evidence base: policies and procedures; information from education team; information from carers ; information from young people; direct observation Adolescent Support team meeting; education team data; file evidence.

Standard 14 (14.1 - 14.5)

The fostering service ensures that their foster care services help to develop skills, competence and knowledge necessary for adult living.

Key Findings and Evidence

Standard met?

3

Policy and procedural guidance is in place in relation to this standard.

The Senior Practitioner is to take the lead in the Service in order to work with the Care to Community team (CTC) to develop an independent living skills package which will dovetail with the leaving care team process. The progress of this project will be reviewed at the 2006/2007 Announced Inspection.

Currently , the fostering service team liaise with the leaving care team in the development of the Pathway Plan for the young person and its' subsequent support by foster carers.

Evidence base: policies and procedures; file evidence; information from the Senior Practitioner.

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?

3

Policies and procedures are in place in relation to this standard.

File evidence, information from a Human Resources officer and comprehensive sampling demonstrate that all the requirements of Schedule 1 are now in place and met. Enhanced Criminal Record Bureau (CRB) checks are in place and are subject to review every three years.

All social work staff have appropriate qualifications. Copies of certificates are held as are copies of the registration of social work staff with the General Council. Social work students are suitably supervised during the duration of their placement with the fostering service.

Evidence base: policies and procedures; file sampling; information from Human Resources staff.

Total number of staff of the agency:

18

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

X

Standard 16 (16.1 - 16.16)

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

Key Findings and Evidence

Standard met?

2

Policies and procedures are in place in relation to this standard.

The recent restructuring of the Service appears to be understood by staff. The new Manager for the Service has an "open door" and accessible style which fits within and is valued by the team. The management structure of both the Service and Authority are clear and is understood by staff.

Workloads are defined, but it was noted during the inspection that the issue of frozen posts and long term sickness within the team was impacting on their management of caseloads. Foster carer responses acknowledged how "busy" staff were. Staff within the team have a range of appropriate qualifications and specialist areas are undertaken by individuals. e.g. adolescent placements, parent and child placements; Contract Care, family and friends; own children of foster carers. Supervision of social workers is undertaken by the Manager.

The Service is supported by a dedicated administrative team. One of the seniors in that team offers supervision to staff on a six weekly basis. However, the two senior administrative and financial staff are only supervised every 2-3 months by another senior officer in the Authority. The Service is advised to ensure that consistent routine supervision is offered to the senior staff ,which includes specific discussion of the aspects of their work that relate to the process of fostering.

Examination of training records and systems demonstrated that carers do not routinely maintain a training portfolio. The Service should ensure that all carers maintain a full training portfolio.

Policies and procedures are available to staff as required.

Evidence base; policies and procedures; information from staff; file evidence; personnel files; direct observation at the time of the inspection.

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
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Policies and procedures are in place in relation to this standard.

The staff qualification base within the Service is appropriate in order to fulfil the role required .The Service recruits an appropriate range of carers as evidenced by those recruited to the Contract Care service and the carer recruited to the remand bed. As indicated in other standard text and the introduction to this report the issue of cuts, frozen posts and long term sickness is starting to impact upon the provision offered by the Service. It was noted that the team offer a substantial element of “goodwill” in their working style , which helps to maintain the delivery of the Service required.

Sampling of five foster carer applications in progress was undertaken during the inspection. All prospective carers had attended a “Choosing to Foster” programme and the assessment process was undertaken using the BAAF framework and assessment paperwork. Assessments scrutinised were detailed and undertaken over varying timescales – typically 5-9months. 12-15 visits had been undertaken and in the case of joint carers – individual and joint visits had been made.

Evidence gained during visits and from foster carer feedback indicated that for some carers the financial rewards of fostering as their income appeared to lead their approach. The Service is advised to ensure that this aspect is thoroughly explored at the BAAF Form F assessment stage with regard to the potential carers’ motivation.

Evidence base: policies and procedures; file evidence; visits; foster carer survey response; personnel files..

Standard 18 (18.1 - 18.7)

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

Key Findings and Evidence**Standard met?**

3

Policies and procedures are in place in relation to this standard.

Tracking of personnel files and information from the Human Resource department confirmed the equity of the recruitment processes employed by the Authority.

Foster carers comment positively upon the process of recruitment that they have undergone. One carer felt that “the process was too long.” The inspector examined the relevant file and documentary evidence and concluded that the seven month period of assessment of this particular carer had been appropriate. Carers are aware of the out of hours process/ cover. All carers have access to their handbook and updated documentation is sent to them.

Health and safety policies are in place and training supports the policy.

A whistle blowing policy is in place.

Evidence base: policies and procedures; personnel files; information from Human Resources staff; information from foster carers; file evidence.

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?**

2

Policies and procedures are in place in relation to this standard.

Annual staff appraisal and the process of supervision are used in order to identify and support staff training needs. The Service should ensure that training programmes for staff and training opportunities undertaken by individuals are routinely evaluated and the evidence held. Training programmes for staff should be updated annually.

Supervision is in place for all staff. The Service/ Authority must ensure that appropriately regular supervision is put in place for the two senior members of the administration team (see text standard 16.)

Evidence base: policies and procedures; supervision records; appraisal records; information from staff.

Standard 20 (20.1 - 20.5)

All staff are properly accountable and supported.

Key Findings and Evidence

Standard met?

3

Policies and procedures are in place in relation to this standard.

Supervision for staff is in place. For the social work staff this is carried out by the Manager. Records are held of supervision sessions. The supervision process is utilised in order to define training needs. Annual training is defined within the appraisal process.

Staff and team meetings are in place , including the “away day “ format. The staff meeting attended during the process of inspection is held every Wednesday and deals with business issues and matching for placements. The agenda is shaped by the Manager and staff team . That observed included: allocation of desk space for Adolescent Support Workers; systemisation of administrative structures; initial visits; PQ training; planning for a team day.

Evidence base: policies and procedures; supervision rotas; records; direct observation of a team meeting.

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**

Policies and procedures are in place in relation to this standard.

Each approved foster carer was seen to be supervised and supported by a nominated fostering social worker. Foster carer survey responses and carers interviewed at the time of the inspection confirm that carers are clear in their understanding of the role of the fostering social worker.

Carers are clear with regard to the role of support groups , out of hours support, respite care and the Independent Review process.

At the time of the inspection a group meeting of the contract carers with their fostering social worker was observed. The group demonstrated excellent peer support skills , clear understanding of the young people placed and a very positive relationship with the fostering social worker.

Annual reviews are undertaken. All first reviews are placed before the fostering Panel.

The Service has developed a good practice model in the support offered to young people and families by the four Adolescent Support Workers. The members of this team offer an excellent range of support. One member of the team directly supports the education process. The team were observed to be passionate and committed to their roles and the young people . Insight and understanding of the young people were clearly demonstrated and the team are to be commended. However , the Service / Authority must clarify the budget lines under which this team operates. The team were seen to be utilising their own money to support leisure time and activities with the young people and then claiming this back. This process impacts on their personal finances and is unsatisfactory.

Evidence base: policies and procedures; information from foster carers; direct observation of a support group meeting; file evidence.

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**

Policies and procedures are in place in relation to this standard.

Fostering social workers each carry a caseload of approved foster carers whom they support and supervise. Foster carers interviewed were clear in their understanding of the Foster care Agreement and its' associated information. Carers state that they have a Carer's Handbook for which they receive some updates.

Some foster carers noted that contact with some fostering social workers had increasingly become telephone based , with visits become less frequent. The Inspector felt that this was one demonstration of the impact of the financial state of the Authority upon the Service and its' provision. The Authority and the Service should ensure that all foster carers receive regular meetings with their social workers. Carers files should hold clear records of formal supervision sessions – some carers were unclear as to the role of formal supervision.

File evidence in relation to contact logs demonstrates much greater consistency of recording and all logs sampled were dated and signed.

Foster carer responses and those of young people demonstrate an ongoing concern with regard to the issues of unmet need for the young people in their care. This has led in some cases to a “blurring” of the fostering social worker role in meeting the needs of young people.

The Authority is working towards resolution of unmet need with another recruitment campaign to the children’s team. This will be reviewed at the next annual Announced Inspection in February 2006.

Evidence base: policies and procedures; file evidence; information from the Manager; information from Human Resources; information from staff; information from foster carers ; information from young people; information from the Independent Reviewing Officer.

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?	1
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Policies and procedures are in place in relation to this standard.

Training is in place from the commencement of the recruitment and assessment process utilising the “Choosing to Foster” programme. Foster carers commented positively on this programme in “..... telling it like it is. We were under no illusions , nothing later came as a surprise.”

Training needs and achievements are identified in each foster carers’ annual review. Contract carers interviewed were strongly motivated and committed to training . Training was regarded as an invaluable resource for their practice.

Foster carer responses during the inspection process identify a need for further training , particularly for established and experienced foster carers. The Service / Authority should ensure that a review of training is carried out in order to identify potential programmes for experienced carers.

Training record evidence at the time of the inspection demonstrated that not all foster carers are attending Child Protection training or receiving updates. For some carers their Child Protection training is now quite dated. The Service should ensure that all carers receive up dated Child Protection training.

Where approval has been given for joint carers , both carers are not successfully completing the training required. The Service should ensure that all jointly approved carers successfully complete all training required.

Examination of case files demonstrates that written Safe Care assessments are not fully in place or updated. The Service must ensure that up to date Safe Care assessments are in place for all foster carer homes.

The Service has developed a model of excellence in the provision of the “Foster Force”

support group and process for the sons and daughters of foster carers. This has been led and developed by one fostering social worker over the last five and a half years. They are supported by an Adolescent Support Worker. The core group numbers between 15-20 young people currently aged between 8-17 years. The social workers' knowledge of these young people was seen to contribute to the matching process.

Evidence base: policies and procedures; information from foster carers; training records; file evidence; training schedule; information from young people; information from staff.

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?	4
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Policies and procedures are in place in relation to this standard.

Case records for children and young people are the responsibility of the allocated social worker for the young person. The Service does hold a “mirror” file which holds some of the documentation.

At the time of the inspection five substantial young person’s files were examined. The Inspector’s wish to commend the Children’s team workers in the Authority who were responsible for the files, which were well structured , detailed and clear. Good practice was identified, including the awarding of a special certificate to a young person in order to recognise the completion of court processes and acknowledging a key event for them.

All foster cares interviewed were clear in their role in supporting the young person in an understanding of their history and life events.

Evidence base; policies and procedures; information from carers; children’s case file tracking.

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
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Policies and procedures are in place in relation to this standard.

Separate records are maintained as required by the standard. The Service has recently appointed a new Manager who will develop a series of systems for the monitoring of the quality and adequacy of records as required by a good practice model.

Confidential records within the Service are held securely at Parkfield House, Paignton. Records of young people are held at Union House, Torquay. It was noted by both Inspectors that following examination of the children’s files , administrative staff seemed unaware of and resistant to collecting and returning files to a secure environment. A temporary member of staff eventually collected the files , thus allowing the Inspector to leave the premises. The

Authority should ensure that all staff are aware of the need to hold records securely.

Records related to recruitment are held by the central Human Resources department and meet the requirements of Schedule 1.

Records of complaints and allegations are held by the Manager. This information is cross referenced to the relevant carer or young person's file.

Evidence base: policies and procedures; file evidence; direct observation at the time of the inspection.

Number of current foster placements supported by the agency:	103		
Number of placements made by the agency in the last 12 months:	223		
Number of placements made by the agency which ended in the past 12 months:	211		
Number of new foster carers approved during the last 12 months:	7		
Number of foster carers who left the agency during the last 12 months:	7		
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 offices of the fostering service are based at Parkfield House- an Edwardian house left to the mothers and children of Torbay within the will of a Torbay family. It is based in large grounds and supports other Authority departments.

Dedicated administrative staff support the roles of the service. These include – day to day office management ,response to enquiries re. fostering, administrative management of all new applications, administrative management of the annual review processes; updating of training records, project support , Contract Care and Remand bed support, internal recruitment processes, preparation of all Panel papers, minute taking for Panel and all follow – up tasks.

IT equipment is in place. Staff are very happy with the IT support services offered. The IT facilities are generally fit for purpose. The development of a new data base system is ongoing.

Evidence base: direct observation; information from staff.

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?

9

Not applicable to Local Authority provision.

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?

9

Not applicable to Local Authority provision.

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

Policies and procedures are in place in relation to this standard.

All carers receive copies of the policy in relation to payments and allowances. Most carers confirm that these are paid at the appropriate time. Some foster carers stated that they had experienced delays with regard to the extra payments and other claims. The Authority /Service should ensure that all carers are paid promptly.

There is a salaried rate for the specialist Contract Care and Remand bed group of carers.

Evidence base: policies and procedures; information from carers; allowances schedule.

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

Policies and procedures are in place in relation to this standard.

CRB checks for all panel members are in place.

The Panel observed at the time of the inspection was quorate. Panel members included a foster carer, social workers, the Manager, independent members. The minutes of the three previous meetings were available to the Inspector.

The Panel Chair led an initial discussion of the three BAAF form F's submitted. A clear range of questions for candidates were identified and explored during their presentation to Panel. The Chair of the Panel clearly confirmed the findings to the Minute taker. The new decision maker for the Authority is the Assistant Director of Social Services.

Discussion with the chair of the Panel confirmed that training for the Panel members had taken place in October 2004 when the constitution and functioning of the Panel had been reviewed. This had resulted in a clear action plan. The implementation of this plan will be monitored at the next CSCI Announced Inspection in February 2006.

The Chair was very clear in the role of Panel and its' need to meet regulatory requirements in respect of its' constituent members. It was noted that the member of the Authority on the Panel had resigned. The Chair also noted that a person who had been a Looked After child was to be approached in order to become a Panel member. The Service / Authority must ensure that the Panel member s meet the requirements of the Fostering Regulations.

The Chair stated that all first annual reviews of carers are taken to Panel.

At present the Panel does not fulfil a quality assurance function with feedback to staff. The Service should ensure that this occurs.

The Chair recognises that a process of change is required in the functioning and role of the Panel. The intention is for training to become an annual event and new panel members will undergo a supported induction process. The annual report for 2005 is planned.

Evidence base: policies and procedures; minutes of meetings; Form F submissions; information from the Panel Chair; information from the Manager.

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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0

Not fully assessed on this occasion.

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?	0
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Not fully assessed on this occasion.

Historically , a project bid was achieved in order for this area of foster care to be integrated into the Service. This process has been delayed largely due to frozen posts and long term sickness in the Service. It is hoped that by the time of the next Announced Inspection in February 2006, that the assessment and support process for this specific group of 12 carers who have so far been identified , will be in place. A heavy demand for this provision has been identified at District level.

The anticipated model of practice is to follow the mainstream fostering model with regular visits, LAC reviews, support group and strong elements of peer support.

The Authority would appear to have the opportunity to centralise “kinship “care under one model of good practice and to develop a consistency of approach across the authority.

This process will be reviewed in February 2006 by CSCI.

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 would welcome comments on the content of this report relating to the Inspection conducted on 8th February 2005 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

Comments were received from the provider

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

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

Note:

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

D.2 Please provide the Commission with a written Action Plan by 27th May 2005, 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

Action plan was received at the point of publication

Action plan covers all the statutory requirements in a timely fashion

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

Provider has declined to provide an action plan

Other: <enter details here>

Public reports

It should be noted that all 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 Torbay Fostering 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 Torbay Fostering 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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