



*Making Social Care
Better for People*

inspection report

FOSTERING SERVICE

Liverpool City Council Fostering Service

**Millenium House
60 Victoria Street
Liverpool
Merseyside
L1 6JQ**

Lead Inspector

Julia Toller and Beate Roth

Announced Inspection

21st November to 30th November 2005

09:30

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

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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 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

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

Name of service Liverpool City Council Fostering Service

Address Millenium House
60 Victoria Street
Liverpool
Merseyside
L1 6JQ

Telephone number 0151 233 6806

Fax number

Email address

Provider Web address

Name of registered provider(s)/company (if applicable) Liverpool City Council

Name of registered manager (if applicable) Ms Christine Banim

Type of registration Local Auth Fostering Service

No. of places registered (if applicable) 0

Category(ies) of registration, with number of places

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 15th November 2004

Brief Description of the Service:

Liverpool City Council's fostering service provides a variety of fostering services for children and young people residing in the city of Liverpool. The service is based in council offices known as "Parklands", which are located in Speke, approximately eight miles from the city centre.

The fostering service consists of a principal officer, who oversees the operation of the service. Three team leaders, 7 senior social workers, 18 social workers, 10 support workers and a recruitment worker.

The fostering service provides a range of placements for children and young people, who are unable to live at home with their families. These placements are either made on a short-term or a long-term basis depending on the needs of the child. The objective of the service is to return a child home as soon as possible and when this is not possible, to secure the child in a permanent placement in order to improve their life chances. At the time of the inspection, there were around 400 foster carers providing a variety of temporary and permanent care for over 600 children and young people in their care. The service works closely with social workers from the children and family area teams, education, health, cultural services and other appropriate agencies.

When unable to provide a foster placement for a child or young person in Liverpool, the fostering service will obtain a fostering placement from the voluntary and private sector.

SUMMARY

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

2 inspectors carried out this inspection over 7 days. A sample of records and policies and procedures were seen. 5 foster carers homes were visited and the children and the foster carers spoken with. A questionnaire about the operation of the fostering service was sent to all children over 8 years old and to every foster carer. A group of children were invited to meet with the inspectors to give their views on the fostering service. The fostering service social workers, support workers, team leaders and the principal officer were spoken with. Children's social workers were interviewed as needed and representatives from the therapeutic services were spoken to.

What the service does well:

The fostering service is promoting the health and development of children placed with foster carers. Children were registered with a GP, had access to such dental, medical and psychological advice, treatment and services as they require. Foster carers are provided with the support they need to help promote and assist the health and development of the children they are caring for.

The people managing the fostering service and those working within it have received appropriate recruitment checks and are appropriately qualified for the position. There was evidence of suitable placements being provided where the children being looked after had been clearly matched to the foster carers family. The fostering panel is efficient and well organised and performs a quality assurance function in terms of the approval and continued approval of foster carers.

The fostering service is working actively to ensure that children are provided with foster care services that value diversity and promote equality. When foster carers provide care on a short-term basis, the procedures and arrangements for support to foster carers recognise the importance of parents remaining central to the promotion of their child's welfare and development. The fostering service provides support and resources to foster carers to promote the educational achievement of looked after children.

Contact between children in foster care and their family and friends is promoted by the fostering service. The fostering service is consulting with young people to find out their views. Foster carers are provided with sufficient training and have access to resources to enable them to prepare young people for adulthood.

There is clear written information outlining the aims and objectives of the fostering service. Since the last inspection staff within the fostering service have been re-organised to ensure that the objectives of the service are more efficiently and effectively promoted. Support is given to staff through supervision and regular staff meetings and good administrative support.

Prospective foster carers receive an appropriate assessment and preparatory training to ensure that they will be able to provide the care and support needed by children they are approved to care for. There are a sufficient number of staff available to meet the needs of the service with steps being taken to identify any shortfalls. There was evidence that the fostering service is working closely with foster carers and promoting the development of their skills.

What has improved since the last inspection?

The restructuring within the fostering service with responsibility for different aspects of the service being divided between team leaders and senior social workers better promote the needs of the service. The service is further benefited by the additional social work and support workers posts that have been created and by having a full staff team.

There has been an improvement in the written information provided to foster carers regarding a child's background and current needs ensuring that foster carers are able to provide children they are looking after with the care they need.

Further support services have been developed in response to the identified needs of foster carers.

Improvements have been made to the training provided to foster carers and to some of the policies and procedures in accordance with requirements and recommendations made at the last inspection.

There has been an improvement to the service provided to kinship carers approved prior to 2002. These carers are now supported and supervised by the fostering service, which will in time ensure that there is continuity in the service received by all foster carers.

What they could do better:

There are a number of areas in which improvements need to be made. Foster carers must have access to documentation signed by an appropriate person giving consent to the medical or dental examination or treatment of the child so as to enable the carer to provide appropriate care to the child.

Improvements need to be made to the process of applying for an exemption and making emergency placements in order to fully safeguard children. Matching information needs to be clearly recorded where children are placed on a temporary basis.

The processes for protecting children in foster care from abuse and neglect need to be more robust. Decision-making following an allegation of abuse needs to be clearly recorded. Detailed risk assessments need to be available following a decision for children to remain in placement after an allegation against a foster carer (or a member of their household) has been investigated and cannot be determined as true or false. Where there is evidence that foster carers are not suitable to care for children they must refer foster carers to the fostering panel for a review of their approval.

Steps need to be taken to ensure all young people, subject to their age and understanding have access to a Children's Guide. The foster carers handbook needs to be reviewed and made available to all foster carers as soon as practicable. The handbook is out of date and does not include the many recent support services that have been developed.

There are inconsistencies in the support received by foster carers. It is anticipated that now the service has sufficient members of staff foster carers will experience a more consistent approach in the support they receive. Improvements still need to be made to the support and supervision of kinship carers who were approved prior to 2002 and until this year supervised by the children's social work teams. Work needs to take place in improving the procedure for undertaking checks of suitability of family and friends when children are placed in an emergency. Delays in undertaking these checks are not acceptable. Further work must take place to ensure that all foster carers have a review every 12 months so as to ensure that they continue to be suitable to care for children.

The contract used with agencies that are providing foster carers to children looked after by Liverpool City Council needs to contain further information around ensuring that quality care is being provided.

Improvements need to be made to ensure that children have sufficient opportunities to make their views known to their social worker. Some children were reporting that were not seeing their social worker often enough.

Improvements should be made to the premises of the fostering service to make them more appropriate for their purpose.

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 or by contacting your local CSCI office.

DETAILS OF INSPECTOR FINDINGS

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Statutory Requirements Identified During the Inspection

Being Healthy

The intended outcomes these Standards are:

- 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 – The intended outcomes for these Standards are

12

Foster carers have access to the training and resources they need to promote the health and development of children and young people. Improvements are needed to the processes in place for ensuring all foster carers have access to appropriately signed documentation around the arrangements for giving consent to the child's medical or dental examination or treatment.

EVIDENCE:

There was evidence in records and discussion with young people and foster carers that the fostering service is promoting the health and development of children placed with foster carers. Children were registered with a GP, had access to such dental, medical and psychological advice, treatment and services as they require. There is evidence from the records that the health needs of children are taken into consideration when identifying a placement.

There was in general sufficient information provided to foster carers around the health and developmental needs of children. Liverpool City Council's fostering service has a clear policy and guidance regarding medical consent; a copy of this is included in the Foster Carer's Handbook. In general the sample of children's records contained a signed medical consent document. 2 foster carers did not have this information. This was brought to the attention of the principal officer to be addressed.

The Foster Carer Agreement makes it clear to the carer that their role includes helping to promote the health of the children in their care.

The fostering service ensures that foster carers have information about health services in the area. The Looked After Children's Nurse makes this information available as well as monitoring the health needs of children and providing advice and support on health matters. This has included training events on bed-wetting, blood-borne diseases, diabetes, asthma, sickle cell, head lice, epilepsy, and healthy eating.

First aid training is available to foster carers. This training is part of the essential training for all carers to complete following their approval.

There is guidance provided to foster carers on the administration of medication, which is also contained in the Foster Carers' Handbook. A medication management procedure has been completed and addresses recommendations made at the last inspection. Training around the revised medication procedure is in the process of being developed with plans to deliver this to all carers over the next 5 years. It is recommended that this training be provided to foster carers in a shorter timescale in order to ensure that carers have the knowledge to support children and young people safely and effectively in this area.

Advice and information is available to children through the "CNET" and materials produced by the service such as Health FAX. This is a good example of providing advice on a variety of health issues, in a creative and age appropriate manner. There was evidence from young people spoken to and from questionnaires that foster carers promoted healthy living and gave advice and support on health issues. The fostering service provides access to leisure activities for children who are over 6. It is understood that these benefits are available to the foster carers' own children.

Support services are accessible to foster carers to help maintain placements. There is a therapeutic team, which works with children with behavioural difficulties in order to provide stability to their placements and prevent placement breakdown. The focus of this work is direct work with children using ideas based on therapeutic approaches. The work undertaken by this team was viewed positively by foster carers.

The Child and Adolescent Mental Health Service for Looked After Children has the aim of providing support and improving the short and long term mental health outcomes of looked after children by providing access to mental health expertise for children, carers and staff. Foster carers are able to contact the service directly for advice and support. In addition the service provides information on a range of subjects including child development, attachment, managing challenging behaviour and life story work. Foster carers who had received this service spoke very positively about the quality of the service.

Since the last inspection further support workers have been employed to work alongside the social workers from the fostering service to assist with the more practical tasks. A number of foster carers praised the introduction of this service.

Staying Safe

The intended outcomes 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, and 15 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

3, 6, 8, 9, 15 and 30

The people managing the fostering service and those working within it have received appropriate recruitment checks and are appropriately qualified for the position. In general, suitable foster carers are provided. Improvements need to be made to the process of applying for an exemption and making emergency placements in order to fully safeguard children.

The processes for protecting children in foster care from abuse and neglect need to be more robust.

The fostering panel makes sound decisions in respect of whether foster carers are suitable to care for children.

EVIDENCE:

A sample of the managers' personnel files contained records to indicate that they are suitable for the position for which they are employed. There was evidence that the appropriate checks had been made prior to employment. The fostering service has a clear written recruitment and selection procedure for appointing staff that follows good practice in safeguarding children. A sample of fostering service social workers files were seen and contained evidence that the recruitment procedures had been followed. Social work staff have an appropriate qualification to work within the fostering service. The social workers involved in the assessment and approval of foster carers were qualified, have experience of foster care and have been trained in assessment.

During the course of the inspection 5 foster carers homes were visited. There was sufficient space to accommodate the number of children for whom the carers are approved. The homes visited were free from hazards and in general clean and well presented. Any issues identified were raised with the appropriate team leaders. The files inspected contained evidence that the foster carers' homes had been inspected within the last 12 months to ensure that it meets the needs of foster children. There was evidence to show that where the foster carers provide transport for the child, the service ensures this is safe and appropriate to the needs of the child. The files inspected contained safe caring policies for specific children being looked after.

The preparation training for foster carers, covers health and safety issues. All newly approved carers are expected to attend three core-training sessions, one of which includes Safe Caring and Child Protection. The records indicate that safe caring courses are planned and the names of foster carers to attend have been identified.

In general children had their own bedrooms. A risk assessment was not available where two children were sharing a bedroom. There was evidence in the records to indicate that this arrangement was not appropriate.

Emergency placements are provided. At present not all foster carers who provide emergency placements have been approved to do so. The fostering service provider must give a foster carer notice, in writing of the terms of their approval, including placements of any particular kind or in any particular circumstances. There are plans in place to approve all foster carers who are suitable to look after children in an emergency.

A sample of foster carers files, where an exemption had been made to enable foster carers to look after children outside of their approval status, were seen. In 2 instances the exemption procedure had not been followed. There was no evidence that the fostering service delegated person had approved a placement, where a child had been placed for 10 days. Another foster carers record showed that a child was placed for 2 weeks before the placement was approved.

Matching information was available for the children in long term placements whose records were inspected. With regards to placements made on a temporary basis, there were variations in the amount of matching information recorded. In respect of one child who had been placed in an emergency there was insufficient written information to indicate how the child was matched to the foster carers. It continues to be recommended when emergency placements are extended beyond twenty – four hours, detailed written evidence of the discussions and matching considerations that take place in the decision making process are made and placed on the foster carers' file.

A discussion with fostering service team leaders and social workers indicated that information to determine a match between a child and placement is elicited but not consistently recorded. This was identified at the last inspection and in order to address this a new referral form was introduced. This document needs to be consistently completed.

The looked after children documentation was available on the children's files seen and in general contained all the relevant documentation. There were still some difficulties in receiving this information reported by a small number of carers through the questionnaires. A number of strategies have been deployed to address this issue. The bringing together of the fostering service and children and families social work service under the same management structure will no doubt continue to serve to ensure this matter continues to receive attention.

A variety of training is available to support carers in their protection of children. This includes: -

- Promoting a positive sense of self and identity.
- Providing a framework for the management of behaviour.
- Internet safety training.
- Dealing with sexuality.
- Working with children who have been sexually abused.
- Safe caring/child protection.
- Recording with care.
- Promoting health and social well - being.
- Drug misuse.
- Helping to protect children and young people from abuse.

Liverpool City Council fostering service makes clear to foster carers that corporal punishment is not acceptable. This is clearly written in the foster care agreement.

Liverpool City Council has a written procedure and guidance for dealing with allegations of abuse made against foster carers. This is in accordance with the appropriate provisions of Regulation 12 of the Fostering Services Regulations 2002. In addition there is written guidance about the role of the Skilled Help Support Team. This team comprises of 12 foster carers who have received training to enable them to offer support to Liverpool foster carers if an allegation is made against them.

The service keeps a record of allegations against foster carers. A sample of these were seen. It was not clear why the decision had been made not to undertake a child protection investigation for one allegation looked at. This information needs to be clearly recorded. There were 2 instances of a lack of detailed risk assessment following a decision for children to remain in placement, after an allegation against a foster carer (or a member of their household) had been investigated, with an unclear outcome as to whether the allegation was true or false.

Records provided evidence that the fostering service has delayed in referring a foster carer to the fostering panel where there are clear, documented concerns about their ability to provide suitable care.

It is recommended that information about any previous allegations or concerns about foster carers be made more readily accessible so as to inform decision-making. A chronology of concerns would be a means of addressing this issue.

The service has a clear procedure when a child is missing from the home. There was evidence on records that incidents of this are being reported by foster carers to the fostering service. The fostering service has an anti-bullying policy, which is outlined in the Foster Carers' Handbook. This policy recognises the vulnerability of looked after children to bullying and outlines advice for foster carers about how to recognise, record, report and address instances of bullying.

During the last inspection a fostering panel was observed. The panel was well organised and conducted itself in an appropriate and professional manner. There was evidence of all panel members' views being taken into account. At this inspection the minutes from the last three panels held were seen. The panel minutes indicated that there is clear decision making which is fully recorded. The minutes also indicated that the panel is performing a quality assurance function in terms of decision-making around the approval and continued approval of foster carers and recommendations around future social work practice.

Enjoying and Achieving

The intended outcomes 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 – The intended outcomes for these Standards are

7, 13 and 31

The fostering service is working actively to ensure that children are provided with foster care services that value diversity and promote equality. When foster carers provide care on a short-term basis, the procedures and arrangements for support to foster carers recognise the importance of parents remaining central to the promotion of their child's welfare and development. The fostering service provides support and resources to foster carers to promote the educational achievement of looked after children.

EVIDENCE:

Liverpool City Council has an equal opportunities and anti-discriminatory practice policy. The foster carer preparatory training and assessment take account of the prospective foster carers abilities to support and promote a child's religious, cultural, linguistic and ethnic background. Follow on training provided to carers also looks at how foster carers are to meet these needs.

The fostering service has identified that shortfalls exist in the number of black and mixed race carers available. The recruitment plan indicates that an objective is to increase the number of black and mixed race carers available. Records made available by the recruitment worker indicated that a number of strategies are in place to enable this. The service offers a package of financial support to foster carers to meet ethnic, racial, cultural and religious needs. The fostering service has access to a corporate translating unit and the Merseyside Centre for the Deaf should sign language interpreters be required. Support services are being developed around meeting the needs of asylum

seeking young people. Since the last inspection, a support group for foster carers looking after asylum seeking young people has been set up. The fostering service has also developed multi-agency links to support these young people.

A clinical psychologist and play therapist are also available to the fostering service on a part – time basis to work with children on cultural identity issues. Training around meeting a child's emotional needs is provided to prospective foster carers. More in-depth training is provided following approval.

Discussions with foster carers, children and staff showed that the fostering service gives a high priority to helping foster carers meet children's educational needs. There was evidence from the children's review minutes that foster carers were encouraging and supporting children's education and working closely with their schools and educational professionals.

The foster carers visited had a clear understanding of the importance of education and learning. The foster carers had a clear expectation of school attendance, children had the necessary school uniform and equipment, they had access to books and educational materials and the children said they received support and encouragement in completing their homework. The CNET website provided by the fostering service also gives information about educational issues.

The foster placement agreement and the foster carers "payment guide" identifies where responsibility lies for school costs, including school trips, uniform and equipment. Some children and foster carers spoken with and some who returned questionnaires reported delays in obtaining consent for school trips and activities. At the last inspection it was recommended that the fostering service should review its procedure for obtaining this consent to make sure looked after children don't miss out on school trips due to a delay in consent being given by the delegated person. At this inspection a new procedure is in the process of being formalised.

Liverpool City Council has established the Virtual School to provide education services and support to looked after children, their carers and schools. The main aims of the Virtual School are to raise educational attainment, ensure pupils have access to the same opportunities for education, training and employment as all young people and to facilitate access to youth, sports, leisure and library facilities. The Virtual School supports children with improving literacy and numeracy skills, encourages participation in education and community resources, provides extra support with GCSE's and other courses, supports in accessing training and courses and works with children at risk of exclusion to secure educational provision.

The Virtual School collates data about educational attainments, attendance and exclusions for all looked after children. A sample of this collated information for children in foster care was seen during the inspection.

The fostering service provides short-term breaks for children. This service is predominantly for children with learning and physical disabilities. A discussion with the team manager and fostering social worker that has responsibility for these carers indicated that this service is provided to reflect the differing needs of children receiving this service. The emphasis is very much on birth parents remaining central to the promotion of their child's welfare and development. To promote this, these children are subject to children in need reviews twice per year rather than "looked after children" reviews which tend to be focused on children whose birth parents are not still the main carers. Guidance for carers is drawn up with parents/those with parental responsibility.

There is a clear recruitment plan in place for short-term break carers. Recruitment tends to be amongst individuals who already have a link with the child to be cared for, such as a relative, classroom assistant or nurses. Recruitment campaigns are targeted with this in mind. Short-term break foster carers provide day care in addition to an overnight service.

All short - term break carers are subject to the same assessment as full time carers, provided with the same introductory training and are offered the same follow-on training. Training around meeting the needs of children with physical or a learning disability is available. Training around skilled health tasks is provided to both the carer and parents together. In addition, written information on particular disabilities is provided for carers to assist them in their care of children.

Making a Positive Contribution

The intended outcomes 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 – The intended outcomes for these Standards are

10 and 11

Contact between children in foster care and their family and friends is promoted by the fostering service. The fostering service is consulting with young people to find out their views however improvements need to be made to ensure that children have sufficient opportunities to make their views known to their social worker.

EVIDENCE:

The sample of children visited were found to be having contact with significant others, in accordance with their wishes and needs. Records indicated that children's views with regards to contact had been ascertained and provided adequate information regarding contact arrangements.

Records and interviews with a sample of foster carers, provided evidence that a variety of support is provided to foster carers in dealing with difficult contact situations that may arise. In the sample of foster carers visited, the carers were aware of the need to promote contact and the possible impact of this on children's lives.

It was recommended at the last inspection that training for foster carers around contact be expanded upon in order to enable foster carers to develop the variety of skills required in the promotion of contact. At this inspection this training has been developed and is being provided, as part of the essential training all foster carers must undertake following approval.

Young people seeking asylum are where possible provided with an independent visitor to support them.

Financial support is provided to carers in order to ensure contact takes place.

There was evidence that the fostering service is making efforts to make sure that children's opinions are sought frequently over matters affecting their daily lives. Discussions with foster carers indicated that foster carers recognised the importance of listening and responding to children's views. Foster carers receive written information about consultation and children's rights and these issues are covered in the preparation training.

Children spoken to as part of the inspection and who returned questionnaires said that they are asked their opinions about matters affecting their day-to-day lives by foster carers and social workers. Records showed that children are seen alone by social workers. There was evidence that this information is also sought as part of children's statutory childcare reviews. 7 out of 28 children who returned questionnaires said they saw their social worker often, 14 said that they sometimes saw their social worker. 7 said they never saw their social worker. The records of these children were not seen, however, this suggests that improvements still need to be made around ensuring social workers are regularly visiting children to ascertain their views.

Recent consultation has taken place with children in foster care and foster carers around the Every Child Matters Agenda. Discussion groups have also taken place around improving services for children in foster and residential care.

Children who don't speak English as a first language have access to an interpreting service to assist them in making their wishes and feelings known about their care. The service also uses expertise in other communication formats such as British Sign Language and non-verbal communication techniques such as Picture Exchange Communication system to aid communication and find out children's views.

Some of the children interviewed and who returned questionnaires as part of the inspection were aware of the complaints procedure. A number of children who returned questionnaires did not know how to contact CSCI. It was identified that not all children looked after have a copy of the Children's Guide, which contains this information.

Liverpool City Council has links with an advocacy service for young people who are looked after. There were examples of this service supporting young people in care to voice their opinions.

Achieving Economic Wellbeing

The intended outcomes 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)

The Commission considers Standards 29 the key standard to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

14 and 29

Foster carers are provided with sufficient training and have access to resources to enable them to prepare young people for adulthood. Foster carers receive an allowance and expenses as detailed in the “payment guide”.

EVIDENCE:

There was evidence to show that the fostering service is helping young people to develop the skills necessary for adult living. The sample of foster carers visited, understood the need to provide children with age and developmentally appropriate opportunities for learning independence skills. Training is provided to foster carers around the importance of preparing young people for leaving care, the Leaving Care Act and Pathway Plans. These issues would also be discussed as part of the supervisory process.

The Leaving Care team provide advice and support on a range of issues, such as health, education, training, employment, living skills, and accommodation. The Leaving Care Team is continuing to develop links with the fostering service, for example a resource manager from the team attends the Foster Carers Development Group.

The Foster Carers’ Handbook provides information about the Leaving Care Team and their role, and there is now written information around what is expected of foster carers, in terms of preparing young people for semi-independent and independent living.

The fostering service has a clear “payment guide” on foster carer’s allowances and expenses, which are reviewed on an annual basis. At the last inspection

the payment system was looked at and found to be efficient. During the course of this inspection some foster carers raised the issue of not receiving backdated payments following an increase in the fostering allowance. Following discussion with the team leaders it is considered that this issue is being appropriately managed.

Management

The intended outcomes 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, and 24 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

1, 16, 17, 21, 22, 24, 26 and 32

There is clear written information outlining the aims and objectives of the fostering service, not all young people have access to this information. There are systems in place to ensure staff are organised in a way that provides an effective service, however, children are not being safeguarded by reviews not taking place on a 12 monthly basis and by the contracts currently used with agency fostering services.

Prospective foster carers receive an appropriate assessment and preparatory training to ensure that they will be able to provide the care and support needed by children they are approved to care for. There are support systems available for foster carers. There are however, inconsistencies in the support received by foster carers. In general, there was evidence of well-maintained case records. In general foster carers are adequately supervised, however further work needs to take place to improve the supervision and support of kinship carers.

Improvements need to be made to the premises of the fostering service to make them more appropriate for their purpose.

EVIDENCE:

The statement of purpose for the fostering service is detailed and comprehensive containing the required information. The children's guide is well designed and informative. The guide provides a summary of the statement of purpose, information about the services available for children and foster carers, contains information on how a child can access an independent advocate and about how to complain. The guide has been produced in different formats to meet the needs of different groups of children, for example it is available in Braille, audiotapes, and different minority languages to reflect the diversity of Liverpool's population. The guide contains information about how to contact the Commission for Social Care Inspection. 14 of the 28 children who returned questionnaires and some children spoken with said that they did not have a children's guide. This was brought to the attention of the principal officer to be addressed.

Since the last inspection there has been a restructuring within the fostering service. There are now 3 team leaders and 7 senior social workers with responsibility for different aspects of the service. These changes better promote the needs of the service.

Staff are managed and monitored by people who have appropriate skills and qualifications. Interviews with a number of staff from the fostering service confirmed that there is a clear management structure with clear lines of accountability. Team meetings occur on a two weekly basis. The fostering service social workers that were interviewed considered that during these meetings their views are sought regarding the operation and development of the service. The staff interviewed reported that they receive supervision on a monthly basis and that minutes of supervision are made available. Records indicated advanced planning in relation to supervision. Clinical supervision is made available to workers providing therapeutic services. Workload management issues are discussed within supervision. No difficulties were reported with regards to this.

From examination of records and discussions with the team leaders it is evident that a number of reviews have not been taking place at intervals of not more than a year. This issue appears to be mainly linked to kinship carers who until 2005 were approved and supported by field social workers. Action is being taken to address this, however it is of concern that a report dated October 2005 by the senior social worker and team leader now responsible for kinship services indicates that some reviews may not have taken place for "a number of years" and that the approval status of some of these carers is unclear.

At the last inspection a requirement was made indicating that the manager of the service shall ensure that where an agency is used to provide a foster carer, they shall clearly specify in the contract, the quality of care to be provided and the arrangements in place to monitor compliance, with a view to improving the quality of foster care provided by the fostering agency. At this inspection some work has taken place to address this, however, further ways of ensuring quality care is being provided need to be considered. For example, this needs to include a statement that the agency agrees to notify Liverpool City Council about significant events and the outcome of the foster carers review.

There is an appropriate level of administrative support. A system is in place to deal with enquiries from prospective carers.

Liverpool City Council's fostering service has a recruitment strategy and a dedicated staff member whose task it is to recruit foster carers. In March 2003, Liverpool City Council introduced a new system for recruiting and assessing prospective foster carers. This system was initiated to combat the delay that was being experienced in the approval of carers. This new system has significantly reduced delays in the assessment of foster carers. The system is based on the competency-based assessment produced by BAAF, which identifies the skills required by foster carers to carry out the fostering tasks. Liverpool fostering service have identified and selected key competencies from this BAAF assessment and incorporated this in their assessment of foster carers. An examination of a sample of assessment reports of foster carers recently approved and being presented to panel for approval and records of what the preparatory training and assessments include indicated that the assessment process covers the issues outlined in the National Minimum Standards and accompanying regulations.

Liverpool City Council has introduced a new employment policy to encourage the retention of staff. This involves a revised pay structure. There are systems in place within the service to encourage staff retention by division of responsibilities in accordance with interests. Since the last inspection further staff have been employed and further posts created to ensure that the service can operate effectively. Liverpool City Council is currently advertising for permanent staff to replace the 4 agency workers covering posts at present.

The fostering service has a clear strategy for supporting carers, that includes training, provision of information, support from an allocated fostering service social worker, supervisory visits, self-help groups and support services. A Foster Carer Handbook is available which describes some of the support available. The Handbook needs to be updated to include the new support systems that have been developed and any changes to existing ones. This should include information around the virtual school, the role of the Integrated Children's Service Team who are a means of communication with the fostering service and the new structure of the family placement team. It is acknowledged that the Handbook is currently being reviewed, the revised addition should be made available for foster carers without delay given the importance of carers having this information as a reference point.

From discussions with foster carers and fostering service social workers it is clear that they are aware of the role of the supervising social worker. There were mixed views from foster carers spoken to and those who returned questionnaires around the support received from the fostering service. Some foster carers praised the support they received whereas others said there were difficulties getting in contact with fostering service social workers and that visits were not often enough. There have been a number of staff changes within the fostering service with periods of staff absence resulting in inconsistency in support provided. However, at the time of the inspection there were sufficient staff available with a named worker allocated to support each foster carer.

The sample of files inspected all contained foster care agreements that covered the information detailed in Regulation 5 of The Fostering Services Regulations 2002. The "looked after children" document regarding the placement plan provides the basis for the placement agreement. An examination of a sample of foster carers' files evidenced that in general this document provided the information detailed in Schedule 6 of The Fostering Regulations 2002. As already indicated, 2 carers did not have signed medical consent documentation.

Records indicated that foster carers are in general receiving regular supervisory visits. Work is taking place to ensure that kinship carers approved before 2002 receive this service at the prescribed frequencies.

There was evidence that the fostering service is working closely with foster carers and promoting the development of their skills. This was demonstrated in the number of carers involved in support groups and in the use of experienced foster carers in the preparatory training for prospective foster carers.

Since the last inspection more information is held on computer. There is a clear structure for recording this information and all computer files accessed followed a similar format. Staff interviewed reported that they have had sufficient training to access and enter information held. There is a comprehensive policy and procedure for the formatting and recording of case files. A sample of paper files were examined, which clearly evidenced that files were clearly organised and structured in the manner prescribed by the recording policy. As already indicated, documentation in relation to allegations against foster carers requires attention.

Foster carers visited had been given information around why a child needed to live in foster care and to enable them to assist children to come to terms with past events. Visits to a sample of carers indicated that carers understand the importance of keeping personal possessions, memento's and photographs of a child's life and ensuring that these move on with the child. Foster carers also appreciated the need to keep information about children held securely.

The premises have efficient administrative systems, including IT and communication systems. Some carers raised the issue of not being able to phone the office directly as the majority of calls go through the Integrated Children's Service which is not located within the fostering service. Staff reported that the carers they supervise have their mobile telephone numbers and can contact them via e-mail also. Staff can access e-mails at any time through use of a hand held computers. At the last inspection it was reported that phone lines were going to be installed in the office for those carers who are reporting delays in fostering service staff returning calls made via the Integrated Children's Service. This has not been done. It is recommended that phone lines be installed to address this issue of difficulty in communicating with fostering service staff that has arisen at previous inspections. There are facilities and systems in place for the safe keeping of written and computer held records. There needs to be additional security measures in place to prevent unauthorised access to the building where the fostering service is based.

The fostering service has around 150 hundred foster carers who are family or friends (kinship carers) of the children they are looking after. Since November 2002, the fostering service has assessed and supported new kinship carers. Until this year the vast majority of kinship carers who were approved prior to 2002 by the children's social workers were supervised and supported by the child's social worker. Previous inspections by CSCI has highlighted inconsistencies in service provision due to this division of responsibility.

At this inspection the responsibility for all kinship foster carers lies with the fostering service and additional resources have been obtained to facilitate this. There is a team of fostering social workers and support workers with the specific responsibility of supporting kinship carers. Each kinship carer now has an allocated supervising social worker and contact has been made to explain the role of the fostering service. A support group has been established for kinship carers. Training specific to the needs of kinship carers has also been identified. Work now needs to take place to ensure that kinship carers approved before 2002 receive a review of their suitability to foster given that a number have not had an annual review in over 12 months.

At the last inspection a requirement was made that the Professional Instruction Notice on Guidelines for the Approval of Regulation 38 Foster Carers be developed further to include information on initial checks to ensure suitability, such as POCA/POVA checks and checks of Liverpool County Council's records. This procedure has been amended however the specific checks to be undertaken need to be clearly indicated. The timescale for undertaking these checks and applying for a CRB check also needs to be clearly stated. Records relating to 3 kinship carers, where children had been placed in an emergency, highlighted a delay in applying for a CRB check.

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

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

STAYING SAFE	
<i>Standard No</i>	<i>Score</i>
3	3
6	1
8	2
9	1
15	3
30	3

ENJOYING AND ACHIEVING	
<i>Standard No</i>	<i>Score</i>
7	3
13	2
31	3

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

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

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

Yes

Are there any outstanding requirements from the last inspection?

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	FS12	17(3)(B)	The foster service provider must ensure that in relation to any child placed or to be placed, a foster parent is given such information as to enable the carer to provide appropriate care for the child. This must include the arrangements for giving consent to the child's medical or dental examination or treatment.	30/11/05
2	FS6	11(a)	The foster service provider must ensure that where a child has been abused or has abused another child, children do not share a bedroom unless there is a clear, documented assessment indicating that this is a suitable arrangement that safeguards the needs of both children.	30/11/05
3	FS6	11(a)	The foster service provider must ensure that where a child is placed with foster carers on a temporary basis, outside of the foster carers approval status, the decision making in relation to this is clearly documented in order to safeguard the well being of the child(ren) to be placed and the child(ren) already in	30/11/05

			placement.	
4	FS6	28(5)(a)	The foster service provider must give a foster carer notice, in writing of the terms of their approval, for example, whether it is in respect of a particular named child or children or number and age range of children or of placements of any particular kind or in any particular circumstances.	30/11/05
5	FS8FS9	11(a) 29(2)	The foster service provider must not delay in referring foster carers to the fostering panel where there is evidence that foster carers are not suitable to care for children.	30/11/05
6	FS9FS22	12	The fostering service must ensure that they keep a written record of the actions taken in response to an allegation of abuse and neglect including documenting the reasons why particular actions were taken, for example, what were the reasons for deciding that a child protection investigation should or should not be instigated (previous timescale not met).	30/11/05
7	FS9FS22	12	The fostering service provider must ensure that clearly documented risk assessments are available when a child is to remain in placement following an allegation of abuse being made against a household member, with their being no clear outcome as to whether this allegation is true or false.	30/11/05
8	FS1	3(4)	The fostering service provider must provide a copy of the children's guide to each child placed by it (subject to their age and understanding).	28/02/06
9	FS16	29	The fostering service provider must review the approval of each foster parent in accordance	30/11/05

			with Regulation 29 of The Fostering Services Regulations 2002. A review shall take place not more than a year after approval, and thereafter whenever the fostering service provider considers it necessary but at intervals of no more than a year (previous timescale not met).	
10	FS16	42(1)(B)	The fostering service provider must ensure that where an agency is used to provide a foster carer, they shall clearly specify in the contract, the quality of care to be provided and the arrangements in place to monitor compliance, with a view to improving the quality of foster care provided by the fostering agency (previous timescale not met).	28/02/06
11	FS32	38	The fostering service provider must ensure that the Professional Instruction Notice on Guidelines for the Approval of Regulation 38 Foster Carers includes further information on the precise initial checks to be undertaken to ensure suitability of the placement. The timescale for undertaking these checks and for applying for the CRB check must be clearly stated.	30/12/05

RECOMMENDATIONS

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

No.	Refer to Standard	Good Practice Recommendations
1	FS6	It is recommended that when emergency placements are extended beyond twenty – four hours, detailed written

		evidence of the discussions and matching considerations that take place in the decision making process are made and placed on the foster carers' file.
2	FS12	Training around the medication management procedure should be provided to all foster carers within the next 12 months.
3	FS13	The fostering service should review it's procedure for obtaining consent for school trips and activities to make sure looked after children don't miss out on school trips due to a delay in consent being given by the delegated person.
4	FS21	The foster carers Handbook should be made available within the next 6 months.
5	FS22	It is recommended that information about any previous allegations or concerns about foster carers be made more readily accessible so as to inform decision-making.
6	FS26	Phone lines should be installed in the office of the fostering service to assist communication with foster carers.
7	FS26	Improvements should be made to the security of the building to prevent access to unauthorised individuals.

Commission for Social Care Inspection

Liverpool Satellite Office
3rd Floor Campbell Square
10 Duke Street
Liverpool
L1 5AS

National Enquiry Line: 0845 015 0120

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

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