

Northamptonshire County Council Fostering Service

Inspection report for LA Fostering Agency

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About this inspection

The purpose of this inspection is to assure children and young people, parents, the public, local authorities and government of the quality and standard of the service provided. The inspection was carried out under the Care Standards Act 2000.

This report details the main strengths and any areas for improvement identified during the inspection. The judgements included in the report are made in relation to the outcomes for children set out in the Children Act 2004 and the relevant National Minimum Standards for the service.

The inspection judgements and what they mean

Outstanding:	this aspect of the provision is of exceptionally high quality
Good:	this aspect of the provision is strong
Satisfactory:	this aspect of the provision is sound
Inadequate:	this aspect of the provision is not good enough

Service information

Brief description of the service

The Northamptonshire County Council Fostering Service is an integral element of the Northamptonshire children and young people's Service and day to day management of the fostering service is delegated to a team manager. The service offers a wide range of fostering placements: long term, short term, therapeutic, kinship, supported lodgings and emergency. Six fostering teams are based across four office bases and each team is led by a principal social worker, with nominated lead responsibility for stated areas of fostering service provision. The authority additionally provides a family link scheme and a remand fostering scheme, which are separately managed. The family link scheme is part of the inclusion service and provides flexible short breaks for children who have learning difficulties and/or disabilities and/or sensory impairment. Day to day management of the remand fostering service lies within the youth offending service.

The family link service has not been inspected for the last two years, except through receipt of a written submission from the team manager responsible. This inspection has focused on this service but has incorporated inspection of some elements of the mainstream fostering service. In order to achieve this, inspectors have tracked the care of two young people with disabilities, who are looked after children currently accommodated in foster placements, but are additionally receiving a range of services through the family link scheme.

The family link scheme has, more recently, evolved into a broader community short breaks service, through the incorporation of a variety of service provision, now managed by the family link team manager. Although family link retains its own unique identity, as a registered service under standard 31, short breaks are now provided to disabled children through access to a range of community based, unregulated services, often administered through casual workers. Direct payments have provided opportunities for families to determine their own support packages and have resulted in a reduction in referrals for family link options. The residential sector provides respite and full-time care options for those young people with high level needs. The family link short break service, in the main, now provides for those children who fall in the medium to high category, where traditionally they supported many young people and families with low-level needs.

At February 20th 2008 204 fostering households were accommodating 233 young people. 87 approved carers were providing placements, within the family link short breaks scheme, to 102 young people, 90% of whom were accessing overnight care.

Summary

The overall quality rating is satisfactory.

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

As detailed above, this inspection has had a somewhat limited remit, focusing on fostering service and family link short break service provision for young people with disabilities. There are good links between these two services, despite them being separately managed, and the managers often work closely together in identifying long term placements for young people with disabilities.

Eight recommendations have been identified during this inspection. Foster carers must be provided with comprehensive information where young people have complex health needs and must receive appropriate support and necessary equipment to enable them to support young people to live full lives and maintain dignity. Safe caring guidelines and appropriate risk assessments must demonstrate that safety is prioritised in the care provided to young people with learning difficulties and/or disabilities. The mainstream fostering service does not always appropriately utilise pro-forma developed by the family link short breaks service, to full advantage, in its fostering placements for young people with complex learning difficulties and/or disabilities. Although it is wholly appropriate for trainee social workers to provide support to foster carers under the supervision of a qualified worker, carers must be supervised by a named, appropriately qualified social worker.

Administrative support must be sufficient to fully meet the needs of the fostering service. Recruitment processes for staff must follow good practice in safeguarding children and any staff involved in these processes must be competent and appropriately trained. There must be a robust system to ensure that carer payments cover the full cost of caring for a young person in placement and are made promptly. All carer allowances and fees should be subject to annual review. Where the authority commissions placements from independent providers contracts must clearly specify the quality of care required and there must be robust monitoring systems to ensure continuity of standards.

Restructuring, reorganisation and the implementation of some new systems, during the last year, across the whole of this authority, has, in some cases, left the fostering and family link services unable to adequately demonstrate their capacity to meet national minimum standards.

Improvements since the last inspection

During the previous inspection four recommendations were identified. The fostering service manager was advised to demonstrate robust oversight of trainee social workers completing foster carer assessments. Unqualified workers now only complete assessments under direct supervision of a qualified social worker, who accompanies them to panel to present the application. It was recommended that the fostering service should ensure that the supervision arrangements fully met the support needs of individual carers, particularly kinship carers who have very specific support needs. Signed supervision agreements are now in place in respect of carer supervision and these agreements are reviewed as part of the carer annual review process. There is now a more dedicated kinship team and they ensure appropriate

emphasis on support/supervision requirements.

The manager was advised to review the placement process to demonstrate appropriate consideration of any risks, particularly associated with bedroom sharing, and also to ensure that, when a placement was made, that other young people already in placement and their placing social workers, were fully consulted. The risk assessment pro-forma for mainstream foster placements has been amended to ensure full consideration of any potentially hazardous behaviours and also considers any implications of potential bedroom sharing arrangements.

During the inspection completed in November 2005 the fostering Service was unable to evidence that it 'employs people suitable to work with children and to safeguard and promote their welfare' because of the serious shortfalls in personnel records. When inspected again in November 2006 the service had taken positive interim steps to address these shortfalls by establishing its own personnel records system. The personnel records developed by the fostering service included a comprehensive checklist detailing fully the information legally required in respect of staff employed by the service. Clear attempts had been made to obtain all these documents retrospectively, but not always successfully, and therefore some gaps remained in personnel records. Some inappropriate practices were still noted in terms of staff recruitment, for example insufficient references and no telephone checks on references. Files retained by the service, in relation to recent recruitments, which were examined during this inspection, contained all essential information. There remain, however, some concerns around staff recruitment, which are referred to in the body of the report and are subject to further recommendations.

Helping children to be healthy

The provision is satisfactory.

The fostering service has close working relationships with the centre for health and nurses are involved in carer training, regularly attend fostering team meetings and foster carer support groups and have been involved in the development of health recording tools for carers. Since last year a social work post has been funded within the centre for health. The LAC nurses note this as a very positive development, particularly in dealing with the emotional elements of some of the presenting health issues of looked after children. The mainstream fostering service has introduced a blue book, which operates as a health record that is updated during placement and moves with the young person. Although this record has been in use for some time, some carers do not have a blue book for the young people in placement. Mainstream foster carers are however, additionally required to complete a monthly summary in respect of each young person in placement, which has a specific section relating to health. This monthly summary is forwarded to the young person's placing social worker. Both mainstream and family link carers are also provided with good proforma recording sheets on which they are required to record any medication issued to young people during their placement. Placing social workers spoke highly of the commitment of family link carers to meeting young people's health needs: 'The child's health needs are extensive and the family link carer provides an exemplary

service to excellent standards, which has taken training, commitment and child focus to achieve'.

Foster carers have access to a good range of training opportunities to support their care of young people's health needs. All carers are required to undertake first aid training within the first year of approval and very specific health training is available for carers providing family link placements to young people with complex disabilities and health needs. All carers providing link placements to young people with epilepsy must attend training, provided by health professionals, every two years. All social workers, in the family link short breaks scheme, are trained manual handling assessors and able to provide valued input with foster carers on the scheme. Currently, social workers supporting young people with disabilities in mainstream foster placements, are not routinely provided with manual handling training and are therefore unable to provide the same level of support to carers. Carers undertaking basic manual handling training often need ongoing support to effectively put basic training into practice, in a safe way, with young people in placement. Foster carers and staff are able to access consultation from a clinical psychologist, based within the Child and Adolescent Mental Health Service (CAMHS), to support placements where young people's experiences have seriously affected their emotional health and well-being and their subsequent ability to function well within a family setting.

The parents of young people accessing the family link short breaks scheme are required to provide full health history information as well as written details of the young people's medication requirements. All medication supplied to link carers has to be provided in its original packaging and parental consent to emergency medical treatment is obtained at the commencement of the link placement. All young people with health needs, accessing the family link scheme, have written health protocols or health management plans, clearly specifying their needs and subject to annual review. This is not the case with young people, in mainstream fostering placements, with complex health needs. In respect of one placement, tracked during this inspection, a young person's severe and complex health issues and personal care needs, including a requirement for manual handling, had not been subject to appropriate risk assessment despite requests by the carer.

Protecting children from harm or neglect and helping them stay safe

The provision is satisfactory.

Northamptonshire County Council's human resources (HR) department was unable to release staff personnel files, to the team manager of the family link short breaks service, to be examined during this inspection. Time constraints did not allow for inspectors to travel to another office to view these files. During the previous two inspections the authority was unable to fully demonstrate that it 'employs people suitable to work with children and to safeguard and promote their welfare' because of the serious shortfalls in personnel records. During the last inspection the fostering service demonstrated that it had partially addressed the shortfalls by establishing its own personnel records system. The manager of the family link short breaks service provided a fully appropriate personnel record relating to a recently appointed social

worker.

Reorganisation and restructure within the authority has resulted in many elements of the recruitment process being devolved to team managers with a stated move towards a self-service approach. Team managers have responsibility for compiling and placing advertisements for staff, reviewing applications, inviting candidates for interview, sending for and assessing references, interviewing and appointing. There is access to policy and procedural guidance, on line training and pro-forma documents and to consultation with the human resources team. This system removes any independent oversight from the recruitment process, the involvement of large numbers of team managers promotes inconsistent practice and recruitment training is not currently compulsory for managers.

Health and safety risk assessments of carer households are completed as part of the carer assessment process of both mainstream and family link carers and these assessments are revisited annually as part of the carer review process. Although both mainstream carers tracked during this inspection were demonstrably providing safe and wholly appropriate placements for young people with complex learning difficulties and/or disabilities, there were major differences in the paperwork supporting that care. Comprehensive and commendable safe caring guidelines informed one mainstream placement and these had been shared with, and developed to reflect, respite provided by a family link carer. No written safe caring guidelines were provided in relation to the other carer household. The carers' handbook for carers providing family link short breaks details 'it might be advisable to have a family safe care policy' but this is not happening routinely. All family link carers are provided with a copy of the 'Safe and Sound' booklet which provides good guidelines on the safe care of young people receiving family based short breaks.

A good range of training opportunities are available to all carers covering safe care, child protection, behaviour management and safety in the home.

Young people tracked during this inspection were in long term foster placements with carers specifically recruited to meet their needs. There is excellent evidence of appropriate matching of these young people's identified needs to carer skills and, commendably, where appropriate, of the active involvement of the young people in determining what carer attributes were important to them. Where young people are referred for family link short break services, good care is taken to ensure appropriate matching. Full information is obtained from parents or full-time carers, placement requests are considered at monthly team meetings against carers available and introductory visits are tailored to young people's wishes and needs. Many family link placements have continued over many years providing young people and their parents with good continuity and stability. Some very positive comments were made by family link carers about working relationships with children's families and many carers made reference to positive introductory periods to promote the success of link placements. Good reference was made as well to financial support to facilitate involvement of the children in community social & leisure activities and to timely responses to requests for equipment needed. Many of the carers speak of long term and successful link placements, which have often supported young people with

disabilities through to adulthood: 'The link service is outstanding, the child is always the first and foremost priority', 'Very thorough initial and continual assessment of placement progress and my ability to meet the needs of the child'. Appropriate placement agreements are in place in respect of mainstream foster placements for looked after children.

The service has two fostering panels, each appropriately constituted and with an independent chair. The panels consider mainstream and family link applications and are a notable strength of the service. Panel minutes are completed to a very commendable standard and include a summary of the identified strengths and weaknesses of each application (as raised by Panel members) and a record of the reasons for the panel's ultimate recommendation to the agency decision maker. The minutes also admirably demonstrate panel members' knowledge and their exercise of a robust quality assurance function. Issues such as the frequency of both placing and supervising social worker visits to carer households and carers' take up of training are regularly commented on, as well as the guality of reports submitted in relation to approvals and reviews. Business meetings, involving fostering services management and panel chairs, are held quarterly and panel chairs feel that these provide good opportunities for information sharing and to confirm that any general issues raised by the panel are being appropriately addressed. There are clear policies and procedures relating to panel operation and comprehensive personnel files are retained on each panel member and these contain clear job descriptions and person specifications.

Helping children achieve well and enjoy what they do

The provision is satisfactory.

Both mainstream and family link carers and fostering service staff have good access to diversity and equality training. Fostering service staff recently attended a workshop where a document was launched to support assessments of prospective foster carers from all non-British backgrounds. Both the mainstream fostering service and the family link service have a recognised shortfall of carers from minority ethnic communities and continue to undertake targeted recruitment to address this. The family link scheme additionally recognises that it receives few referrals from ethnic minority communities and regularly circulates information about its service operates a heritage planning framework, which was viewed during the previous inspection, and comprises a comprehensive assessment, planning and monitoring tool, which should ensure that services delivered to young people are based on their racial, cultural and ethnic heritage. The document was not appropriate to placements tracked and was therefore not seen in use. The fostering service operates a support group specifically for its black carers.

The family link service provides aids and equipment to support young people with mobility difficulties to access the scheme and, where appropriate encourages parents to share equipment that is familiar to the young person, when they go for respite. An example of adaptation, to a mainstream foster carer's home, to facilitate the accommodation of a young person with mobility difficulties, was noted. However the adaptations do not fully meet the young person's needs without the supply of appropriate equipment. Although managers confirmed that carers would always be supported to access necessary equipment, this had not happened in this case and young people's dignity can be seriously compromised by such a situation. The family link scheme utilises a pro-forma risk assessment covering situations such as the provision of personal care, manual handling and the use of lifting equipment but risk assessments are not always completed where mainstream carers are providing similar care. Placing social workers referred to the completion of good risk assessments at time of placements with family link carers and to good consideration of care plans.

Young people tracked were being supported well to access special education provision and to take part in appropriate activities. Personal education plans and statements of special educational needs are current and are appropriately reviewed. The virtual school team monitors attendance and attainment of young people in mainstream foster placements and is actively involved in providing training to carers. Developments in the carer review format and improvements in carer recording of young people's placements ensure that educational progress is generally well reflected.

A selection of photographs, supplied by family link carers, provides a good demonstration that young people accessing the scheme have good opportunities to experience outings and activities to build self-confidence and develop skills. A telephone survey of parents and family link carers, undertaken by the service, provided positive feedback and indicated that parents and young people generally value the experience. Placing social workers certainly viewed young people's experience of family link placements as positive: 'Family link is a positive service that provides respite for families whilst giving disabled young people social opportunities that build self-worth and self-esteem. Links with families are carefully made and the service is tailored to the individual child's needs'; 'Provides life enhancing experiences for disabled children, including those with complex behavioural and health needs'. There is a strong focus within the family link short breaks service on the centrality of parents and the service has developed a range of policies and procedures to meet the particular needs of these young people and their families. Staff within the team have good knowledge and experience related to young people with disabilities and the team has close working relationships with the children with disabilities team, which is based in the same office.

Helping children make a positive contribution

The provision is good.

In the case of young people tracked during this inspection, sometimes complex contact arrangements, were being appropriately supported by foster carers and by the young people's social workers. Young people tracked were attending their LAC reviews and being encouraged to express their views. The views of young people in mainstream foster placements are also obtained at the time of the foster carer's annual review. The family link service holds an annual family support review where

the services provided to young people, who are not looked after, are reviewed to consider whether those services continue to be appropriate to meet their identified needs. Very good guidelines and a position statement have been produced by Northamptonshire's children and young people's service around disabled children participating in their reviews. The document details the various resources and tools available for assisting with this for example: CD rom, resource pack, books, websites, activities and games. Parents of young people receiving family link short breaks services are also appropriately consulted. Following the recent telephone survey some of the issues raised by parents have been pro-actively addressed by the service, including the instigation of visits to young people (not LAC) whilst in their family link placement, by social workers and family link staff, because parents felt there was a lack of oversight of these placements.

The mainstream fostering service seeks to obtain young people's views for the purpose of placement planning meetings and has developed its capacity to consult effectively with younger children with the introduction of a CD rom tool: 'Hi, pleased to meet you'. The service has also worked collaboratively with an independent fostering agency to develop its work with the birth children of foster carers. A first group meeting took place in October 2007 and was attended by 18 young people. Young people in foster care are now involved in preparation evenings for prospective foster carers where they provide their view of what makes a good carer.

The fostering service commissions an independent advocacy service, specifically for young people with special needs (SNAP), from Spurgeons. SNAP provides information, advice, advocacy, representation and support services to young people with disabilities and aged between 13 and 19. A range of attractively presented leaflets detail the services provided and the designated worker has good access to a range of communication mechanisms to work with young people who may have limited verbal communication skills and, where necessary, will support these young people to represent their views at LAC reviews and other meetings. The designated worker has links with the local authority children's rights officer. Currently the profile of this service is not high enough. Contact information is not included in the young people's guides to the fostering service or the family link service and the designated worker has not been involved in any presentation to or training of carers of disabled young people.

A very good example was seen during the inspection, of a person centred independence plan for a young person receiving family link support. The plan was very visual and addressed all areas of future support needs. The young person was clearly actively involved in developing the plan. Young people tracked had access to an independence group operated by the family link short breaks service.

Achieving economic wellbeing

The provision is not judged.

Organisation

The organisation is satisfactory.

Separate statements of purpose are produced for the mainstream fostering service and the family link short breaks service. Both are comprehensive, well-presented documents, include all required information and are appropriately reviewed. Guides for both services are available to children and young people.

Foster carer assessments examined during this inspection were all completed to a good standard and appropriately reflected carer competencies. Foster carer approvals and first annual reviews are presented to the fostering panel and, currently, every second review of a mainstream carer is also presented to the panel. The panel chair and panel advisor informed inspectors that the frequency of this was under review. In amending the system it is important that the independent scrutiny, which the panel currently exercises over the annual review process, is not lost. The carer review pro-forma documents provide a good overview of the carer's work through the year. The family link service has a number of contract carers who provide links for several young people at different times and sometimes carers transfer from providing a single link to contract carer status. Whilst this may not constitute a change of approval status in the sense that the carer is accommodating only one young person at any one time, the panel is not routinely being advised of the change in the carer's role.

In August 2005 a placement management service was set up to deal with referrals for placements of LAC. During the previous inspection inspectors were informed that this service was seen as the central element of Northamptonshire's aim to improve placement stability for looked after children, acting as the single point of referral for placement and having good management of and monitoring responsibility for, placements purchased from independent fostering providers. The system was noted to be working well during the previous inspection. Although the authority continues to have a large number of young people placed, both internally in fostering (233 at the time of submitting information for this inspection), and with independent fostering providers (120 at the time of submitting information for this inspection), the staffing complement of this service has been reduced to one assistant contracts manager with full-time administrative support. The post holder was unclear about cover for absence telling inspectors that the manager had given assurances that this would be addressed. During this inspection the panel chairs detailed that concerns had arisen about the quality of matching reports provided in relation to some recent placements with independent agencies. Staff within the fostering service advised that issues had additionally arisen around the appropriateness of some contractual agreements with independent agencies in terms of their capacity to demonstrate that young people's needs were fully met.

Two comprehensive training guides are produced annually detailing training available to staff and to carers. The carer training booklet includes courses for adopters, foster carers and family link carers and a clear indication of the target audience for each course. Some family link carers commented that they would value specific training on the transition process for young people with disabilities.

Staff feel that they receive a good level of formal support and supervision from their managers as well as appropriate informal support from colleagues. Carer records and discussions with carers demonstrate that they are generally well supported by their social workers and that they value this support. Mainstream carers receive regular supervision to a standard agenda but the family link service does not currently differentiate well between support and supervision, with the indication that carers are not receiving supervision. Some foster carers are being supervised by trainee social workers. Whilst these workers are being appropriately supervised and it is acceptable for unqualified workers to be involved in providing support to carers, the standards require that carers are supervised by a qualified social worker.

Issues were raised by some carers about payments not being timely and about changes to payment systems without warning or consultation. Some also cited difficulties in being able to contact the accounts department (a centralised business support desk deals with queries re-payments) when there were errors in payments. Family link carers receive only minimal payments and say that these have not increased for many years. Many placing social workers commented on the poor remuneration for family link carers and cited this as a probable cause of recruitment difficulties. The managers of the family link scheme and the mainstream fostering service met some time ago with the accounts payable department, following complaints from carers about the late payment of allowances and were assured that claims would be processed weekly and that carer queries would be responded to within eight hours. This does not appear to have resolved the problem. One carer visited waited over a month recently, for any payment, having accommodated a young person at a very expensive time of the year. Team managers do not have designated budgets to enable them to make interim payments to carers in crisis situations, and have to pursue a lengthy and time consuming process to access crisis funding when carers do not receive timely payments.

During last year a process of centralisation of administrative support was commenced within the authority, involving a proposed loss of dedicated administrative support to both the fostering service and the family link service. Dedicated fostering panel administrators were also put at risk during this process and subsequently one of two panel administrator roles has been vacated and not filled. This means there is now no appropriately experienced cover for the panel administrator's absence. Administrative staff still providing support to the fostering and family link services have become more distanced from the respective teams, reducing their capacity and ultimately their knowledge in relation to dealing with enquiries from prospective carers and new requests for services. Previously, dedicated administrative staff dealt knowledgably with sending out welcome packs, circulating consultation papers and answering direct queries from carers. Discussions with both administrative and social work staff, and with carers, detailed the potential negative impact of further distancing of the administrative role. The panel chairs have found particular difficulties with panel minutes completed by competent administrators with no awareness of the panel process.

Appropriate records are retained in relation to carers and young people in placement and both the fostering service and the family link service retain a separate record in relation to each young person placed, even in respect of looked after children, where a file is held by the placing social worker. This ensures that fostering workers have appropriate access to crucial information about young people in placement with their carers.

Standard 32, relating to family and friends placements, has not been inspected.

What must be done to secure future improvement?

Recommendations

To improve the quality and standards of care further the registered person should take account of the following recommendation(s):

- provide foster carers with as full a description as possible of the health needs of the young person, before a placement begins Clarify the carer's role in promoting the young person's health needs and support the carer to access the services needed to do this (NMS 12.3, NMS 12.6)
- operate sound employment practices in relation to staff, through clear written recruitment procedures, which follow good practice in safeguarding children and young people. All personnel responsible for recruitment and selection of staff are trained in, understand and operate these (NMS 15.2, NMS 18.2)
- provide safe caring guidelines for each foster home (NMS 9.3)
- support young people with disabilities to lead as full a life as possible, through the provision of appropriate equipment and demonstrate appropriate consideration of the potential hazards involved in its usage (NMS 7.6, NMS 6.6)
- ensure that appropriate systems are in place, where a local authority uses an agency to provide a foster carer, to monitor that the quality of care provided is clearly specified in the contract and that the agreed quality of care continues to be provided (NMS 16.7)
- ensure that each foster carer is supervised by a named, appropriately qualified social worker (NMS 22.3)
- employ a clear system of practical support for carers in respect of payments. Payments must be made promptly, at the agreed time and must cover the full cost of caring for any young person place and allowances and fees must be reviewed annually (NMS 22.7, NMS 29.1)
- demonstrate that administrative procedures are appropriate for dealing promptly with enquiries from prospective carers and new requests for services and that the level of administrative and clerical is appropriate to the needs of the fostering service (NMS 16.11, NMS 16.12).