



Making Social Care  
Better for People

# inspection report

Fostering Services

## **Southwark Social Services**

47b East Dulwich Road

London

SE22 9BZ

8-12th and 29th March 2004

## **Commission for Social Care Inspection**

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

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

### **The role of CSCI is to:**

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

## **Inspection Methods & Findings**

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

### **The 4-point scale ranges from:**

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

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

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

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

**FOSTERING SERVICE INFORMATION**

**Local Authority Fostering Service?**

YES

**Name of Authority**

Southwark Social Services

**Address**

47b East Dulwich Road, London, SE22 9BZ

**Local Authority Manager**

Susan Sinclair

**Tel No:**

020 7525 4429

**Address**

47b East Dulwich Road, London, SE22 9BZ

**Fax No:**

**Email Address**

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**Registered Fostering Agency (IFA)**

NO

**Name of Agency**

**Tel No**

**Address**

**Fax No**

**Email Address**

**Registered Number of IFA**

**Name of Registered Provider**

**Name of Registered Manager (if applicable)**

**Date of first registration**

**Date of latest registration certificate**

**Registration Conditions Apply ?**

NO

**Date of last inspection**

28.04.03

<b>Date of Inspection Visit</b>		8th March 2004	<b>ID Code</b>
<b>Time of Inspection Visit</b>		10:00 am	
<b>Name of Inspector</b>	<b>1</b>	Sue Nott	105781
<b>Name of Inspector</b>	<b>2</b>	Nefertiti Logan	14669
<b>Name of Inspector</b>	<b>3</b>		
<b>Name of Inspector</b>	<b>4</b>		
<b>Name of Lay Assessor (if applicable)</b> Lay assessors are members of the public independent of the NCSC. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
<b>Name of Specialist (e.g. Interpreter/Signer) (if applicable)</b>			
<b>Name of Establishment Representative at the time of inspection</b>			

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## INTRODUCTION TO REPORT AND INSPECTION

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

This document summarises the inspection findings of the NCSC in respect of Southwark Social Services. The inspection findings relate to the National Minimum Standards for Fostering Services published by the Secretary of State under sections 23 and 49 of the Care Standards Act 2000, for independent and local authority fostering services respectively.

The Fostering Services Regulations 2002 are secondary legislation, with which a service provider must comply. Service providers are expected to comply fully with the National Minimum Standards. The National Minimum standards will form the basis for judgements by the NCSC in relation to independent fostering agencies regarding registration, the imposition and variation of registration conditions and any enforcement action, and in relation to local authority fostering services regarding notices to the local authority and reports to the Secretary of State under section 47 of the Care Standards Act 2000. The report follows the format of the National Minimum Standards and the numbering shown in the report corresponds to that of the standards.

The report will show the following:

- Inspection methods used
- Key findings and evidence
- Overall ratings in relation to the standards
- Compliance with the Regulations
- Notifications to the Local Authority and Reports to the Secretary of State
- Required actions on the part of the provider
- Recommended good practice
- Summary of the findings
- Report of the Lay Assessor (where relevant)
- Providers response and proposed action plan to address findings

This report is a public document.

## INSPECTION VISITS

Inspections will be undertaken in line with the agreed regulatory framework with additional visits as required. This is in accordance with the provisions of the Care Standards Act 2000. The following inspection methods have been used in the production of this report. The report represents the inspector's findings from the evidence found at the specified inspection dates.

### BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

A local authority fostering service covering an inner city area with high levels of deprivation and need and a high demand on placements. The team was part of the family placement service for the borough, which included adoption, fostering and respite care services for children with disabilities.

The fostering team consisted of a service manager, team manager, two practice supervisors (one for recruitment and one for support) and 12 social workers. The team manager deputised for the service manager. A brokerage team negotiated placements with Independent Fostering Agencies, when suitable fostering placements were not available from in house resources. More than half the children in foster placements were placed out of borough, but mainly in neighbouring authorities. At the time of inspection there were approximately 255 approved carers, or 177 households, of whom 20 were permanent carers, providing placements to 338 children.

The adoption and permanency team worked with long term carers and placements. Family members and friends, who were approved as carers, were dealt with by the district teams.

## PART A SUMMARY OF INSPECTION FINDINGS

### **Inspector's Summary**

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

This inspection took place ten months after the previous inspection and although a number of the requirements had been met, some were still in the process of being implemented. However, inspectors were reassured by the commitment of management, particularly the new service manager and staff to develop those areas of practice where improvement was needed and to consolidate areas where they were doing well.

Overall the findings of the inspection, including direct feedback from carers, children and staff, indicated that there were areas of very good practice. The inspectors continued to be particularly impressed at the work being done to provide ongoing support and training to carers. Many of the previous concerns had related to the high level of pressure on the fostering team to provide placements and a lack of clear systems for communication, accountability and responsibility at a senior management level. Encouraging work had commenced on improving these systems. There was also positive progress in the operation of the fostering panel to ensure that all placements were fully assessed and that appropriate quality assurance systems were in place.

#### **Statement of Purpose (Standard 1)**

This standard was partially met. The agency had revised the Statement of Purpose and the children's guide was in the process of being developed to meet the specific needs of the children and young people receiving a service from Southwark fostering service.

#### **Fitness to Provide or manage a fostering service (Standards 2-3)**

One standard was met. One was partially met. The managers were appropriately qualified and had relevant professional childcare experience to manage the fostering service. They demonstrated the ability to provide good and supportive leadership and to respond to the challenges of their roles.

#### **Management of the fostering service (Standards 4-5)**

One standard was met. One standard were partially met. The fostering service was, on the whole, managed effectively, and systems had been introduced to improve communication between the fostering service and the Looked After Children teams. Although the Children Looked After teams had been almost fully staffed since the last inspection, the turnover, and some internal movement of staff that had taken place was perceived, by carers, as unhelpful to the continuity of the service provided. There had also been considerable changes of staff in the brokerage team, although this team was not managed by the fostering service.

#### **Securing and promoting welfare (Standards 6-14)**

Nine standards were assessed: four were met; five were partially met. The fostering service was thorough in its' assessments and aimed to ensure carers provided safe, healthy and caring environments for the foster children and young people. The agency was developing its' policy around recruitment and was planning to widen its carer base by targeting particular local communities to ensure families would be recruited that would best meet the needs of the range of children being referred to them. The agency put emphasis on valuing diversity and maintaining contact for the children with birth families, as well as encouraging links with



cultural, religious and community groups. Good efforts were made to listen to children and young people and enable them to have a say in the service provided. Staff recognised the importance of the matching process for the foster child and carer. However, this process was impaired by the difficulties in obtaining all the necessary relevant information and documentation about a child or young person from the child's social worker. Communication systems were improving,

#### **Recruiting, checking, managing, supporting and training staff and foster carers (Standards 15-23)**

Nine standards were assessed; three were met; six were partially met. There were appropriate recruitment and selection procedures in place to ensure the employment of appropriately qualified and experienced staff. However, the process of updating CRB checks on existing staff had been slow. Staff were generally positive of the support provided by managers. Supervising social worker support to carers was extremely good and training and support groups were very well established. There had been an improvement in the stability of staffing levels within Children's Services. Administrative support was insufficient to meet the needs of a growing fostering service.

#### **Records (Standards 24-25)**

Two standards were assessed; both were partially met. Records were of a reasonable standard and contained the majority of information required, but LAC forms were often not signed or dated. Also, there were no chronologies of the children's history. There was little evidence of management confirmation of supervision decisions on files. A system of auditing files had not yet been implemented. Files were secured and stored appropriately.

#### **Fitness of premises (Standard 26)**

This standard was met. The service was housed in a purpose built office block and was appropriately laid out for the space available. It was suitable for carrying out the work of the agency. There was space available for training purposes. There was a satisfactory level of security provided. The premises were fully insured. The agency had satisfactory administrative systems, IT and communication systems.

#### **Financial requirements (Standard 27-29)**

Two standards were met; one was partially met. There was evidence of clear financial systems for the control and supervision of the agency's financial affairs. There were still difficulties in ensuring that payments to carers were made on time, although there were signs that this system was improving.

#### **Fostering panel (Standard 30)**

This standard was partially met. The agency had had difficulty in achieving and maintaining full panel membership. Roles and responsibilities of the managers in relation to panel were clear. The panel chair was suitably experienced and qualified and a new independent chair had been appointed to take over. The panel was thorough in its discussions. Meetings were held regularly. Panel members received papers sufficiently in advance. Annual training for panel was planned. Prospective carers attended panel and this was handled appropriately. There was a range of expertise among the panel members.

#### **Short-term breaks (Standard 31)**

This standard was met. The family link scheme provided short breaks for children with disabilities and the necessary policies and procedures were in place. Although it was small, the service was efficiently run and provided good support to carers and families.

#### **Family and friends as carers (Standard 32)**

This standard was not met. There no evidence of an improving service being provided to carers, who were family and friends of the children placed. This service was the responsibility of the Children Looked After service, rather than being managed directly by the fostering service. Assessments of carers were done by the district social workers and were not being taken to panel. Policies and procedures for dealing with kinship carers were in the process of being updated. Joint work was underway between the district and fostering

service on developing a kinship care policy that would bring the department in line with expected standards.

## **Reports and Notifications to the Local Authority and Secretary of State**

### **(Local Authority Fostering Services Only)**

The following statutory Reports or Notifications are to be made under the Care Standards Act as a result of the findings of this inspection:

Report to the Secretary of State under section 47(3) of the Care Standards Act 2000 that the Commission considers the Local Authority's fostering service satisfies the regulatory requirements:

NO

Notice to the Local Authority under section 47(5) of the Care Standards Act 2000 of failure(s) to satisfy regulatory requirements in their fostering service which are not substantial, and specifying the action the Commission considers the Authority should take to remedy the failure(s), informing the Secretary of State of that Notice:

NO

Report to the Secretary of State under section 47(4)(a) of the Care Standards Act of a failure by a Local Authority fostering service to satisfy regulatory requirements which is not considered substantial:

NO

Report to the Secretary of State under section 47(1) of the Care Standards Act 2000 of substantial failure to satisfy regulatory requirements by a Local Authority fostering service:

NO

### **The grounds for the above Report or Notice are:**

This legislation has been repealed, and replaced by Section 81 of the Health and Social Care Act 2003.

The areas where the council has only partially met, or failed to meet the required standards specifically relate to: issues in securing and promoting the welfare of children: recruiting, checking and training staff; maintaining satisfactory records; the efficiency of the payment system for carers; and the service provided to kinship carers.

However, this failure is not considered substantial, and the action plan provided by the service managers has been discussed with them, and covers all areas in a timely fashion.

## Implementation of Statutory Requirements from Last Inspection

Requirements from last Inspection visit fully actioned?

NO

**If No please list below**

<b>STATUTORY REQUIREMENTS</b>				
Identified below are areas not addressed from the last inspection report which indicate a non-compliance with the Care Standards Act 2000 and Fostering Services Regulations 2002.				
No.	Regulation	Standard	Required actions	
1.	3	FS1	The authority must ensure that there is a clear statement of the aims and objectives of the fostering service and the service provided, including a children's guide. These must include the details specified in the Fostering Services standards and regulations. The children's guide must be suitable for all children fostered through the service. Council members must approve the Statement of Purpose and children's guide, once it is finalised.	01/04/04
2.	8, 19, 42	FS4FS5F S16	The authority must ensure the service manager has effective systems to monitor the fostering service to ensure quality performance. The authority must establish clear lines of communication between senior managers and the fostering team.	01/04/04
3.	11, 33	FS6	The authority must ensure that the sharing of bedrooms taken into account in providing placements for children and appropriate risk assessments are completed as necessary.	Immediate
4.	22	FS24FS2 5	The authority must ensure that systems are in place to monitor children and carers' files.	01/11/03
5.	44	FS29	The authority must ensure that accurate payments are made to foster carers.	01/11/03

**Action is being taken by the National Care Standards Commission to monitor compliance with the above requirements.**

**COMPLIANCE WITH CONDITIONS OF REGISTRATION (IF APPLICABLE)**

**(Registered Independent Fostering Agencies only)**

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

Condition	Compliance	
<b>Comments</b>		

Condition	Compliance	
<b>Comments</b>		

Condition	Compliance	
<b>Comments</b>		

Condition	Compliance	
<b>Comments</b>		

**Lead Inspector**      Sue Nott      **Signature** \_\_\_\_\_  
**Second Inspector**      Nefertiti Logan      **Signature** \_\_\_\_\_  
**Locality Manager**      Peter Nunn      **Signature** \_\_\_\_\_  
**Date**      \_\_\_\_\_

## STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

Action Plan: The appropriate Officer of the Local Authority or the Registered Person (as applicable) is requested to provide the Commission with an Action Plan, which indicates how requirements and recommendations are to be addressed. This action plan will be made available on request to the Area Office.

### STATUTORY REQUIREMENTS

Identified below are areas addressed in the main body of the report which indicate non-compliance with the Care Standards Act 2000, the Children Act 1989, the Fostering Services Regulations 2002, or the National Minimum Standards for Fostering Services. The Authority or Registered Person(s) is/are required to comply within the given time scales in order to comply with the Regulatory Requirements for fostering services.

No.	Regulation	Standard *	Requirement	
1	FSR2002 3.3	FS1	An up to date children's guide that includes information specific to Southwark's fostering service, and is age appropriate must be produced. <b>This was the subject of a requirement from the previous inspection, and continues to be so.</b>	30.09.04
2	FSR2002 4	FS1	Southwark fostering service must ensure that the Statement of Purpose and Children's guide are kept under review, approved by elected members and revised appropriately with any ongoing developments.	31.01.05
3	FSR2002 8	FS4	The provider must ensure that there are clearly established lines of communication between carers, staff in the fostering services, and staff in the LAC teams, as well as others concerned with the welfare of children placed with foster carers. <b>This is a requirement from the previous inspection.</b>	01.04.04 now 30.10.04
4	FSR.2002. 12	FS6	Evidence must be provided of written risk assessments being carried out in relation to children who are not related sharing bedrooms. Assessments should also be carried out in all situations where a child is known to have experienced sexual abuse, or where little is known of a child's background. <b>This was a requirement from the previous inspection.</b>	16.05.03 now 29.03.04

5	FSR2002 11	FS8	The provider must ensure that in each case appropriate and sufficient information is available to the fostering service and to the individual carer about the child or young person placed.	29.03.04
6	FSR2002 14	FS10	The provider must ensure that suitable venues are available to facilitate family contact, and that consistency in contact supervisors is provided where possible.	31.10.04
7	FSR2002 3	FS11	The authority must ensure that all looked after children are aware of the complaints process.	30.09.04
8	FSR2002 20	FS15	The authority must ensure that all unqualified staff have access to training to complete professional qualifications. The provider must also ensure that unqualified staff do not supervise social work students carrying out assessment work.	31.01.05
9	FSR2002 20	FS15	The provider must ensure that the system for obtaining references for staff complies with the Fostering Services standards and regulations, including the making of telephone enquiries to follow up written references on new staff.	29.03.04
10	FSR2002 20	FS15	Panel member files must be up to date, and include CRB checks, references and personal profiles or CV's.	31.10.04
11	FSR2002 19	FS17	The make up of the fostering teams in relation to ethnicity must be kept under review to ensure it reflects the diversity of its service users.	31.10.04
12	FSR2002 12	FS18	The provider must ensure that all staff are made aware of the department's Whistle Blowing policy.	30.09.04
13	FSR2002 35	FS22	Systems and sufficient staffing must be provided to ensure unannounced visits and regular visiting of all carers, including those with long term placements, is carried out.	31.10.04
14	FSR2002 17	FS23	The provider must ensure that all carers attend training identified for their personal development, to provide a high quality service in meeting the needs of all children in their care.	31.10.04

15	FSR2002 11 & 12	FS24	The provider must ensure that all paperwork maintained for each child provides a comprehensive up to date case record for the young person in foster care.	30.09.04
16	FSR2002 30	FS25	The provider must ensure that the system to monitor the quality and adequacy of records, and timescales to remedy any failings, is implemented. <b>This was a requirement from the previous inspection.</b>	31.10.04
17	FSR2002 44	FS29	The provider must ensure that timely payments are made to foster carers. <b>This is a requirement from a previous inspection.</b>	01.12.03 now 30.09.04
18	FSR2002 24	FS30	The provider must ensure that the fostering panel is established and maintained according to the regulations, including four independent members.	31.08.04
19	FSR2002 11 & 17	FS32	The provider must ensure that there are appropriate resources and procedures to deliver an effective and safe service, sensitive to the particular needs of kinship carers. <b>This is a requirement from a previous inspection.</b>	01.04.04 now 30.09.04

#### GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

Identified below are areas addressed in the main body of the report which relate to the National Minimum Standards and are seen as good practice issues which should be considered for implementation by the Authority or Registered Person(s).

No.	Refer to Standard *	Recommendation Action
1	FS1	It is recommended that the information on Children Missing from Care procedures and details of the foster carers' payment system is included in the carers' handbook.
2	FS6	Further training should be provided to ensure that a consistent style and quality of assessments is achieved by all staff, including the completion of a standard health and safety form.
3	FS15	The agency should ensure that all additional identification documentation is listed and copies kept. Any gaps in staff, panel members, or carer's CV's should be followed up and recorded.



4	FS17	The policy regarding exemptions should be reviewed to ensure that panel have the opportunity to discuss changes to approvals within reasonable timescales.
5	FS19	The induction programme for new staff should be reviewed to ensure consistency in standard and quality. It is also recommended that managers should ensure that staff recruited from overseas should be given relevant training in UK Child care legislation.
6	FS20	Managers should ensure that staff meetings are held regularly.
7	FS30	Training on carers attending panel should be provided.

\* Note: You may refer to the relevant standard in the remainder of the report by omitting the 2-letter prefix e.g FS10 refers to Standard 10.

<b>PART B</b>	<b>INSPECTION METHODS &amp; FINDINGS</b>
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The following inspection methods have been used in the production of this report

Number of Inspector days spent	6
Survey of placing authorities	NO
Foster carer survey	YES
Foster children survey	YES
Checks with other organisations and Individuals	YES
• Directors of Social services	NO
• Child protection officer	YES
• Specialist advisor (s)	NO
• Local Foster Care Association	NO
Tracking Individual welfare arrangements	YES
• Interview with children	YES
• Interview with foster carers	YES
• Interview with agency staff	YES
• Contact with parents	YES
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of foster carer training	YES
Observation of foster panel	YES
Inspection of policy/practice documents	YES
Inspection of records	YES
Interview with individual child	YES
Date of Inspection	08/03/04
Time of Inspection	10.00 AM
Duration Of Inspection (hrs)	42.0

The following pages summarise the key findings and evidence from this inspection, together with the NCSC assessment of the extent to which the National Minimum Standards have been met. The following scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The scale ranges from:

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

"0" in the "Standard met?" box denotes standard not assessed on this occasion.

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

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

## Statement of Purpose

The intended outcome for the following standard is:

- **There is clear statement of the aims and objectives of the fostering service and the fostering service ensures that they meet those aims and objectives.**

### Standard 1 (1.1 - 1.6)

There is a clear statement of the aims and objectives of the fostering service and of what facilities and services they provide.

#### Key Findings and Evidence

Standard met?

2

The Statement of Purpose was contained in the fostering policies and procedures' handbook. The contents had been redrafted in February 2004, gave clear aims and objectives for the service and contained the information required under the National Minimum Standards. A staff structure chart of the adoption and fostering unit was included. Management informed the inspectors that copies of the Statement of Purpose had been distributed to staff. The children's guide was still in the process of being developed, although there was a leaflet for children being looked after by the local authority. This leaflet was available in a range of different languages. It was clear and informative, but not specifically related to foster care and did not include details of the Commission in the complaints section. All leaflets were being updated to reflect different ages by the Bridge consultancy. The need to produce a more specific children's guide was the subject of a requirement last year and continues to be so.

A video had been produced for all newly accommodated children to watch with their foster carers. This was simple, informative and included the young people themselves and was considered by the inspectors to be a very useful tool. Another positive initiative was the recent development of a life pack for children where there was an agreed permanency plan. This pack was to be issued in a canvas bag and was aimed to follow the child through childhood to adulthood. The carers' handbook contained a considerable amount of useful and relevant guidance, but lacked information on the foster carers' payment system and the Children Missing from Care procedures, which was available and contained in a separate document. It is recommended that this is included in the Handbook.

**An up to date children's guide that includes information specific to Southwark's fostering service, and is age appropriate must be produced. This was the subject of a requirement last year, and continues to be so.**

**Southwark fostering service must ensure that the Statement of Purpose and Children's guide are kept under review, approved by elected members, and revised appropriately with any ongoing developments.**

## Fitness to Carry On or Manage a Fostering Service

The intended outcomes for the following set of standards are:

- The fostering service is provided and managed by those with the appropriate skills and experience to do so efficiently and effectively and by those who are suitable to work with children.

### Standard 2 (2.1 - 2.4)

The people involved in carrying on and managing the fostering service possess the necessary business and management skills and financial expertise to manage the work efficiently and effectively and have the necessary knowledge and experience of childcare and fostering to do so in a professional manner.

#### Key Findings and Evidence

Standard met?

3

The competence of the management was evidenced during interviews, discussions with staff and examination of personnel files, written systems and documentation. The previous service manager had left in May 2003 and, following a period of interim management arrangements, a new service manager had been appointed. The new service manager held a relevant social work qualification and had previously held a variety of social work and managerial positions in childcare services. The fostering team manager, who was also appropriately qualified and experienced, deputised in the absence of the service manager. Interviews with the respective managers provided evidence of satisfactory management skills. The authority was aware of the requirement for management training to be achieved by 2005 and the service manager was studying for the DHSSM qualification. Discussion with staff showed that they were on the whole positive about the quality of the leadership and support received from management.

### Standard 3 (3.1 - 3.4)

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

#### Key Findings and Evidence

Standard met?

2

There was evidence from discussion with the service manager and file checks that the authority recruitment and selection procedures for managers included the statutory checks to ensure suitability to work with children and relevant experience and qualifications. CRB checks, references and interviews with managers confirmed that they were suitable people to be involved in an agency concerned with safeguarding the welfare of children. The agency had appropriate recruitment and selection policies. **The provider must ensure that telephone enquiries are made to follow up written references.**

## Management of the Fostering Service

The intended outcomes for the following set of standards are:

- **The fostering service is managed ethically and efficiently, delivering a good quality foster care service and avoiding confusion and conflicts of role.**

Standard 4 (4.1 – 4.5)

There are clear procedures for monitoring and controlling the activities of the fostering service and ensuring quality performance.

**Key Findings and Evidence**

**Standard met?**

2

Individual managers were clear about their own roles and responsibilities and lines of accountability were clear. All staff were subject to an annual appraisal scheme. There was evidence that quality performance systems were improving. For example, formal systems were being developed between the service manager and panel for monitoring the quality of reports and providing a forum for feeding back issues of concern. There were financial monitoring procedures in place and bi-monthly meetings had been established with the finance section to address difficulties in the payment system. Direct communication between the finance team and carers has produced a reduction in the amount of over payments, and carers were now responsible for notifying the finance section of when a child left a placement, in addition to the district social worker.

There was also evidence that steps had been taken to improve the lines of communication between senior management and the staff group. Listening groups had been established between management and staff, as well as management and carers. Approximately 45 carers had attended the three groups ran so far. Carers had raised issues of interest and concern to them, including support, finance and future developments. There was evidence that supervision of staff was satisfactory and support to carers was very good.

Ongoing changes of allocated workers in the Looked After Children teams continued to impact on the service provided, and the development of initiatives to improve communication. Managers reported that they worked hard to minimise the effects of workers leaving on children and carers. However, some of the carers and children visited and those responding to questionnaires found these changes frustrating and concerns were expressed at the delays that sometimes occurred in planning for children in their care. **The inspectors' previous requirement that the provider ensure that there are clearly established lines of communication between carers, staff in the fostering services, and staff in the LAC teams, as well as others concerned with the welfare of children placed with foster carers is, therefore, restated.**

The service had developed a format for auditing files. However, management told the inspectors that the system had not yet been implemented in practice. The foster carers agreement form outlined the tasks and responsibilities of the carer's role. The agency provided written information, reviewed each year, regarding the charges for its fostering services and statements of the amounts paid to carers. The fostering service informed carers and staff of their responsibility to declare any possible "conflict of interest".

**Number of statutory notifications made to NCSC in last 12 months:**

1

**Death of a child placed with foster parents.**

0

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

0

**Serious illness or accident of a child.**

0

**Outbreak of serious infectious disease at a foster home.**

0

Actual or suspected involvement of a child in prostitution.	X
Serious incident relating to a foster child involving calling the police to a foster home.	0
Serious complaint about a foster parent.	X
Initiation of child protection enquiry involving a child.	X
<b>Number of complaints made to NCSC about the agency in the past 12 months:</b>	0
<b>Number of the above complaints which were substantiated:</b>	0

<b>Standard 5 (5.1 - 5.4)</b>		
<b>The fostering service is managed effectively and efficiently.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>There were job descriptions for all members of staff, setting out individual duties and responsibilities. Lines of accountability were defined and the team manager would deputise for the service manager for short absences. Concerns identified in some areas of the service, at the previous inspection, such as the operation of the panel, the need to improve resources around the recruitment of carers and problems with payments to carers were being actively addressed. There were ongoing initiatives to improve recruitment and retention of social workers in the department.</p>		

## Securing and Promoting Welfare

The intended outcome for the following set of standards is:

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

### Standard 6 (6.1 - 6.9)

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

Key Findings and Evidence	Standard met?	2
<p>There was evidence from carers visited, questionnaires received, and examination of files that carers provided safe and nurturing placements for children and young people. Accommodation seen during visits to carers was of a good standard. At the previous inspection, concern had been raised that the department's operational strategy of maximizing the use of local authority carers in some cases took precedence over best matching considerations. However, during this inspection, it was noted that most new carers were now only approved for one or two children, although file examination still showed little evidence of appropriate risk assessments being undertaken prior to placing unrelated children in shared rooms, although managers were confident that this was verbally done in practice. The Temporary Placements Referral Form had been revised to include a section regarding the assessment of risk of children sharing a bedroom. The completion of this form should be monitored to ensure appropriate risk assessment evidence is obtained. <b>Evidence must be provided of written risk assessments being carried out in relation to children who are not related sharing bedrooms. Assessments must also be carried out in all situations where a child is known to have experienced sexual abuse, or where little is known of a child's background.</b></p> <p>Carer assessments, using BAAF Form F, were thorough, but there was a lack of consistency in style. For example, not all assessments were competency based. There was also some confusion by panel members and staff over what health and safety form was completed during the assessment. It is recommended that further training be provided to ensure that a consistent style and quality of assessments is achieved by all staff including the completion of the new standard health and safety form. The foster carer agreement states that foster carers are expected to notify their household insurance company of their fostering activity and receive written confirmation from the insurance company that the fostered child or children will be considered members of their household. The carer was requested to provide the agency with a copy of the insurers' written acknowledgement of that notification. A course planned for March 2004, in First Aid for child carers ran by Lewisham' fostering service, could be accessed by Southwark's carers. Health and safety was also covered in the initial Choosing to Foster course.</p>		



**Standard 7 (7.1 - 7.7)**

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

**Key Findings and Evidence****Standard met?**

3

The department had a same culture placement policy and there was an equal opportunities policy. This also reflected the children's division position that children's needs are best met in placements that reflect the culture and religion of the child. From discussion with staff and the managers of the service, it was clear that there was a commitment to ensure that children were provided with a service that valued diversity and issues of equality.

There was a specialist worker who worked directly with African carers to support and maintain the quality of these placements. This worker also provided input to foster carers with trans-cultural placements. Advertising encouraged a diverse range of applicants to apply. However, the service itself identified a need to continue to develop the policy to more consistently meet the racial, cultural and ethnic needs of the children to be placed. The agency encouraged carers to provide information about community and leisure activities for the children, and to encourage the children to improve their life chances to aid them in combating discrimination. There was evidence that the agency had assisted with financial support to allow children to pursue interests and talents, where appropriate.

**Standard 8 (8.1 - 8.7)**

Local authority fostering services, and voluntary agencies placing children in their own right, ensure that each child or young person placed in foster care is carefully matched with a carer capable of meeting her/his assessed needs. For agencies providing foster carers to local authorities, those agencies ensure that they offer carers only if they represent appropriate matches for a child for whom a local authority is seeking a carer.

**Key Findings and Evidence****Standard met?**

2

As reported previously, there was little written evidence on file of risk assessments being carried out in ensuring appropriately matched placements. Referrals received exceeded in-house capacity. In spite of efforts to reduce the numbers of children and young people placed in Independent Fostering Agencies and residential establishments, this had not been achieved. However, this was due to a concerted effort to reduce the number of children in residential establishments following assessment of individual need. This move had seen a subsequent increase in the number of children in family placements, and was seen by managers and inspectors as a positive shift in the pattern of placements. The fostering service worked with the brokerage team to ensure the best match for each child. In house resources were looked at first, and then if no suitable carer could be found, approaches were made, via the brokerage team, to external agencies. The brokerage team read the Form F's received from independent agencies, and used a specific form, which aimed to gather information about the child to be shared with potential carers, both in-house and agency. Essential information records were provided to carers and reviewed at placement agreement meetings. From interviews with carers, examination of files and questionnaires received, there was evidence that the agency tried to appropriately match the children to the carers. There was also some evidence on files examined of a verbal sharing of information concerning the child between the relevant professionals and potential carers. Consideration was also given to the child's racial, ethnic, religious, cultural and linguistic needs, but there was also a recognition that these needs could not always be met. The inspector was informed that where carers were unable to reflect some of these needs, additional training and support would be given and this would be identified in the written foster placement agreement at the time of placement and at future reviews. The service tries to link up these carers with carers who share the ethnicity of the child to act as mentors to them. However,

their ability to do so continued to be restricted in some cases by a lack of information provided by district social workers and this continued to impinge on the ability of the service to ensure proper matching.

**The provider must ensure that, in each case, appropriate and sufficient information is available to the fostering service, and to the individual carer about the child or young person placed.**

**Standard 9 (9.1 - 9.8)**

**The fostering service protects each child or young person from all forms of abuse, neglect, exploitation and deprivation.**

**Key Findings and Evidence**

**Standard met?**

2

There were child protection policies in place and there was evidence that allegations had been referred appropriately for investigation. Complaints and allegation data were regularly collated. There was an ongoing programme of training provided to carers and this included courses on the protection of children from abuse, safe caring and managing difficult behaviour. Some individual carer training plans had not been carried through, and **the agency must ensure that all carers attend ongoing training on these issues.** The department had a joint protocol with the police for children missing from care, and a policy for dealing with bullying. The fostering service had a clear policy that corporal punishment was unacceptable and carers visited understood this. Carer's interviewed showed an understanding of the procedures involved. File reading showed regular contact and visits from supervising social workers. As discussed in Standard 6, written evidence of individualised risk assessments being carried out when a child was being considered for placement was not always available.

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

X

%

**Standard 10 (10.1 - 10.9)**

**The fostering service makes sure that each child or young person in foster care is encouraged to maintain and develop family contacts and friendships as set out in her/his care plan and/or foster placement agreement.**

**Key Findings and Evidence**

**Standard met?**

2

Carers indicated in interview that they were used to facilitating contact and that workers were available for supervised contact sessions. However, a number of carers commented on the lack of continuity in contact supervisors. There also appeared, as at the previous inspection, to be evidence of a lack of suitable venues for contact sessions. However, carers generally expressed the view that they felt listened to and supported by the department when contact was problematic. **The provider must ensure that suitable venues are available to facilitate family contact, and that consistency in contact supervisors is provided where possible.** From files seen there was evidence that the views of the child, concerning contact, were sought at reviews and at placement agreement meetings. Discussion with the carers, children and young people visited supported this view. There was evidence on files that contact was addressed and recorded during the care planning process, including the development of the care plan at "looked after children" reviews, and during the matching process. Efforts were made to ascertain the views and wishes of the child or young person in relation to contact with their family. Contact was discussed with carers in pre-approval training and the need to encourage contact was specified in carer's agreements. The

supervising social worker visits were expected to monitor contact on a regular basis and record the details on file. Ongoing training on managing contact was provided within the annual training programme and reviews assessed the carer's ability to facilitate and promote contact. Links with cultural centres, churches and community groups were also encouraged, especially for those young people living away from their countries of origin.

**Standard 11 (11.1 - 11.5)**

**The fostering service ensures that children's opinions, and those of their families and others significant to the child, are sought over all issues that are likely to affect their daily life and their future.**

**Key Findings and Evidence**

**Standard met?**

2

There was evidence from discussion with staff that children's views had been sought by workers involved in decisions concerning their future and a commitment to listen to children and involve them in affecting their lives. For example, on whether they wanted to remain with current carers and the level of contact with family members, including siblings. Managers were looking at ways they could improve their communication systems with children including the development of Care Zone and a new listening group being established with young people to obtain ideas for the service. Children and birth families were included in care planning and both were given LAC consultation forms prior to the child's review. Children and parents were advised about how to make a complaint if they disagreed with a decision. If a child or young person made a formal complaint, the complaints officer allocated an advocate to them to assist in the process. However, a number of questionnaires received from children indicated that not all children in placement were aware of how to make a complaint. **The authority must ensure that all looked after children are aware of the complaints process.** Efforts were made to ensure that children with communication difficulties were able to access appropriate means through which they could express their views. The inspector was informed that carer's children were also consulted and offered support where appropriate. Carers' agreements emphasised partnership between all parties.

**Standard 12 (12.1 - 12.8)**

**The fostering service ensures that it provides foster care services which help each child or young person in foster care to receive health care which meets her/his needs for physical, emotional and social development, together with information and training appropriate to her/his age and understanding to enable informed participation in decisions about her/his health needs.**

**Key Findings and Evidence**

**Standard met?**

3

There was evidence from files seen and from other information provided by managers that the service was supporting carers in promoting children's development and health. Children with identified health problems were referred to the designated health project worker, employed specifically to support the fostering service, to ensure follow up was maintained. During the past year, carers had been offered basic health care courses, as well as more specialist topics such as adolescent mental health and emergency life support. Specific training around disability issues was available for respite carers. There were good links with the local CAMHS teams (children's mental health service) and the Maudsley clinic, which provided a specialist consultation service to children and families experiencing difficulties in fostering and adoption placements. The Maudsley also offered training to carers called

“Managing Difficult Behaviours”. Managers said that all children in foster care were registered with G.P.s; carers and young people interviewed confirmed this. Managers from the service were working with health managers from the PCT to develop a joint health strategy for children looked after. This was part of a wider departmental health strategy in Southwark. Inspection of files showed that information regarding young people’s health needs was sought at the time of referral. Health issues were regularly monitored through the review process. Carers’ agreements reflected expectations of carers to meet placement health needs. There was evidence on file of medical assessments being carried out and the use of specialist services. Carers were expected to make sure that the child or young person had regular dental and optician check ups, access to a balanced diet and opportunities for leisure activities. Foster carers were expected to attend the child or young person’s LAC review to provide information regarding the child or young person’s health needs and to contribute to the planning and reviewing process.

**Standard 13 (13.1 - 13.8)**

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

**Key Findings and Evidence**

**Standard met?**

**3**

Since the last inspection, the education project worker post to support carers and children, funded by Quality Protects money, had been mainstreamed into the district children’s services. This provided opportunities for training for foster carers in maths and English. Handbooks on the 3 key stages were provided, including exercises and test examples. All looked after children taking GCSE’s were provided with tutors and computers were provided for all children of school age, as well as connection to the internet. Supervising social workers encouraged carers to help the children with their homework, attend parents’ evenings and provide an appropriate environment for study. Educational attainment records were kept on SATs and GCSE results for children in placements. Southwark was exploring the use of Care Zone, an electronic learning programme, and the possibility of setting up a specific computer project for children looked after and their carers. The fostering service paid transport costs out of their budget, to maintain a child in their current school for the first six weeks of placement. Thereafter, the costs were met out of the district’s budget. The inspectors were informed that there was a lack of school places in Southwark for a small proportion of teenage unaccompanied minors. The initial training programme for carers had a module on education and the ongoing programme for the year included courses on behaviour and exclusion and special educational needs. Agreements, reviews and supervising social work visits emphasised the educational needs of the Looked After Child. It was an expectation that foster carers should support their foster child or young person educationally and contribute to the assessment of the children’s educational needs and progress in the planning and review process, and through attending PEP meetings. There was evidence from files seen and carers and children visited that this was happening.

**Standard 14 (14.1 - 14.5)**

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

**Key Findings and Evidence****Standard met?****3**

Information from managers gave evidence of steps taken to support carers in preparing young people in acquiring the necessary skills. Guidelines stated that every 16 year old would be allocated a social worker from the 16 plus team and a needs assessment would be completed with the young person and carer within three months of commencing the service. A pathway plan would then be drawn up, identifying what needed to be done to enable the young person to live independently by the time they reach 18 years old. A training course for carers on "Preparation for Independence" had been attended by eight carers in July 2003, and was programmed to run again in the summer of 2004. The 16 plus team had only been established for a year and was managed separately from the fostering service. The carer's annual review looks at preparation for independence as part of the competencies of caring. Carers seen who had teenagers placed were aware of the expectations on them and understood that they need to provide the young people with age and developmentally appropriate opportunities for learning independence skills. Foster carers are given programmes to help them work with the young person on the practical skills such as budgeting, shopping and cooking meals. The young people spoken to felt they were consulted and involved in the decision making about their future.

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

The intended outcome for the following set of standards is:

- The people who work in or for the fostering service are suitable to work with children and young people and they are managed, trained and supported in such a way as to ensure the best possible outcomes for children in foster care. The number of staff and carers and their range of qualifications and experience are sufficient to achieve the purposes and functions of the organisation.

### Standard 15 (15.1 - 15.8)

Any people working in or for the fostering service are suitable people to work with children and young people and to safeguard and promote their welfare.

#### Key Findings and Evidence

Standard met?

2

There was evidence from discussion with management and random inspection of a selection of staff files that the authority had a written recruitment and selection procedure, appropriate for ensuring the suitability of staff to work with children. Criminal Record Bureau (CRB) checks were carried out on all new staff and panel members, but the council had been slow to ensure that all current staff had up to date CRB checks. There was evidence that the authority had applied for all checks that needed to be updated. Inspection of personnel files showed that all staff working in the fostering teams, except one experienced and competent worker, were appropriately experienced, qualified and that relevant checks were carried out on new staff. This member of staff worked in the support team and did not carry out assessments. Also staff in the brokerage team were not qualified social workers and although any decisions about placements were made by the LAC teams, staff carried out a crucial role in locating suitable families. This practice should be reviewed.

All staff recruited to carry out social work functions must be appropriately qualified, and **managers must ensure that all unqualified staff have access to training to complete professional qualifications. The provider must also ensure that unqualified staff do not supervise social work students carrying out assessment work.**

**The provider must ensure that the system for obtaining references for staff complies with the Fostering Services standards and regulations, including the making of telephone enquiries to follow up written references on new staff.**

**Panel member files must also be kept up to date, and include personal profiles or CV's.** All carers, adult household members and frequent visitors had enhanced CRB checks on the files examined. The agency should also ensure that all additional identification documentation is listed, and copies kept. Any gaps in staff, panel members, or carer's CV's should be followed up, and recorded.

Total number of staff of the agency:

18

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

2

**Standard 16 (16.1 - 16.16)****Staff are organised and managed in a way that delivers an efficient and effective foster care service.****Key Findings and Evidence****Standard met?****3**

Social work staff interviewed generally said that they felt supported by their managers, who were described as very committed. Individual supervision sessions, peer group support, training and the accessibility of management were all quoted as contributing to this. However, there was a range of views on the quality of the supervision offered. A re-organisation had divided the service into two different teams, a recruitment team and one providing support and supervision to carers. Staff were now supervised by two practice supervisors. Team meetings were said by managers to take place regularly, although some staff interviewed were less certain of this. Discussion with staff at different levels in the organisation revealed that the lines of communication between different teams were improving. Staff had clearly defined job descriptions and there was evidence, from examination of files and interviews with staff and carers, that staff had an understanding of the importance of working effectively together to ensure that the child's welfare and best interests were maintained, but this did not always happen in practice. The management and supervision systems in place determined staff workloads and helped to ensure that work was prioritised, monitored and tasks delegated appropriately. The agency had appropriate administrative procedures, but there was a general recognition among staff and managers interviewed that the administrative support was inadequate to meet the needs of the service. Managers confirmed that staff, carers and children had access to specialist professional advice. All carers received the training brochure and were able to access the full range of subjects available. A comprehensive programme of training was provided and in addition, carers were able to access courses run by Lewisham and Croydon local authority fostering services. Carers were encouraged to keep a record of training attended in preparation for their reviews and in preparing a portfolio for achieving their NVQ qualifications. Staff had access to a copy of the staff handbook, which set out the terms and conditions of employment, and the agency's staffing procedures.

**Standard 17 (17.1 - 17.7)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

Recruiting suitably qualified and experienced staff had been difficult and the team had two vacancies at the time of the inspection. The department had, the previous year, conducted a recruitment drive abroad and had recruited two suitably qualified staff, who were employed on two-year contracts. The authority was also developing alternative recruitment routes through bursary and trainee schemes. All staff interviewed were positive about the training and development opportunities open to them and the flexible working policy provided to them. A large number of staff worked part time hours, particularly in the assessment team, and seven freelance assessors were also being used. However, **the make up of the fostering teams in relation to ethnicity must be kept under review to ensure it reflects the diversity of its service users.**

Ongoing recruitment of sufficient carers to consistently meet the needs of the service in an inner city area continued to be a problem. The demand on the service was high and, in spite of an active recruitment strategy, the service had found it hard to attract the numbers required. Social workers had been particularly active in trying to attract West African carers and had enlisted the help of their present carers in advertising campaigns. The service had identified that it needed to recruit more white carers and more carers who would take babies. Placements were made with independent fostering agencies, but the clear preference was for placing in-house. The policy regarding exemptions for taking placements over a carers' approved numbers had been revised, but was not considered by inspectors to be stringent enough. Timescales for carers to continue to be over numbers without panel consideration were too long. It is recommended that this policy be reviewed to ensure that panel have the opportunity to discuss exemptions to approvals without unnecessary delay.

There was evidence that staff were monitoring how available resources were used and the future strategies for this part of the service. There was evidence that the agency was taking appropriate steps to improve the range and skills of carers. There was a clear assessment process that defined the fostering task and the skills and competencies required from prospective applicants. The stages, content and timescales of the selection process were made clear and the carers interviewed indicated that they had understood what was entailed in the selection process.

**Standard 18 (18.1 - 18.7)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

Discussion with staff, carers and examination of files showed that Southwark social services generally implemented sound employment practices for staff and good support to staff. There were job descriptions for all staff in post and appropriate employment policies, which were clear and informative. Equal opportunities employment practices in relation to the agency's recruitment and interview process were evident. Much effort, thought and work was also put into supporting carers with their placements. There was an out of hours service provided to carers via the emergency duty team and the fostering team's own support service. There were appropriate insurance arrangements in place. The department had a clear Whistle Blowing policy, although a number of staff indicated that they had not seen the document. **The provider must ensure that all staff are aware of the departments Whistle Blowing policy.**

The service had a satisfactory health and safety policy for carers, children and staff. Carers



visited and questionnaires received gave positive feedback and indicated that training and support from supervising social workers was very good. The agency has management systems in place in respect of carer supervision, appraisal and support. This was evidenced through examination of carers' files.

**Standard 19 (19.1 - 19.7)**

**There is a good quality training programme to enhance individual skills and to keep staff up-to-date with professional and legal developments.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>There was a clear appraisal system for staff and staff were generally positive about this and access to suitable training. Funding was reported to be available for both in-house and external training. Finding the time to do the training was still more of an issue than cost or availability. It was aimed that the training needs of staff would be identified via supervision and that this information would be used to develop the training plan. The inspectors did not see a programme for staff to achieve their Post Qualification awards within relevant timescales, but there was evidence that professional development was actively encouraged. There was an induction programme for new staff, which took place within an agreed timescale. The manager confirmed that new staff had undertaken this, although it was reported by staff that the standard of the induction was variable. The induction programme for new staff should be reviewed to ensure consistency in standard and quality. It is recommended that managers should ensure that staff recruited from overseas should be given relevant training in UK Child care legislation. Supervision was provided to staff, appropriate to levels of experience and hours worked. It was also provided on a more informal basis, as and when the need arose. Comments varied about the quality of supervision received, although the majority were positive. An appropriate training programme for carers had been developed and joint training for staff and carers was established within this programme.</p>		

**Standard 20 (20.1 - 20.5)**

**All staff are properly accountable and supported.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>All staff had job descriptions setting out their areas of duty together with a staff handbook. No records were seen of staff supervision sessions, but management and staff said that they received supervision regularly and generally felt well supported. Staff meetings were said by management to be held regularly, although not all staff supported this view. Staff said they valued peer group support and the sharing of skills and knowledge. The staff appraisal scheme provided an opportunity for appraisal and personal development objective setting. Managers should ensure that staff meetings are held regularly.</p>		

**Standard 21 (21.1 - 21.6)****The fostering service has a clear strategy for working with and supporting carers.****Key Findings and Evidence****Standard met?****2**

Discussion with management, inspection of documents and carers comments confirmed that there was a clear strategy for the support, training and development of carers, along with a full annual training programme. This had been carefully planned and carers were extremely positive about it. Carers reported that they received good support and supervision and were clear about the role of the supervising social worker. A training session for carers on “Effective Thinking Skills” was observed by one of the inspectors. The trainer facilitated the sessions to encourage discussion and questions.

All carers were allocated and the agency offered three support groups for carers. Carers had access to a 24-hour telephone support service. Weekend and holiday respite was provided to carers where appropriate. Carers receive regular telephone contact and visits from their supervising social worker.

Long term carer annual reviews were not all up to date and were only going to panel if a change in approval was requested. Unannounced visits were not happening in the permanent fostering team and carers at a distance were not always regularly visited.

**Systems and sufficient staffing, must be provided to ensure unannounced visits and regular visiting of all carers is carried out.**

Carers are supported in their attendance at placement agreement meetings, LAC reviews, health and educational meetings and any other meetings as required. However, carers reported that communication between supervising social workers and the children’s social workers often suffered through shortage of staff and staff turn over in area teams.

**Standard 22 (22.1 - 22.10)****The fostering service is a managed one that provides supervision for foster carers and helps them to develop their skills.****Key Findings and Evidence****Standard met?****2**

Feedback from visits to carers, carer questionnaires and the foster carers coffee morning attended continued to be, on the whole, very positive about the service received. A major strength of the service was the support it provided to carers and there was good access to therapeutic, educational, health and respite services. As well as access to the emergency duty team, there was a rota of supervising social workers to provide out of hours support to carers. Management said that all carers had an allocated supervising social worker and carers seen confirmed that they received regular visits from their social workers. Records of these visits were seen on files, although the quality of notes kept was variable. The service, in addition, now paid the carers’ subscription to Fostering Network, which was an additional means of support. All carers received a Fostering Handbook, which contained useful information.

The complaints procedure was a borough wide one. The agency provided information regarding the complaints’ procedure to carers and those carers interviewed were aware of how to make a complaint. The agency had a system in place to keep a record of any complaints. There was evidence from an examination of the child protection policy and procedures and interviews with staff and carers, that all personnel involved were aware of their role and responsibilities in relation to investigations into allegations of abuse.

The authority expected each carer’s household to receive regular visits by a supervising social worker, but this had not always been done, particularly in the permanence team. Managers were open about the service provided to a number of carers living at a distance from London who had often not received regular visits. The long-term fostering service had difficulties with the practicalities of carrying out unannounced visits, and this is the subject of a new requirement. **Systems, and sufficient staffing, must be provided to ensure**

**unannounced visits and regular visiting of all carers is carried out.**

**Standard 23 (23.1 - 23.9)**

**The fostering service ensures that foster carers are trained in the skills required to provide high quality care and meet the needs of each child/young person placed in their care.**

**Key Findings and Evidence**

**Standard met?**

**2**

Training took place within an anti discriminatory framework and was organised to encourage and facilitate attendance. The support group for West African carers, observed at the last inspection, was still thriving. The enthusiasm, commitment and involvement of the carers and the worker in developing this group was commended by the inspectors. Each carer's annual review included an appraisal of the carers' individual training and development needs. There was evidence, however, in one case examined that a white carer had not attended training following a complaint regarding their lack of awareness on racial and cultural issues in caring for black children. This had not been followed up in their following reviews. **The provider must ensure that all carers attend training appropriate to identified for their personal development, in meeting the needs of all children in their care.**

A range of core training courses for new carers was provided, including Managing Challenging Behaviour, Contact and Partnership, Attachment, Loss and Separation and Child Development. The pre-approval course for applicants involved existing carers, enabling new carers to benefit from their experience and knowledge. A programme of NVQ training was in operation. Carers also had the opportunity to join with social workers during training and the agency tried to ensure that training took place at times convenient for the carers. The effectiveness of the programme of training and the development of future training, was evaluated and reviewed annually.

## Records

The intended outcome for the following set of standards is:

- All appropriate records are kept and are accessible in relation to the fostering services and the individual foster carers and foster children.

### Standard 24 (24.1 - 24.8)

The fostering service ensures that an up-to-date, comprehensive case record is maintained for each child or young person in foster care which details the nature and quality of care provided and contributes to an understanding of her/his life events. Relevant information from the case records is made available to the child and to anyone involved in her/his care.

#### Key Findings and Evidence

Standard met?

2

The department had a written policy on case recording; the files examined contained the majority of information required, but LAC forms were often not signed or dated. Also, although the files were reasonably structured, there was no index at the front of the file listing the different sections and no chronologies of the children's history. There was little evidence of management confirmation of supervision decisions on files. There was some variation in the quality of recording. **The provider must ensure that that all paperwork maintained for each child provides a comprehensive up to date case record for the young person in foster care.**

The purpose of the placement was clarified with the carer in the Placement Agreement forms. Procedures made clear that it was the responsibility of the carer to keep their own detailed records of the placement and to store information on the child carefully and securely. Carers had been offered computer training to improve their recording skills. They were also aware of the importance of maintaining memorabilia during the child's stay with them. However, not all carers felt they were given good enough background information on the children they cared for.

### Standard 25 (25.1 - 25.13)

The fostering service's administrative records contain all significant information relevant to the running of the foster care service and as required by regulations.

#### Key Findings and Evidence

Standard met?

2

Confidential records were securely stored and an appropriate written policy and operating system for administrative record keeping was in place. The Human Resources section, located in the same building as the fostering service, held staff records. Central records were kept of complaints and allegations. Southwark has an "Access to Records" Policy, which provides guidance to staff and carers. Service users are able to see their records in compliance with legal safeguards. The administrative records inspected provided a satisfactory record of information required to run the service. The computerised system had appropriate back up and security safeguards. Southwark use the Care First IT system, but the system needed more work to provide all the information useful to the fostering service. Managers were, however, able to provide up to date information from both the children and carers register, as well as a list of complaints and child protection allegations. It was reported, by managers and staff, that there were insufficient administrative staff to efficiently carry out all the tasks, but this was being reviewed.

A procedure for auditing files had been developed, but managers were open that this had had not yet been implemented in practice, except on the Family Link files. The audit form

listed information to be included in case records, but did not include action to be carried out to achieve improvement within set timescales. **The provider must ensure that the system to monitor the quality and adequacy of records, and timescales to remedy any failings is implemented for all active cases. This is the subject of a new requirement.**

<b>Number of current foster placements supported by the agency:</b>		338
<b>Number of placements made by the agency in the last 12 months:</b>		X
<b>Number of placements made by the agency which ended in the past 12 months:</b>		X
<b>Number of new foster carers approved during the last 12 months:</b>		6
<b>Number of foster carers who left the agency during the last 12 months:</b>		X
<b>Current weekly payments to foster parents: Minimum £</b>	X	<b>Maximum £</b>
		X

## Fitness of Premises for use as Fostering Service

The intended outcome for the following standard is:

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

Standard 26 (26.1 - 26.5)

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

**Key Findings and Evidence**

**Standard met?**

3

The service was housed in a purpose built office block, which had an appropriate security system. Social workers were located in an open plan office with manager's rooms on the same floor. The same issues remained for staff, as reported during the last inspection. Space was at a premium. There was a meeting room large enough for staff meetings and training. If the service expands, there would be little room for new staff or students and alternative accommodation was being explored. The office itself was of a reasonable standard, with adequate lighting and sufficient office equipment. The agency had satisfactory administrative systems, IT and communication systems. Safeguards are in place in relation to the security of these systems. The Care First system was to be developed to better meet the needs of the service. All staff had access to a computer. The premises had a lockable filing system for secure confidential record keeping. There was an appropriate security system in place to prevent illegal access to the building.

## Financial Requirements

The intended outcome for the following set of standards is:

- The agency fostering services are financially viable and appropriate and timely payments are made to foster carers.

### Standard 27 (27.1 - 27.3)

The agency ensures it is financially viable at all times and has sufficient financial resources to fulfil its obligations.

#### Key Findings and Evidence

Standard met?

3

The service had appropriate systems for ensuring its financial viability. Although the demands on its resources were considerable, the inspectors saw evidence of continuing improvements and developments in the services provided. The inspectors were informed that there was a commitment to ensuring appropriate allocation of resources to this service, particularly to the recruitment of carers and staff.

### Standard 28 (28.1 - 28.7)

The financial processes/systems of the agency are properly operated and maintained in accordance with sound and appropriate accounting standards and practice.

#### Key Findings and Evidence

Standard met?

3

From an examination of documentation and interviews with the managers it was evident that the financial processes were regularly monitored by them and by the authority's financial department. The director and the council received ongoing reports on the financial state of the service. Managers were accountable for their individual budgets.

**Standard 29 (29.1 - 29.2)**

**Each foster carer receives an allowance and agreed expenses, which cover the full cost of caring for each child or young person placed with him or her. Payments are made promptly and at the agreed time. Allowances and fees are reviewed annually.**

**Key Findings and Evidence**

**Standard met?**

**2**

The inspectors were informed that the finance team had developed better communication with carers to assist with problems with payments and obtain better information when children leave placements. An ongoing issue for carers had been that notifications of children leaving placements had been haphazard, leading to a repeated need for the authority to request carers to return overpayments. Carers questionnaires and interviews indicated some improvements in the system, but payments of birthday and holiday allowances were still often late. A decision was still awaited as to whether the triggering of these allowances could be carried out by fostering staff, rather than field social workers. It was hoped this change would improve the efficiency of the system. Managers stated that changes in the IT system had already helped to improve the promptness of payments. Carers' allowances were banded by the age of the child in placement and were reviewed annually, and managers recognised that the level of allowances needed to be able to compete realistically with the private sector. A number of carers commented on the lack of paid leave for carers. **The provider must ensure that timely payments are made to foster carers. This is a requirement from a previous inspection.** Although there had been an improvement the standard is only partially met.



## Fostering Panels

The intended outcome for the following set of standards is:

- **Fostering panels are organised efficiently and effectively so as to ensure that good quality decisions are made about the approval of foster carers, in line with the overriding objective to promote and safeguard the welfare of children in foster care.**

### Standard 30 (30.1 - 30.9)

Fostering panels have clear written policies and procedures, which are implemented in practice, about the handling of their functions.

#### Key Findings and Evidence

Standard met?

2

Written policies for the panel and procedures covering the function and constitution of the panel, decision-making and quality assurance issues had recently been produced. These included the process followed when all members of the panel are not in agreement. The service had made a number of changes to the panel and a new independent panel chair had just been appointed and was due to take over the role shortly. Panel training had been booked for May, when all the new membership would have started. **The provider must ensure that the fostering panel is established and maintained according to the regulations, including four independent members.**

The present panel chair had been in post for three years and was an experienced social worker and manager of residential services. The panel had access to legal and medical advice, and the advisers were available for consultation. The service manager was identified as the decision maker for recommendations concerning carers made by the panel.

Procedures had also been updated in line with the fostering regulations for representations and appeals by carers. A system for panel to monitor its' quality assurance role was being developed, so that issues could be formally fed back to the fostering management via quarterly meetings with the chair, vice chair and agency advisor. Carers were invited to attend panel, where their case was under consideration. The inspectors would recommend training on this issue for the panel, particularly around the structuring of questions to assessing social worker, and carers.

At the panel observed by the inspector, there was some confusion over the format of the health and safety check to be used with carers and obtaining police checks from abroad.

There was evidence that a formal policy on pets had been introduced. However, observation of panel gave evidence of improving quality of discussion, with increasing input from independent members and valid issues of concern being raised and discussed. The panel is held monthly. Papers are sent out a week in advance. A recent administrative review had resulted in a change of minute taker and administrative officer, as there had been delays in getting panel minutes. Efforts were being made to ensure the recommendations of the panel, were considered by the decision maker within appropriate timescales.

## Short-Term Breaks

The intended outcome for the following set of standards is:

- When foster care is provided as a short-term break for a child, the arrangement recognises that the parents remain the main carers for the child.

### Standard 31 (31.1 - 31.2)

Where a fostering service provides short-term breaks for children in foster care, they have policies and procedures, implemented in practice, to meet the particular needs of children receiving short-term breaks.

Key Findings and Evidence	Standard met?
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The family link scheme provided breaks for children aged 4-10 who had severe and profound disabilities and who were on the disability register. There was evidence from examination of appropriate policies and procedures, staff interviewed, carer questionnaires and files seen that the needs of children receiving short-term breaks were met. The service aimed to provide children with a maximum of 30 days/overnight stays a year. Seven families were approved and linked with nine children, but management recognised there was a need to increase establishment in order to meet the demand, as there was a list of children waiting for a link to receive a short term break. An increase in establishment was being sought.	
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## Family and Friends as Carers

The intended outcome for the following set of standards is:

- Local authority fostering services' policies and procedures for assessing, approving, supporting and training foster carers recognise the particular contribution that can be made by and the particular needs of family and friends as carers.

### Standard 32 (32.1 - 32.4)

These standards are all relevant to carers who are family and friends of the child, but there is recognition of the particular relationship and position of family and friend carers.

Key Findings and Evidence	Standard met?	1
<p>There was no evidence of an improving service being provided to carers who are family and friends of the children placed. This service was the responsibility of the Children Looked After service, rather than being managed directly by the fostering service. Assessments of carers were done by the district social workers and were not being taken to panel. Numbers of kinship carers were not provided, but it was stated that they were substantial. There had been an increase in the numbers of children being placed within their family of origin. The inspectors were informed that joint work was underway between the district and fostering service on developing a kinship care policy to bring the department in line with expected standards.</p> <p><b>Further work must be carried out on improving services to kinship carers, and the provider must ensure that there are appropriate resources and procedures to deliver an effective and safe service, sensitive to the particular needs of kinship carers. These carers should be included in future training programmes.</b></p>		

**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

**Lay Assessor** \_\_\_\_\_ **Signature** \_\_\_\_\_  
**Date** \_\_\_\_\_

**D.1 Registered Person's or Responsible Local Authority Manager's comments/confirmation relating to the content and accuracy of the report for the above inspection.**

We would welcome comments on the content of this report relating to the Inspection conducted on <enter date(s) of inspection here> and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary	<input type="checkbox"/> YES
Comments were received from the provider	<input type="checkbox"/> YES
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/> YES
Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate	<input type="checkbox"/>

**Note:**

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

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

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

Action plan was required	<input type="checkbox"/> YES
Action plan was received at the point of publication	<input type="checkbox"/> YES
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/> YES
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/> NO
Provider has declined to provide an action plan	<input type="checkbox"/> NO
Other: <enter details here>	<input type="checkbox"/>

**Public reports**

It should be noted that all NCSC inspection reports are public documents. Reports on children's homes are only obtainable on personal application to NCSC offices.

**D.3 PROVIDER'S AGREEMENT**

**Registered Person's or responsible Local Authority Manager's statement of agreement/comments: Please complete the relevant section that applies.**

**D.3.1 I \_\_\_\_\_ of \_\_\_\_\_ confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.**

**Print Name** \_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Designation** \_\_\_\_\_  
**Date** \_\_\_\_\_

**Or**

**D.3.2 I \_\_\_\_\_ of \_\_\_\_\_ am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:**

**Print Name** \_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Designation** \_\_\_\_\_  
**Date** \_\_\_\_\_

Note: In instance where there is a profound difference of view between the Inspector and the Registered Provider both views will be reported. Please attach any extra pages, as applicable.

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