



Making Social Care  
Better for People

# inspection report

## FOSTERING SERVICE

### Brighton and Hove Fostering Services

**253 Preston Road  
Brighton  
East Sussex  
BN1 6SE**

*Lead Inspector*  
Lindy Latreille

*Announced Inspection*  
20<sup>th</sup> 23<sup>rd</sup> 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>	
Document Purpose	Inspection Report
Author	CSCI
Audience	General Public
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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>	Brighton and Hove Fostering Services
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<b>Name of registered provider(s)/company (if applicable)</b>	Brighton & Hove City Council
<b>Name of registered manager (if applicable)</b>	Sharon Donnelly
<b>Type of registration</b>	Local Auth Fostering Service

# SERVICE INFORMATION

## Conditions of registration:

**Date of last inspection**      23rd January 2006

## Brief Description of the Service:

The Fostering and Adoption Service continues to expand as the service recruits more foster carers to meet the statutory commitments. The service comprises a fostering team, an intensive placement team, a family and friend's team, concurrency team and an adoption and permanence team. A team of administrators supports all of them.

Data provided for the inspection confirmed that there are 146 households approved and 267 young people placed.

The service has two panels. The fostering panel is responsible for making recommendations about the approval of foster carers, family and friend's carers and Barnardo's Link Plus carers. The permanence panel is responsible for recommendations about the approval of foster carers, concurrency carers and prospective adopters. Professional advisors, who are non-operational managers managed within the service, support both panels and provide a quality assurance and policy development role on Fostering and Adoption issues within the Trust.

Fees to foster carers are within a range of £212 - £489.

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# SUMMARY

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

This was an announced inspection of Brighton and Hove City Council's fostering service. Two Inspectors carried out the inspection over four days. Interviews were held with the head of service for Fostering and Adoption – the Registered Manager, six foster carers and five young people, the fostering service manager, the adoption and permanence service manager, practice managers, supervising social workers, panel chair, agency decision maker, panel advisers, area manager with responsibility for education for Looked After Children (LAC) team, recruitment and publicity officer for black and minority ethnic foster carers, head of family therapy at the Children's and Adolescent Mental Health Services (CAMHS) team for LAC, nurse consultant for LAC, and the chair of the Brighton and Hove fostering association. A staff meeting was attended. Home visits were made to six households and documents were reviewed; foster carers files, young people files, foster carers handbook, resource files, complaints, safeguarding and child protection, panel minutes and annual report and fostering service statistics, staff meeting minutes, family and friends pack, fostering service annual report, education for LAC improvement plan, Skills to Foster induction programme, foster carers recruitment strategy, foster carers' resource pack for black and minority ethnic children, Sussex Child Protection and Safeguarding Procedures, CAMHS annual report 2005-2006 and the team plan for fostering and adoption services 2006-2007.

## **What the service does well:**

One foster carer stated, "they felt proud to foster for Brighton and Hove and would not be looking to the independent sector", was a comment made by one of the foster carers who met with the Inspectors.

The management of the service continues to be very well organised. The service offers very good support to foster carers by direct contact with supervising social workers from the fostering service, access to specialists such as a Nurse Consultant for LAC, LAC Education Co-ordinator and LAC educational psychologist and a FFAST-track access to the CAMHS team plus a child psychotherapist and specialised fostering consultant contracted to work within the Fostering and Adoption Service. The intensive placement team continues to offer both group, individual and holiday activity support to LAC in the fostering service.

The service values the input from black and minority ethnic (BME) foster carers and young people and diversity, equality and anti-discriminatory practice is considered at all levels of the organisation. The appointment of a Recruitment and Policy Officer is now embedded and offers further support for BME foster carers and young people placed transracially.

The views of young people in placements are sought for foster carers reviews and policy changes. The service is constantly considering how it can be developed and how support can be delivered to individual carers, young people and members of staff.

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

There were no requirements from the last inspection. The outcome from the Joint Area Review on 10<sup>th</sup> October 2006 was positive overall but focused on areas for improvement namely reducing the numbers of looked-after young people, widening the range of foster care placements, continuing to improve the numbers of young people in education and their educational outcomes, and improving the educational and training facilities for young people with a learning disability.

Brighton and Hove City Council are the first Local Authority in the country to create The Children and Young People's Trust (CYPT) launched on 18<sup>th</sup> October 2006, ahead of statutory requirement. The Trust brings all the different agencies together into multi-disciplinary teams under a single management structure. Impacts for the fostering service are unclear at present but the service is committed to developing links with black and minority ethnic and other community groups as part of their strategy to recruit more black and minority ethnic foster carers, and extend the recruitment of people who may be interested in caring for teenagers.

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

All staff must have a Criminal Record Bureau (CRB) check relating to the position held in the fostering service and for it to be in place before the employee's start date. CRB checks should also be in place for all adults in a foster carers household.

Child protection strategy meetings should be notified to the Commission for Social Care Inspection.

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.

# **DETAILS OF INSPECTOR FINDINGS**

## **CONTENTS**

Being Healthy

Staying Safe

Enjoying and Achieving

Making a Positive Contribution

Achieving Economic Wellbeing

Management

Scoring of Outcomes

Statutory Requirements Identified During the Inspection



# 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 at least once during a 12 month period.

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

12.

Quality of this outcome area is excellent. This judgement has been made using available evidence including a visit to this service.

The health needs of young people are identified and met through well-developed liaison with external professionals, to meet the holistic health of the young people.

### EVIDENCE:

The fostering service places young people where their medical needs can be met, and foster carers confirmed this. Foster carers spoke of good General Practitioner and Health Visitor support, and from other medical professionals. Mostly information was available to them at the start of the placement. Where it was an emergency placement information was passed on as soon as the service had it. The foster carers felt that they had received sufficient training to be aware of health needs, though some foster carers consulted during the inspection could not remember any instruction in universal standards to fully protect themselves and the young people in their care with regard to Hepatitis B/C or HIV/AIDS. All foster carers felt that they promoted a healthy lifestyle with balanced menus, appropriate diets and exercise and fresh air. Foster carers contributed to the young person's reviews by oral report on health matters.

The nurse consultant for Looked After Children (LAC) completes initial health assessments and health plans for the LAC young people, and the initial health assessments are copied to the service and the action plan is given to the foster carers. These were observed at some foster carers visits made by Inspectors. The nurse consultant is available to foster carers who may telephone for advice and support on any health matter. All foster carers visited spoke highly of the support that they received. The LAC nurse consultant ensures that referrals to

specialists such as psychiatrists, psychologists and orthodontists are managed so that the appointments are achieved.

A review undertaken by the nurse consultant showed significant improvements in the health of young people when looked after for one year or more. 13% of young people were found to be affected with blood borne virus ie HIV/Hepatitis B/ C at initial assessment and this figure was reduced to 0.4% after one year or more. 23% of young people with a learning difficulty had a Statement of Educational Need (SEN) at initial assessment and 33% had a SEN after one or more years. Dental decay was reduced from 47% to 13% after one year or more and 68% of 11 – 16 year olds were misusing drugs at their initial assessment, which was reduced to 34% after one year or more.

The nurse consultant is involved in delivering training to the foster carers around the care of infants exposed to substance misuse and, with an independent consultant therapist, promoting mental and physical health for LAC young people. She manages the specialist nurse in the Leaving Care team who works with the sixteen plus and unaccompanied asylum seeking (UAS) young people providing training in promoting health and well-being sexual health matters and substance misuse. Workshops are also held for parent and baby foster carers. The training schedule details the competencies needed by foster carers to meet the needs of the young people; namely knowledge of child development and the promotion of holistic health. Foster carers valued this training.

The Registered Manager and the nurse consultant meet monthly with the Head of Systemic Psychotherapy and Family Therapy, who leads the specialised team for LAC within the Children's and Adolescent Mental Health Services (CAMHS). CAMHS provides a dedicated team of highly qualified professionals focused to meet the emotional needs of fostered and adopted children. A positive factor is the liaison of both the fostering service and CAMHS to maximise the best outcomes for the young people. This service offers a flexible, and where necessary, FFAST tracked service to meet the complex needs of the LAC young people. At the point of taking a young person into care the service has experienced being marginalised as the legal process drives events, but the service has always experienced a favourable working relationship with the fostering service.

The foster carers handbook provides clear details about the importance of providing a safe and caring environment with information about smoking, pets and sexual health education. The nurse consultant and panel advisor are responsible for updating the handbook with health information.

The fostering service offers additional specialist support and advice to foster carers and kinship carers, known as family and friends, from an independent psychotherapist. Foster carers valued this input. Reflective Space Workshops are to be piloted, led by this consultant, to engage with staff, foster carers and

family and friend carers to consider practice in the care of the LAC. The team plan for 2006-2007 identifies the continuation of a therapeutic support group for foster carers and independent consultants to provide additional services through support and training to enable foster carers to meet and promote the health needs of the young people.

# 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 at least once during a 12 month period.**

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

3,6,8,9,15 and 30.

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

The young people are safeguarded and protected by a variety of policies, procedures and training of foster carers to ensure reliable care in a safe environment for young people. Child protection notifications have not been made to Commission for Social Care Inspection.

## **EVIDENCE:**

The Registered Manager is an experienced social worker who has held her position for the last six years. There are clear lines of communication up to the head of service and to the service managers she supervises. All references and appropriate checks are in place.

The service has recruited a wide range of foster carers, single carers, couples, gay and lesbian, BME, friends and family and concurrency. The six foster carers homes visited were of a good standard and homely. The young people spoken to on these visits confirmed that they were comfortable, warm and well fed. The young people's bedrooms were well furnished and arranged and all the young people were happy with their rooms. Foster carers detailed the rigorous assessment process and all felt that it was appropriate in its scrutiny. Annual reviews take place; the first is always presented to panel. Health and

safety checks on homes and vehicles are completed during assessment and annually there after. All young people have a single bedroom unless part of a sibling group. Safe caring is discussed at length in the foster carers' preparation and all those visited were aware of their family responsibilities and had personal strategies in place; some were very detailed. Social workers confirmed that any risk associated with the young person would be addressed and management strategies confirmed in these guidelines. Written guidelines were not seen in all homes.

A dedicated practice manager and two social worker resource officers manage the duty team. The duty team manages matching and all disciplines, where possible, attend the weekly child awaiting placement (CAP) meeting. There are 40 – 60 referrals a month. Placement stability meetings, chaired by fieldwork service managers are convened as necessary and attended by practice managers, supervising social workers and foster carers to identify ways to support a struggling placement. Statistics are gathered from the duty team when the disruption of a long-term placement takes place and a subsequent meeting is called with an independent reviewing officer to consider actions taken and decisions made. The outcomes are reported within the annual report. The local courts have made an increased number of parent and baby foster placements, in response to the legal precedent, and the service has increased the provision through recruitment from 4 to 10 foster carers to meet demand. There is a preferred providers list of independent fostering agencies (IFA), with a dedicated manager, and young people are referred when they cannot be placed in-house. The Registered Manager confirmed that no young person is subsequently brought back into an in-house placement to meet budgetary arrangements. This is only considered if a placement breaks down or there is a change in the care plan. There is good support for trans-racial placements.

Working Together in Child Protection is a mandatory course for all foster carers to attend and an identified competency for foster carers in order to help young people keep themselves safe from harm or abuse and to know how to seek help if their safety is threatened. Training was rated as good and informative by foster carers.

Safe caring is another mandatory course run over two days for foster carers to ensure that they maintain the safety of their fostered young people and know how to seek help if their safety is threatened. Safe caring, another mandatory course, run over two days for foster carers to maintain the safety of the young people and be pro-active and keep their families safe from false allegations. At present when an injury occurs the foster carer contacts the service to report the incident and then completes a written report. Foster carers do not routinely use body maps. The foster carers' contract confirms that corporal punishment is not acceptable and foster carers visited were aware of this.

Incidents of safeguarding are recorded alongside complaints and monitored by the Registered Manager. There have been six safeguarding investigations since

the last inspection and none have been notified to the Commission for Social Care Inspection as required by regulations. At present safeguarding matters are logged alongside complaints, as that is how they have been brought to the attention of the service. On the evidence presented at the inspection it was difficult to track all documentation relating to each incident. Questions were asked at the inspection as to why some complaints were investigated as standards of care and not safeguarding and the criterion was satisfactorily explained. Good practice would ensure that all safeguarding investigations were logged together with documentary evidence to substantiate each outcome, and that the recording is consistent.

Foster carers spoke of supporting their young people to manage bullying and identified strategies that could be used. No concerns were raised about bullying by the young people visited. There are clear procedures should a young person go missing from home and foster carers confirmed positive outcomes following support from supervising social workers and placing social workers.

Criminal Record Bureau (CRB) checks for adult members of one family were found to have lapsed by twenty months and one member of staff had taken up her appointment without a current CRB check in place. The Registered Manager clarified that a written agreement was put in place, in relation to the member of staff, about her working practices whilst waiting for the new CRB as she had no unsupervised contact with young people.

The recruitment process is well managed and clear procedures are in place. Evidence was seen that social workers' are qualified and registered with the General Social Care Council (GSCC). There are many recruitment events, at present targeted to meet the needs for foster carers for teenagers and BME young people. One of these evening events was attended prior to the inspection. The assessment process is robust and panel papers supported this. Training is wide-ranging and available for staff and foster carers and often takes place together enabling both to have a good understanding of each other's role. Some staff working as social worker resource officers, (SWRO's), have responsibility for supervision of foster carers. The Registered Manager confirmed that this work is carried out under the supervision of a social worker who holds accountability.

The Brighton and Hove fostering panel was observed. This is a joint panel with Barnardo's who have the Brighton and Hove City Council's contract to provide a short-break fostering service for young people with a disability; a small number of these young people are fostered full-time. The panel is constituted with experienced professionals knowledgeable in fostering, childcare, LAC, health, education and disability together with an experienced foster carer, elected and independent members and two fostering service managers. The independent chair is very experienced in social care and is the chairperson for two other panels in London Boroughs. She confirmed that the quality of

prospective foster carers presented at panel was good and the supervising social workers' assessments were of a high standard. Panel minutes supported this. The panel has an advisor who scrutinises the assessments submitted by supervising social workers as part of quality audit. Comments were seen in staff files that supported his interventions and praised the quality of assessment. The panel at present has no black and minority ethnic representation, or someone who had been a LAC person; although recent recruitment has been successful and a new panel member who fulfils both these roles will sit on the panel from December 2006. The whole panel had training with a black and minority ethnic (BME) independent trainer from British Association for Adoption and Fostering (BAAF) in 2005. Analysis was given to panel members of the panel activities for the previous three months. Statistics presented from the chair in the annual report showed the main increase of work over the last year has been in Friends and Family carers. Fifty-six cases were presented to panel, 44% of panel's work. Many Family and friends carers proceed to apply for Residence Orders or Special Guardianship for permanence. The agency decision maker has endorsed all the panel's recommendations. The panel received 33 feedback forms from applicants or foster carers and 37 from social work staff, which were of a positive nature. The panel continues to be robust in its approach to the work required.

## 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 at least once during a 12 month period.**

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

7,13 and 31.

Quality of this outcome area is excellent. This judgement has been made using available evidence including a visit to this service.

The young people have their cultural needs recognised and valued by the fostering service positively supporting self-esteem and achievement.

### **EVIDENCE:**

The fostering service has actioned a commitment to widen the training to staff and foster carers to encourage their participation in enabling the young people of black and minority ethnic cultures to invest in their heritage and value their identity. A Recruitment and Publicity Officer (RPO) for BME took up the post in 2005 and as a consequence the service is developing wider community links for young people to attend. Recruiting BME foster carers remains a current objective and where trans racial placements are made the RPO has provided positive support to strengthen the placement. An informative and well-presented resource pack was launched by the service in April 2006. A copy was sent to all foster carers, all of who made positive comments, and the document is used at the assessment stage for new foster carers. Valuing diversity is a mandatory course and feedback from foster carers visited was positive and they found it "thought provoking". A more significant course is planned in conjunction with an external diversity trainer to provide greater underpinning knowledge to foster carers and staff. It is anticipated that all foster carers with trans-racial placements will attend.



During the inspection an external speaker from a BME community group attended the weekly staff meeting and spoke of local resources available to foster carers and their young people and strategies for engaging them.

The service works closely with educational professionals in order to meet the educational needs of the young people. Foster carers are able to attend training on the educational needs of the LAC. Foster carers visited were aware of their responsibilities to support the young people and attend educational meetings such as parent meeting and open days. Figures at March 2006 showed 149 young people in mainstream schools or colleges and 63 in special schools. 190 young people have a current Personal Educational Plan (PEP) and 86 have Statement of Educational Need (SEN). One foster carers visited spoke of attending the PEP meeting with the young person in placement and supported the parent to attend for the first time.

The provision of the short-break service is commissioned from Barnardo's and they provide a range of foster carers to meet the needs of young people, many with very complex needs, primarily on the basis of short-break care, though there are four young people with disabilities in full-time care. The service was inspected earlier in 2006 and received an excellent report from the Commission for Social Care Inspection.

## **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 at least once during a 12 month period.**

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

10 and 11.

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

Foster carers actively support positive contact with birth families, and the young people feel that they are listened to.

### **EVIDENCE:**

Foster carers visited were clear on their role in supporting contact for the young people in their care. Young people visited spoke of the significance of contact to them, and how their foster families help them manage this difficult, emotional process. Where there are risks involved in contact supervising social workers' confirmed that this information would be contained within the safe caring guidelines. Foster carers did speak of their involvement in the arrangements for contact and the progress made with birth parents to help them manage their emotions around their child becoming looked after. The challenge to foster carers to meet the court prescriptive arrangements for contact, daily in some cases, is well supported by the supervising social workers. Life story work is offered to young people who would find it helpful and this is often in conjunction with therapeutic input from CAMHS.

The young people are consulted by their placing social workers prior to foster carers reviews and on routine visits. The fostering service does not routinely expect supervising social workers to engage with the young people when they visit the home for supervision with the foster carers. When this does take place staff confirmed that such a conversation would take place with the foster carers present. Some complaints received by the service relating to poor care by foster carers might have been more quickly identified if the young person

were consulted alone. Some foster carer's files had annual reviews with no input from the young people as no placement was arranged at that time. Placing social workers are asked to consult with the young people during and after placements, but the Registered Manager confirmed that forms are often not returned to the service. Consultation was evidenced on other files and a young person's contribution was seen in the panel papers. The young people are involved in completing consultation booklets prior to their reviews, which they attend if they choose to. The Intensive Placement Team organises 1:1 and group support in the term time and holiday activities and always seeks feedback from such events. Young people have attended a recent conference on the Green Paper and Events hosted by Roger Morgan, who is the Children's Rights Commissioner (CSCI). The children's rights service has been reformed into the Youth Advocacy and Participation (YAP) and the service hopes that the newly launched young people's forum within this service will be a focal voice for young people in the Brighton and Hove fostering service.

# **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):**

As there are no core National Minimum Standards to assess and as no concerns were raised prior to, or during the inspection, no assessment took place.

## **EVIDENCE:**

# 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 17, 21, 24 and 32 the key standards to be inspected at least once during a 12 month period.**

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

17, 21, 24 and 32.

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

An experienced Registered Manager provides leadership to the fostering team who in turn work to provide a quality service for the young people fostered.

## **EVIDENCE:**

The service is well staffed and all foster carers contacted felt that their concerns were actioned swiftly. Joint training provides good models and support good practice. Recruitment is active, pro-active and targeted. The recruitment event attended by the Inspector was well facilitated and resourced. Competency assessment is well managed and includes the requirements of the National Minimum Standards. There are nine concurrency foster carers and on-going recruitment as babies are placed for permanency. Staff supervision files sampled contained reports that were frequently case dominant and did not record other discussions in relation to training or development or case load weighting.

The foster carers visited felt well supported; including out-of-hours, and able to contribute to the education and health of the young people placed. Arrangements for training and developments are good and seven foster carers have achieved National Vocational Qualifications (NVQ), and more are following this year in the NVQ for Health and Social Care in an arrangement with West Sussex. A chronology of training is not held in each file but is kept on a central spreadsheet. Foster carers have access to the training programme via the website and can apply for courses on line. Some unannounced visits were noted on file but there was a lapse of twenty months on one file sampled. Foster carers reviews were held in a timely fashion all first year reviews being taken back to panel. Foster carers who have young people from the intensive placement team (IPT) are given up to twenty-eight days respite each year.

Case files are appropriately managed. Foster carers spoke of memory boxes, photographs and memorabilia from holidays and outings being assembled so that the young person would have a memory of their time in foster care.

There is a designated team for families and friends supporting twenty-two foster carers under the supervision of a practice manager. Foster carers have training in the importance of contact and the impact on families. Consideration is made for a placement with family and friends when plans are being made to accommodate young people or issue proceedings, and considerable emphasis is placed on the importance of holding early Family Group Conferences. Assessment is thorough and the homes visited supported good outcomes for the young people placed. Support groups are available for family and friends foster carers and comments were positive about them. The service hopes to develop a support group for foster carers with younger children and the team offers advice sessions and a newsletter for all the family and friends carers.

# 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>	4

<b>STAYING SAFE</b>	
<i>Standard No</i>	<i>Score</i>
<b>3</b>	4
<b>6</b>	4
<b>8</b>	4
<b>9</b>	2
<b>15</b>	3
<b>30</b>	4

<b>ENJOYING AND ACHIEVING</b>	
<i>Standard No</i>	<i>Score</i>
<b>7</b>	4
<b>13</b>	4
<b>31</b>	4

<b>MAKING A POSITIVE CONTRIBUTION</b>	
<i>Standard No</i>	<i>Score</i>
<b>10</b>	4
<b>11</b>	3

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

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

Are there any outstanding requirements from the last inspection? NO.

### 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	FS9	43 (1)(2)	That all child protection enquiries are notified to the Commission for Social Care Inspection.	01/12/06
2	FS9	20(3)(d)	That all staff and foster carers have a Criminal Records Bureau check in place prior to their start date for their employed appointment in the fostering service.	01/12/06

### 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	FS9	That foster carers have prepared description and a photograph of young people placed that can be used should the young person go missing
2	FS9	That investigations of child protection, standards of care, and complaints are compiled separately for audit and thematic trends.
3	FS21	That all foster carers have an annual unannounced visit.



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